City of Baxley Water/Sewer Discount Application

Account #				
Name & Address of Applic	cant:			
	Phone Numb	er:		-
Date of Birth (If you are NOT at least 65 years of	f age, you are NOT eligible for	Total Number in Household re NOT eligible for a discount)		
Give names and ages of the	ose in the household. T	he name of the ones	employed and names of	employers:
Name		Age	Employer (i	f any)
Total MONTHLY income	of all members in hous	ehold		
	TOTAL YEARLY (If this amount is		<u>OT</u> eligible for a discount)	
I am a resident of the City of B YEARLY income of all perso \$10,000.00. I understand that if only apply for the month in whi obtain approval in each year for in said dwelling house and under	ons residing at the above as a discount for water and se che the discount is granted at the discount to remain in for	address for the year p wer services rendered b and the remainder of mo- rce. I also agree to furn	oreceding the date of application y the City of Baxley is granteenths in this year. Also, that in hish proof of the total income	eation was less than ed, such discount will t will be necessary to of the persons living
Signature of Applicant		Da	ite	
Sworn before me this	day of		_, 20	
Notary Public				
*********	********	*******	********	:******
Based on the facts containe approved and granted.	ed in the foregoing affid	avit, this discount fo	or water and sewer service	ces applied for is
This day of		20 By:		