

## Senior Citizen Discount Application Form

Account Number: \_\_\_\_\_

Service Address: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

### ELIGIBILITY

To qualify for the Senior Citizen Discount, applicants must be 65 years of age or older and the utility account must be in their name for the service address listed above. Proof of age (such as a government-issued ID) is required.

### DISCOUNT REQUEST

I, the undersigned, request enrollment in the City of Freeport Utilities Senior Citizen Discount Program. I certify that I am at least 65 years of age, the account holder for the listed service address, and understand that I must notify the City if eligibility requirements are no longer met.

Customer Signature: \_\_\_\_\_

### OFFICE USE ONLY

Proof of Age Verified:  Yes  No **SCAN COPY OF ID AND SAVE TO CUSTOMERS ACCOUNT**

Verified By: \_\_\_\_\_

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