



APPLICATION/AFFIDAVIT FOR SENIOR GARBAGE DISCOUNTED RATE

I, _____ do reside at and hereby request the Senior Garbage
Discounted Rate for the address commonly known as _____

in Lewisville, Texas.

To qualify for the Discounted Rate, I affirm that:

1. I am 65 years of age or older,
2. The water and sewer account at the above address is in my name, and
3. No more than three individuals reside within my home.

If any of the above conditions should change, I understand I must notify the City of said changes.

Signed: _____ Approved: _____

Date: _____

Email Address: _____ Phone No.: _____

A copy of your driver's license must accompany this completed form.

Email in to ub@cityoflewisville.com