



City of Bexley

Senior Citizen Refuse Discount

Occupant Name: _____

Occupant Address: _____

I am the occupant of the address listed above and am 60 years of age or older and have the water, sewer, and refuse account in my name, do hereby make application for the reduced refuse rate provided by Bexley Ordinance 58-09.

ACCOUNT NO: _____

BIRTH DATE: _____

TENANT: _____

OWNER: _____

APPROVED _____

BY: _____