



## REFUSE DISCOUNT - SENIOR & 100% DISABLED VETERAN RESIDENTS DISCOUNT ELIGIBILITY POLICY

\_\_\_\_\_  
Name (First, Last)

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

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

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Utility Billing Account Number

\_\_\_\_\_  
Today's Date

.....  
**Discount Eligibility**

Senior Discount      Date of Birth: \_\_\_\_\_  
(Valid Picture ID)

100% Disabled Veteran      Date of Letter: \_\_\_\_\_  
(Department of Veteran's Affairs)

.....  
***For Office Use Only:***

Staff has verified that the resident has provided the proper documentation to demonstrate proof of eligibility of the senior or 100% disabled veteran discount for refuse services.

\_\_\_\_\_  
Village Staff Signature

\_\_\_\_\_  
Date