Application for
Senior Citizen/Disabled Persons Discount Program
City of Adairsville
Solid Waste Pick-up Service

I am applying for the senior citizen and/or disabled persons discount offered by the City of Adairsville. I understand that the program allows for a *10%* discount on the monthly garbage pick-up service.

I further understand that I must meet the following criteria as of the date of this application in order to qualify for the discount. I hereby understand and affirm that the following is true:

- I am sixty-five (65) years of age or older **OR** disabled (*Proof of age or disability are required*)
- I live at the below address and this is my primary residence. (*I may only apply for this discount at my primary residence*)
- I live within the City of Adairsville.
- The water/garbage service at this address is currently in my name.
- The City has the right to verify the information provided by me in this application and if such verification reveals that I am ineligible under the program's requirements, my discount may be denied or revoked.

Name:_____ Date of Birth_____

Address:_____Adairsville, Georgia 30103

Phone No.:_____ Number of Occupants at this address:_____

_____ _____

Customer Signature Date

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