

Informal Complaint Preliminary Information

Natural Gas Purchasing, Selling, Shipping, Transportation, or Gathering Practices

Contact Name for **Complainant**: _____

Company Name: _____

Company Address: _____

Company Phone/Fax/E-mail: _____

Contact Name for **Respondent**: _____

Company Name: _____

Company Address: _____

Company Phone/Fax/E-mail: _____

Description of Complaint: _____

How long has the problem described in the complaint existed? _____

Has complainant contacted the party that is the subject of the complaint? _____

If answer is "No", why not? _____

If answer is "Yes", then what response did the complainant receive? _____

What is the current status of negotiations between the complainant and the party about which the

complaint has been made? _____

Describe any other actions the parties have taken to resolve the problem: _____

What is the relief sought by the complainant? _____

Mail or fax completed form to:
Railroad Commission of Texas
1701 North Congress Avenue
Austin, Texas 78701
Attention: Market Oversight Section
or Fax Number 512-463-7962