

# Crested Butte South Metropolitan District

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## Billing Dispute Form

Water and sanitation services may be revoked by the District for non-payment of any valid fees. If you dispute a billing statement, you must pay at least the billing base rate for all billed services under protest and submit this completed Billing Dispute Form within thirty (30) days of the billing statement date. Submission of this form constitutes a request for a hearing before the Board of Directors at a regular meeting to contest the charges.

At the hearing, you will have the opportunity to present evidence and arguments regarding the disputed charges. If a balance is determined to be due, the District shall, if available, present repayment plan options at the hearing. The Board will issue a written decision resolving the dispute within ten (10) days following the hearing. Failure of the Board to issue a decision within this period shall be deemed a finding in your favor.

## Customer Information

Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Account Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Billing Information

Billing Statement Date: \_\_\_\_\_

Billing Amount in Dispute: \$\_\_\_\_\_

Date Payment Made (under protest): \_\_\_\_\_

## Dispute Details

Please describe the reason for your dispute. Attach additional pages or supporting documents (e.g., copies of bills, meter readings, receipts, correspondence) as needed.

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Customer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**District Use Only**

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

Board Decision (within 10 days): ☐ In favor of Customer ☐ In favor of District

Notes: \_\_\_\_\_

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