



CITY OF VILLA RICA
Application for Senior Citizens Water/Sewer Discount

DATE _____

I, _____ of _____
Name of Customer on Account Service Address

would like to apply for the Senior Citizens water/sewer discount and have shown proof of age and live at this address within the city limits of Villa Rica.

PRINT NAME

SIGNATURE Date of Birth _____

Proof of age verified: Driver's license Birth Certificate Family Bible
Other _____ (i.e. passport or employer ID)