



BEFORE THE PUBLIC UTILITIES COMMISSION
OF THE STATE OF CALIFORNIA

FILED
8-10-16
04:59 PM

Eva Gabos,

Complainant,

vs.

Southern California Edison Company (U338E),

Defendant.

C1608004 (ECP)

Case (C.)

Expedited Complaint Procedure
(Rule 4.5)

COMPLAINANT	DEFENDANT
Eva Gabos 1564 Big Sky Drive Beaumont CA 92223 T-951-381-1674 Email: None provided	Southern California Edison Company Attn: Fadia Rafeedie Khoury Director & Managing Attorney 2244 Walnut Grove Avenue Rosemead CA 91770 T-626-302-6008 Email1: fadia.khoury@sce.com Email2: case.admin@sce.com

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF CALIFORNIA

(A)

Eva Gabos

COMPLAINANT(S)
vs.

(B)

Edison

DEFENDANT(S)
(Include Utility "U-Number", if known)

(for Commission use only)

(C)

Have you tried to resolve this matter informally with the Commission's Consumer Affairs staff?

YES NO

Has staff responded to your complaint?

YES NO

Did you appeal to the Consumer Affairs Manager?

YES NO

Do you have money on deposit with the Commission?

YES NO

Amount \$ _____

Is your service now disconnected?

YES NO

COMPLAINT

(D)

The complaint of (Provide name, address and phone number for each complainant)

Name of Complainant(s)	Address	Daytime Phone Number
Eva Gabos	1564 Big Sky Dr. Beaumont, CA 92223	951-381-1674

respectfully shows that:

(E)

Defendant(s) (Provide name, address and phone number for each defendant)

Name of Defendant(s)	Address	Daytime Phone Number
Southern CA Edison	P.O. Box 600 Rosemead, CA 91771-0001	1-800-684-8123

(F)

Explain fully and clearly the details of your complaint. (Attach additional pages if necessary and any supporting documentation)

Attached in back.

(G) Scoping Memo Information (Rule 4.2(a))

(1) The proposed category for the Complaint is (check one):

adjudicatory (most complaints are adjudicatory unless they challenge the reasonableness of rates)

ratesetting (check this box if your complaint challenges the reasonableness of a rates)

(2) Are hearings needed, (are there facts in dispute)? YES NO

(3) Regular Complaint Expedited Complaint

(4) The issues to be considered are (Example: The utility should refund the overbilled amount of \$78.00):

• Continuous overcharge.

(5) The proposed schedule for resolving the complaint within 12 months (if categorized as adjudicatory) or 18 months (if categorized as ratesetting) is as follows:

Prehearing Conference: Approximately 30 to 40 days from the date of filing of the Complaint.
 Hearing: Approximately 50 to 70 days from the date of filing of the Complaint.

Prehearing Conference (Example: 6/1/09):	8/17/2016
Hearing (Example: 7/1/09)	9/16/2016

Explain here if you propose a schedule different from the above guidelines.

N/A

(H)

Wherefore, complainant(s) request(s) an order: State clearly the exact relief desired. (Attach additional pages if necessary)

N/A

(I)

OPTIONAL: I/we would like to receive the answer and other filings of the defendant(s) and information and notices from the Commission by electronic mail (e-mail). My/our e-mail address(es) is/are:

(J)

Dated Beaumont, California, this 28 day of July, 2016
 (City) (date) (month) (year)

[Signature]
 Signature of each complainant

(MUST ALSO SIGN VERIFICATION AND PRIVACY NOTICE)

(K)

REPRESENTATIVE'S INFORMATION:

Provide name, address, telephone number, e-mail address (if consents to notifications by e-mail), and signature of representative, if any.

Name of Representative:	
Address:	
Telephone Number:	
E-mail:	
Signature	

VERIFICATION
(For Individual or Partnerships)

I am (one of) the complainant(s) in the above-entitled matter; the statements in the foregoing document are true of my knowledge, except as to matters which are therein stated on information and belief, and as to those matters, I believe them to be true.

I declare under penalty of perjury that the foregoing is true and correct.

