



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