

**REQUEST FOR SENIOR DISCOUNT  
FY2024 CURBSIDE RUBBISH & RECYCLING FEE**

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

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

Street Address: \_\_\_\_\_

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

The above statements are true. Signed under the penalties of perjury.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Daytime telephone number

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**FOR OFFICE USE ONLY:**

\_\_\_ Granted

\_\_\_ Denied

Original Amount \_\_\_\_\_

Abatement Granted \_\_\_\_\_

Balance Due \_\_\_\_\_

APPROVAL:

\_\_\_\_\_  
Business Administrator