



Senior Citizen Discount Application

Account Number: _____ Phone: _____

Name: _____

Service Address

Address: _____ City: _____ State: _____ Zip Code: _____

Mailing Address (if different from service address)

Address: _____ City: _____ State: _____ Zip Code: _____

Personal Information: (State Identification, Driver License or Valid I.D is required.
If submitting by mail, e-mail or fax you must include a copy of your State ID or Driver License.

Primary Account Holder's Name	Date of Birth	State ID/DL #	Signature

I declare that the above statements are true under the penalty of perjury of the laws of the State of California. Should any of the above information change after this date, I will notify the City of Turlock of such changes.

Signature: _____ Printed Name: _____ Date: _____

FINANCE USE ONLY

Garbage Code Updated: ID Verified:

Effective Date: _____ Clerk: _____