



## Minnesota Escrow Form Instructions

Frontier has investigated your voice phone service dispute and has provided the results to you. Your payment in full for the amount communicated to you is due. If you are not satisfied with Frontier's resolution of the matter, you may elect to establish an escrow for the disputed amount while you seek further Commission review of the matter. To exercise this option, you must submit the entire payment to Frontier and direct Frontier to place the disputed voice service charges of the bill in escrow. To submit a payment in escrow, you must make payment of the entire amount due as shown on the bill, and complete and submit the attached Minnesota Escrow Form. Once you complete all three pages, please send them as follows:

- The Frontier page must be sent to Frontier at the address shown at the bottom of its page.
- The Public Utilities page must be forwarded by you to the Public Utilities Commission at the address shown at the bottom of its page.
- You should retain the Customer Copy.

**Please note:** This process applies to disputes regarding voice telephone services only; broadband, internet and video services are excluded and any request for an escrow related to broadband, internet or video service will be denied.



## Minnesota Escrow Form (to be sent to Frontier Communications)

Customer name: \_\_\_\_\_

Customer address: \_\_\_\_\_

Customer Frontier telephone number: \_\_\_\_\_

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

Total bill amount: \_\_\_\_\_

Disputed portion of bill amount: \_\_\_\_\_

Explanation of why the Frontier's resolution of the dispute is unsatisfactory:

---

---

---

---

Once payment of your full bill amount has been submitted, submit this page to Frontier  
at:

**Frontier**  
**P.O. Box 5166**  
**Tampa, FL 33675**

Or fax toll-free to  
1.888.609.9919



## Minnesota Escrow Form (to be sent to the Public Utilities Commission)

Customer name: \_\_\_\_\_

Customer address: \_\_\_\_\_

Customer Frontier telephone number: \_\_\_\_\_

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

Total bill amount: \_\_\_\_\_

Disputed portion of bill amount: \_\_\_\_\_

Explanation of why the Frontier's resolution of the dispute is unsatisfactory:

---

---

---

---

**Submit this page with the Minnesota Public Utilities Commission at:**

**Minnesota Public Utilities Commission  
121 7th Place E, Suite 350  
Saint Paul, MN 55101-2147**



## Minnesota Escrow Form (Customer Copy)

Customer name: \_\_\_\_\_

Customer address: \_\_\_\_\_

Customer Frontier telephone number: \_\_\_\_\_

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

Total bill amount: \_\_\_\_\_

Disputed portion of bill amount: \_\_\_\_\_

Explanation of why the Frontier's resolution of the dispute is unsatisfactory:

---

---

---

---

**Keep this page for your records.**