Account No: \_\_\_\_\_

## APPLICATION FOR SENIOR CITIZEN DISCOUNT ON SOLID WASTE COLLECTION FEES PURSUANT TO ORDINANCE 2008-41.

I \_\_\_\_\_\_ am 65 years of age or older (*must show proof of age*). I reside at \_\_\_\_\_\_, Griffith, Lake County, Indiana, which is a single family residential dwelling unit or single family unit of a two family dwelling (*must show proof of ownership, i.e., tax bill or valid real estate lease, and utility bill in the senior citizen's name*). I reside at that address at least nine (9) months out of the calendar year. No one else living in the above single family dwelling has requested or is receiving a senior citizen discount.

I affirm under the penalties of perjury that the above statements are true and accurate.

Name (print)

Signature

Date

<u>Internal Use:</u> Proof of age: Proof of ownership or lease: Utility bill name & account number: Checked By: