EVERSOURCE

Eversource Customer Service
P.O. Box 270
Hartford CT 06141-0270
Eversource.com

August 7, 2026

XXXXXXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXX
XXXXXXXXXXXXXXXX

RE: Identity Theft Claim
Account: ##########
XXXXXXXXXXXXXXXXXXX
Dates of Service: DD-MM-YYYY - DD-MM-YYYY

Dear Xxxxxxxxx:

Thank you for notifying us about the potential identity theft. Identity theft is a felony crime, and Eversource takes this very seriously. Falsification of information is against the law and charges can be brought against a party falsely filing an identity theft claim. Eversource also understands the importance of protecting personal information and we are ready to work with you to address the matter promptly.

After a preliminary search, Eversource has confirmed that public records match the information Eversource has for the account listed above. Therefore, in order for us to process your claim, please provide us with all of the following documentation.

1. Full official detailed police report confirming the account is fraudulent
2. A completed and notarized Eversource ID Theft Affidavit
3. A copy of a valid government-issued photo ID, driver's license, or passport
4. Proof of residency or a copy of your utility bill from two other companies during the time the disputed bill occurred

The documentation can be emailed to RRCollections@eversource.com, faxed to 1-866-307-2157 or mailed to:

Receivables Recovery Department
Eversource
P.O. Box 270
Hartford, CT 06141-0270

Once we receive the documentation, we will let you know the results of your claim in writing in approximately 30 days, and we will have your credit report updated, if applicable. If you have any questions or need further information, please call our Customer Service Center at 800-286-5000. Our representatives are available to assist you Monday through Friday from 8 a.m. - 6 p.m.

Sincerely,

Credit Center
Connecticut
Eversource

Enclosures

Eversource Identity Theft Affidavit

Before completing this affidavit, Eversource recommends that you:

- ***Place a fraud alert on your credit reports and review the reports for signs of fraud.***
- ***Close the accounts you know or believe have been tampered with or opened fraudulently.***

About You

Full Legal Name: _____
First *Middle* *Last* *Suffix*

Commonly Used Name: _____
(if different from above) *First* *Middle* *Last* *Suffix*

Date of Birth: _____ **Last 4 Digits of Your Social Security #**_____
mm/dd/yyyy

Driver's License or State ID #: _____

Current Address: _____ _____
Number & Street *Apt., Suite, etc.*

_____ _____
City, State, ZIP *Country*

I have Lived at this Address Since: _____
mm/dd/yyyy

Please Answer Each of the Following Questions:

- **Do you need new electric or gas service? If so, please specify the address:**

  _____

- **Have you ever had electric or gas service in CT, MA or NH in the past? If so, list all the addresses where you have had service, and the approximate dates. (If more than four addresses, please include on a separate page.)**

  Address 1: _____

  Address 2: _____

  Address 3: _____

  Address 4: _____

- **Do you know anyone who might have started service in your name? Please provide details below.**

  _____

  _____

- **Do you know who currently lives, or has lived, at the location being disputed?**

  _____

- **Have you ever lived at the location being disputed? If so, please specify dates.**

  _____

- **List all the addresses you have lived at in the past five years. (If more than three, please include on a separate page.)**

  Address 1: _____

  Address 2: _____

  Address 3: _____

- **What is/are your current phone number(s)? Please list below and specify the type of phone (home, work cell, etc.). Be sure to include area code for each.**

  _____

  _____

- **List all the phone numbers (including area codes) you have had in the past five years . Please specify type (home, work, cell, etc.), the time frame for each.**

  _____

  _____

About You at the Time of the Incident

(if different from above)

Full Legal Name: _____
First *Middle* *Last* *Suffix*

Address: _____ _____
Number & Street *Apt., Suite, etc.*

_____ _____
City, State, ZIP *Country*

Information About the Incident

How Did You Become Aware of the Incident? _____

_____

_____

_____

Please Provide a Description of the Incident Including the Account Number(s) and Address(es) Included in the Complaint and how a possible Identity Thief may have Gained Access to your Information:

_____

_____

_____

_____

_____

_____

_____

Declarations (Circle One)

I Did	**or**	**Did Not**	**authorize anyone to use my name or personal information to obtain services as described in this report**
I Did	**or**	**Did Not**	**receive any money, goods, services or any other benefits as a result of the events described in this report**
I Am	**or**	**Am Not**	**willing to work with law enforcement if charges are brought against the person(s) who committed the fraud**
I Do	**or**	**Do Not**	**authorize any and all account information to be provided to law enforcement, if requested, for purposes of this investigation**

Please Read and Sign in the Presence of a Notary

I *certify, to the best of my knowledge and belief, all of the information on and attached to this affidavit is true, correct, and complete and made in good faith. I understand that this affidavit and the information it contains may be made available to federal, state, and/or local law enforcement agencies for such action within their jurisdiction as they deem appropriate. I understand that knowingly making any false or fraudulent statement or representation to law enforcement may violate federal, state, or local criminal statutes and may result in a fine, imprisonment, or both.*

Signature _____ **Date Signed (mm/dd/yyyy)** _____

Print Name _____

Notary Signature _____

Notary Printed Name _____