(L)

Executed on 7/28/2016 , at Beaumont , California
(date) (City)

[Handwritten Signature]
(Complainant Signature)

VERIFICATION
(For a Corporation) - *not corporation*

I am an officer of the complaining corporation herein, and am authorized to make this verification on its behalf. The statements in the foregoing document are true of my own knowledge, except as to the matters which are therein stated on information and belief, and as to those matters, I believe them to be true.

I declare under penalty of perjury that the foregoing is true and correct.

(M)

Executed on _____ , at _____ , California
(date) (City)

Signature of Officer

Title

(N) **NUMBER OF COPIES NEEDED FOR FILING:**

If you are filing your formal complaint on paper, then submit one (1) original, six (6) copies, plus one (1) copy for each named defendant. For example, if your formal complaint has one defendant, then you must submit a total of eight (8) copies (Rule 4.2(b)).

If you are filing your formal complaint electronically (visit <http://www.cpuc.ca.gov/PUC/efiling> for additional details), then you are not required to mail paper copies.

(O) Mail paper copies to: California Public Utilities Commission
Attn: Docket Office

505 Van Ness Avenue, Room 2001
San Francisco, CA 94102

PRIVACY NOTICE

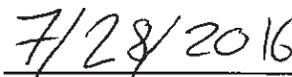
This message is to inform you that the Docket Office of the California Public Utilities Commission ("CPUC") intends to file the above-referenced Formal Complaint electronically instead of in paper form as it was submitted.

Please Note: Whether or not your Formal Complaint is filed in paper form or electronically, Formal Complaints filed with the CPUC become a public record and may be posted on the CPUC's website. Therefore, any information you provide in the Formal Complaint, including, but not limited to, your name, address, city, state, zip code, telephone number, E-mail address and the facts of your case may be available on-line for later public viewing.

Having been so advised, the Undersigned hereby consents to the filing of the referenced complaint.



Signature



Date



Print your name

Utility Complaint

Utility Provider: Southern California Edison

Customer: Eva Gabos

Account Number: 2-38-162-8791

Service Address: Southern California Edison, P.O. Box 600, Rosemead, CA 91771-0001

Mailing Address: 1564 Big Sky Dr. Beaumont, CA 92223

Customer Phone Number: (951) 381-1674

Details Of Complaint

My complaint is for continuous billing overcharging. Over the past years through Edison, both my husband and I would be receiving outrageous bills, especially for only two people living in a home. As compared with my neighbors, a family of 9, whose bill was less. I've always used little to no electricity.

I've brought my concerns to Edison, but they have ignored my disputes, sending me false letters saying what I have used. They claimed to have investigated my concerns. I had called Edison asking for a seal to put on the electric box, to verify my electricity wasn't tampered with. A gentleman came to my home with no worker badge, putting a lock on the electricity box then continuing to take the key with him. Later a lock was sent to me containing the same key. I later called Edison about the lock and key, as well as the gentlemen who came to my home. They then claimed they had absolutely no traces of the man who came. My assistant and I went to go report the case to the police, who then suggested we change the locks that were put on the electricity box. After I insisted for months that someone come to my home, a gentleman from Edison was finally sent. He was able to put seals on the electricity box, saying that none of the locks and keys matched. I never received any of the money stolen through my electricity by Edison's services. Though Edison's letter insisted everything was investigated properly, they wrongfully were trying to obtain their customer's money.

Below are the billing statements. Ranging up to the \$300.00 on up. In no way possible should my bills from Edison be showing such an outrageous amount.

After years of continuous stress of overcharging, I am left with no option but to contact the California Public Utilities Commission for immediate help for billing adjustments. I am seeking out help to take away the stress, affecting my overall health. Thank you for your time and investigating my case through Edison.

-Eva Gabas

Handwritten signature of Eva Gabas, consisting of the name 'Eva Gabas' written in a cursive script.

Attachment Of The Correct Calculating

After careful calculations, below is attached the documentation of how much my electric bill should be costing.



Go paperless at www.sce.com/ebilling. It's fast, easy and secure.

