



**APPLICATION FOR SENIOR CITIZENS RATE  
FOR  
WATER, SEWER, AND GAS  
CITY OF AMERICUS**

**NAME**\_\_\_\_\_

**SERVICE  
ADDRESS**\_\_\_\_\_

**MAILING  
ADDRESS**\_\_\_\_\_

**ACCOUNT NUMBER**\_\_\_\_\_

**NAME, SOCIAL SECURITY NUMBER OF ACCOUNT HOLDER THAT QUALIFIES  
LIVING AT THIS ADDRESS:**

**NAME**

**SOCIAL SECURITY**

1. \_\_\_\_\_

**AFFIDAVIT OF CLAIMANT**

**I do solemnly swear that the above statements made in support of this application are true and correct, that I live at the above address for which this discount is claimed, that this address is my principal residence, and that the water, sewer, and gas bill are billed in my name. I further swear that I am 62 years of age or older and that no transaction has been made in collusion with another for the purpose of obtaining this discount contrary to law.**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**CLAIMANT**

**Received by:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**(Authorized City Employee)**

\_\_\_\_\_  
**City Records changed by:** \_\_\_\_\_ **DATE:** \_\_\_\_\_