



SENIOR DISCOUNT WATER/SEWER/TRASH APPLICATION
(Please Print)

Name: _____

Address: _____

Phone Number: _____

I hereby certify the following:

- I am at least 62 years of age (proof of age required - Driver's License/State ID)
- I own the home at the above listed address
- I reside at the above address

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY

Effective Date: _____

Birth Date: _____

Account Number: _____

Proof of Age Document: _____

Approved By: _____

Return completed application to:
Village of Romeoville
Attn: Water Billing
1050 W. Romeo Rd. | Romeoville, IL 60446
(815) 886-7212