P.O. Box 600
Rosemead, CA
91771-0001
www.sce.com

Your electricity bill

ROSENSTEIN, MELVYN / Page 1 of 12

For billing and service inquiries call 1-800-684-8123,

Customer account 2-21-080-7897

Date bill prepared: Oct 8 '15

38729 RANCHO VISTA DR
BEAUMONT, CA 92223-8051

Your account summary

Amount of your last bill	\$0.00
Balance forward	\$0.00
Your new charges	\$201.39
Total amount you owe by Oct 27 '15	\$201.39

Summary of your billing detail

Service account	Service address	Billing period	Your rate	New charges
3-037-5332-80	38729 RANCHO VISTA DR BEAUMONT, CA	Jul 29 '15 to Aug 27 '15	D-CARE	\$119.23
3-037-5332-80	38729 RANCHO VISTA DR BEAUMONT, CA	Aug 27 '15 to Sep 28 '15	D-CARE	\$82.16
				\$201.39

Things you should know

You may notice a change in your billing statement...

Effective October 1, 2015, your rates changed. Your change may vary based on usage. For details about these changes, please visit www.sce.com/bill_change



P.O. Box 600
Rosemead, CA
91771-0001
www.sce.com

Your electricity bill

ROSENSTEIN, MELVYN / Page 1 of 8

For billing and service inquiries call 1-800-684-8123,
24 hrs a day, 7 days a week

Customer account 2-21-080-7897

Date bill prepared: Oct 5 '13

Service account 3-037-5332-80
38729 RANCHO VISTA DR
BEAUMONT, CA 92223

Rotating outage Group A071

Your account summary

Amount of your last bill	\$578.29
Payment we received on Sep 17 '13 - thank you	-\$264.10
Payment we received on Sep 20 '13 - thank you	-\$314.19
Balance forward	\$0.00
Your new charges	\$236.94
Total amount you owe by Oct 24 '13	\$236.94



Compare the electricity you are using

For meter 222012-167381 from Aug 26 '13 to Sep 25 '13
Total electricity you used this month in kWh

1,499

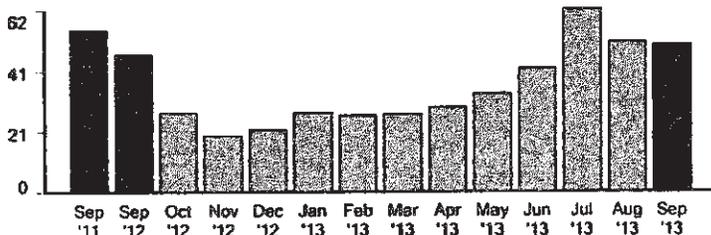
Your next billing cycle will end on or about Oct 25 '13.

Your daily average electricity usage (kWh)

2 Years ago: 55.16

Last year: 46.91

This year: 49.97



nd 10/10/13
#218

Please return the payment stub below with your payment and make your check payable to Southern California Edison.
If you want to pay in person, call 1-800-747-8908 for locations, or you can pay online at www.sce.com.

(14-574)

Tear here

Tear here

- Service voltage: 240 volts
- Your summer baseline allowance: 465.0 kWh
- You saved \$111.42 this month by being enrolled in the CARE program.

George 5312276

11/6/2013



P.O. Box 600,
Rosemead, CA
91771-0001
www.sce.com

ROSENSTEIN, MELVYN / Page 1 of 4

For billing and service inquiries
call 1-800-551-4499, 24 hrs a day, 7 days a week

Customer account 2-21-080-7897

Date notice prepared: Sep 17 '13

38729 RANCHO VISTA DR
BEAUMONT CA 92223-8051

Disconnection notice past due utility service and other services

\$ Past due \$314.19 must be paid by 5 pm on Sep 25 '13

This is your final notice. Please act today to avoid a costly service interruption.

