



Complaint Resolution Process

DTE will designate a facility representative who will respond to calls placed to the toll-free phone number 1-855-227-3245, and post contact information at the facility location. DTE will provide a description of the complaint resolution process and make the attached form available to residents and businesses.

Complaints can be mailed to:
Wind Development Program Team
Two Towne Square
Suite 700
Southfield, MI 48076

Or sent by email to: RERPS@DTEEnergy.com

The facility representative will make reasonable efforts to respond to all complaints from residents and businesses within 48 hours (during normal business hours) of receipt of a telephone complaint. Telephone complaints will be confirmed in writing, signed and dated by the complainant, and mailed to the address provided on the information sheets within 5 business days from the date of the complaint.

Monthly complaint reports will be provided to the township in writing, and summaries will be presented at regular township board meetings as needed/requested during the first 36 months of the project, and quarterly thereafter.

Any confirmed problems will be corrected as soon as reasonably possible, and in all cases will be investigated within 21 days of the receipt of the complaint. Unless an extension has been agreed upon, a proposed resolution to the complaint shall be forwarded to the complainant within 30 days of receipt of the complaint, or if no action is to be taken, a detailed explanation of why no action is appropriate.

If DTE and the complainant desire additional time to resolve the complaint, they may agree, in writing, to an extension of time to resolve the complaint.

Complaint resolution process is intended to be implemented immediately and to continue throughout the duration of the project.



Complaint Resolution Form

DTE Energy Wind Parks – Mail to: Wind Development Program Team
One Energy Plaza, GO1000
Detroit, MI 48226-1279
Email: rerps@dteenergy.com, Phone 1-855-227-3245

Complaint Number:	Date:
Project: Brookfield Wind Park	Complainant Title:
Complainants Name:	
Complainants Signature:	
Complainant Address:	
Complainant Phone #:	

Description of Complaint _____ _____

Corrective Action _____ _____
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The undersigned agree that the subject complaint is adequately described herein and that the specified corrective action is appropriate. Complainant Signature: _____ Date: _____

The undersigned agree that the subject complaint has been adequately resolved and that no further action is required. Complainant Signature: _____ Date: _____ Complaint Control Office Signature: _____ Date: _____
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