To: 4072103113@fax.pgworks.com 06/20/24 11:27 AM Page 1 of 2



Your address here

From: "Jackson, Gilda Y"

DATE:	June 20, 2024
ATTN:	4072103113@fax.pgworks.com
FROM:	"Jackson, Gilda Y"
SUBJECT:	062024 - 6633 HADDINGTON LANE.pdf

Note:

Please find the PDF attached.

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Opt-Out: Not Defined

Philadelphia Gas Works

PREPARED BY: GJACKSON



PGW Credit and Collections Department Phone: (215) 978-1053

Fax: (215) 398-3352

ACCOUNT PAY-OFF INQUIRY FORM

disclosure by any other entity	y: This document contains con or person is strictly prohibited. on to us by mail without making	If you have recei				
A. TITLE AGENCY/I	AW FIRM INFORM	ATION (TIL		SSECTION	YOUN	
Authorization: By submitting this form to PGW, you represent and			dicertify (i) that you are authorized by the owner of the below property to request payoff on you submit is to the best of your knowledge true, correct and complete. Date of Settlement:: 6/26/2024 Requestor Name (Print Clearly): PETER WATSON Facsimile #: (407) 210-3113 Email: MLS@STELLARIPL.COM PGW Account #(s):			
•	☐ Mixed Use Rental ☐ Residenti	ial Rental 🔲 Owne	r Occupied 🔲 U	nknown		
If Sheriff Sale, Defendant Name: _ Judgment/Lien Judgment/Lien Judgment/Lien		File Date: File Date: File Date:				
Failure to provide accurate ir the date PGW faxes it to you No Record of Account-(i) Record of Account: Meter#: Meter#: Meter#:	information provided by PGW beformation could affect the accuration. This statement is not a final before type and status of services with the following of the	racy of the informa ill which means th th owner, and (ii) re-c	ation reported by at additional char ontact PGW	PGW. The infor ges may be imp 1/2024	mation provided in thosed for additional m	nis form is valid as of etered usage.
List Of All Debt				_		
Account#:	Customer of Record:	Start Date: 9/14/2022	End Date: 2/10/2023	Amount: \$ 3,258.45	Paid Through Date: 2/10/2023	\$ 3,927.31
Judgment/Lien	Docket #:		File Date:		TOTAL AMO	UNT DUE:
Judgment/Lien	Docket #:				•	
Judgment/Lien	Docket #:				\$ 3,927.31	
Make <u>checks payable</u> for t above to <u>PGW</u> and return	TAW FIRM PAYME the "TOTAL AMOUNT DUE" as this form. Forward with payme	s stated ent to:	80 R PAYMENT I	0 W. Montgor Philadelp Attn: Lie	ection Departmen nery Avenue, 3 rd (ohia, PA 19122 ns & Judgments	lloor
The "Paid Through Date" listed above may not include the final bill. If the owner is terminating service as of the settlement date, please provide the owner's mailing address for the final bill:				Ai	DDRESS	

____ DATE: 6/20/2024

Opt-Out: Not Defined

_____ PAGE <u>1</u> OF <u>1</u>