If you pay by 5 pm on Sep 25 '13 you will owe:

Utility services past due amount	\$305.05
Other services past due amount**	\$9.14
Total amount due	\$314.19

If your service is disconnected, you will owe:

Utility services past due amount	\$305.05
Other services past due amount**	\$9.14
Security deposit amount to be determined	
Service Connection charge	\$6.00
Total amount due	\$320.19

pd E-CHECK # 206

(14-665) Tear here

Bring in this entire disconnection notice when you pay

Tear here



Customer account 2-21-080-7897
Please write this number on your check. Make your
check payable to Southern California Edison.

Amount due by Sep 25 '13 \$314.19

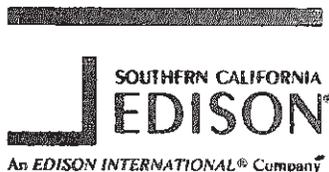
Amount enclosed \$

FINC 09172013 P6 C03 T0052 014087 01 AT 0.3810 C016



ROSENSTEIN, MELVYN
38729 RANCHO VISTA DR
BEAUMONT CA 92223-8051

Payment information - page 3
Do not mail your payment.



Go paperless at www.sce.com/ebilling. It's fast, easy and secure.

P.O. Box 600
Rosemead, CA
91771-0001
www.sce.com

Your electricity bill

GABOS, EVA / Page 1 of 6

For billing and service inquiries call 1-800-684-8123,

Customer account 2-38-162-8791

Date bill prepared: Jun 24 '16

Service account 3-044-7946-42
1564 BIG SKY DR
BEAUMONT, CA 92223

Rotating outage Group A005

Your account summary

Previous Balance	\$40.99
Payment Received 06/06	-\$40.99
Balance forward	\$0.00
Your new charges	\$79.39
Total amount you owe by Jul 13 '16	\$79.39

Compare the electricity you are using

For meter 222011-911372 from May 24 '16 to Jun 23 '16
Total electricity you used this month in kWh

469

Your next billing cycle will end on or about Jul 25 '16.

Your daily average electricity usage (kWh)

2 Years ago: N/A

Last year: N/A

This year: 15.63



* No data available

Please return the payment stub below with your payment and make your check payable to Southern California Edison.
If you want to pay in person, call 1-800-747-8908 for locations, or you can pay online at www.sce.com.

(14-574)

Tear here

Tear here



Customer account 2-38-162-8791
Please write this number on your check. Make your
check payable to Southern California Edison.

Amount due by Jul 13 '16 **\$79.39**

Amount enclosed \$

STMT 06242016 P4 C03 T0069 012939 01 AV 0.3730 C014



GABOS, EVA
1564 BIG SKY DR
BEAUMONT, CA 92223-3314

P.O. BOX 600
ROSEMEAD, CA 91771-0001

- [Energy Star New Homes](#)
- [Commercial Rebates](#)
- [Agricultural Rebates](#)
- [Industrial Rebates](#)
- [Contact Us](#)
 - [Enhanced Phone Service Guide](#)
 - [Privacy Statement](#)
- [About CPI](#)
 - [Board](#)
 - [Operation Round Up](#)
 - [Charitable Trust](#)
 - [Power Partners](#)
 - [Employment](#)
 - [Frequently Asked Questions](#)
 - [Links](#)
 - [Register to Vote](#)
- [SmartHub Access](#)
- [SmartHub information and FAQs](#)
- [PrePay](#)
- [Payment Services](#)
- [Bill Estimator](#)

Energy Efficiency and rebates

[Save More →](#)

RURALITE DIGITAL EDITION

[Click here →](#)

Online Usage Calculator

To calculate an estimated monthly electrical bill for your home, please select a QUANTITY in the applicable Electrically Powered Items field. Once you've filled out the fields that are relevant to your home, click the "Calculate" button at the bottom of this form. This will give you both an estimated monthly KWh usage and bill for your home (for an average family of four).

