

ACCOUNT NO: \_\_\_\_\_

DATE: \_\_\_\_\_

**CITY OF AUMSVILLE  
SENIOR CITIZEN RATE  
CERTIFICATION ATTACHMENT**

To qualify you must be 65 year or older, head of household, and retired.

Residing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Name of Head of Household: \_\_\_\_\_ Age: \_\_\_\_\_

Is Head of Household retired? \_\_\_\_\_

List names and ages of other persons living in the house:

_____	Age: _____
_____	Age: _____
_____	Age: _____
_____	Age: _____

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that the above statements are true and that I will contact and advise Aumsville city hall of any changes to the head of household information and upon vacating the above premises.

\_\_\_\_\_  
Signature

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**CITY USE ONLY**

DATE APPROVED: \_\_\_\_\_

DATE DENIED: \_\_\_\_\_

\_\_\_\_\_  
City Administrator

Computer Book \_\_\_\_\_ Meter Book \_\_\_\_\_  
Updated 03/29/11