KITCHEN

Electrically Powered Items	Quantity	Average monthly KWh	KWh/month	\$/month
Refrigerator	1 ▼	57	57	4.62
Freezer	1 ▼	58	58	4.70
Dishwasher	1 ▼	13	13	1.05
Range / Oven	1 ▼	24	24	1.94
Microwave	0 ▼	11		
Coffee Machine	1 ▼	10	10	0.81
Popcorn Maker	0 ▼	4		

Toaster Oven

0 ▾

9

DOMESTIC WELL PUMPS

Electrically Powered Items	Quantity	Average monthly KWh	KWh/month	\$/month
Well Pump 1/2 HP	0 ▾	90		
Well Pump 3/4 HP	0 ▾	135		
Well Pump 1 HP	0 ▾	180		
Well Pump 1.5 HP	0 ▾	270		
Well Pump 5 HP	0 ▾	900		

ENTERTAINMENT

Electrically Powered Items	Quantity	Average monthly KWh	KWh/month	\$/month
TV 35"	0 ▾	10		
TV 45"	0 ▾	17		
TV 55"	0 ▾	25		
TV 60"	0 ▾	29		
Stereo	0 ▾	5		
CD Player	0 ▾	1		
Clock Radio	0 ▾	3		
MP3 Player	0 ▾	1		
Tablet	0 ▾	1		
Computer	1 ▾	21	21	1.70
Mobile Phone	1 ▾	1	1	0.08
Cordless Phone	1 ▾	2	2	0.16
Answering Machine	1 ▾	1	1	0.08
Blu-Ray Player	0 ▾	3		
DVD Player	0 ▾	3		
DVR	0 ▾	23		
HD Receiver	0 ▾	14		
Satellite Dish	0 ▾	2		
Video Game System	0 ▾	15		

OTHER HOUSEHOLD EQUIPMENT

Electrically Powered Items	Quantity	Average monthly KWh	KWh/month	\$/month
Washing Machine	1 ▾	6	6	0.49
Clothes Dryer	1 ▾	57	57	4.62

Lighting # of Rooms	2 ▼	10	20	1.62
Nightlight	3 ▼	1	3	0.24
Aquarium	0 ▼	460		
Vacuum Cleaner	1 ▼	3	3	0.24
Air Purifier	0 ▼	49		
Dehumidifier	0 ▼	21		
Humidifier	0 ▼	5		
Portable Fan	1 ▼	6	6	0.49
Hot Tub	0 ▼	600		
Window Air Conditioner	0 ▼	134		
Ceiling Fan	0 ▼	85		
Electric Blanket	0 ▼	2		
Water Bed Heater	0 ▼	175		
Water Heater	0 ▼	405		

Estimated monthly **household*** usage: 282 kWh;

Estimated monthly **household*** bill: \$ 22.84

***Heating usage not included in household totals**

HEATING EQUIPMENT 4 HRS / DAY

Supplemental/alternate heat	Quantity	Units
Wood Stove	0 ▼	Cords per heating season
Pellet Stove	0 ▼	Bags per heating season
Propane Heater / Furnace	0 ▼	Gallons per heating season
Oil Furnace	0 ▼	Gallons per heating season

Estimate is based on a 6-month heating season

Electrically Powered Items	Quantity	Average monthly KWh	KWh/month	\$/month
Furnace Fan	0 ▼	90		
Furn 15 KW ~ 1100 sq. ft.	0 ▼	1824		
Furn 20 KW ~ 2000 sq. ft.	0 ▼	2434		
Furn 25 KW ~ 3000 sq. ft.	0 ▼	3040		
Baseboard Lin. Feet	0 ▼	45.6		
Wall Heaters @ 2000 w	0 ▼	365		
1500 w Portable	0 ▼	274		
Heat pump fan	0 ▼	90		
Heat pump 800-1100 sq. ft.	0 ▼	1094		
Heat pump 1100-2000 sq. ft.	0 ▼	1460		
Heat pump 2000-3000 sq. ft.	0 ▼	1824		

Estimated monthly **heating** usage: 0 kWh

Estimated monthly **heating** bill: \$ 0.00

ESTIMATED MONTHLY KWh USAGE

282

ESTIMATED MONTHLY BILL*\$ 39.34

* Monthly bill includes basic service charge and tiered usage discounts, where applicable. Estimates are based on national average.

[Back to top](#)

© 2016 Consumers Power Inc. 541-929-3124 Office 800-872-9036 Toll free