

APPLICATION FOR SENIOR CITIZEN ELECTRIC DISCOUNT

NAME _____ AGE _____

SERVICE ADDRESS _____

ACCOUNT NO. _____

RETIREMENT DATE _____

TYPE PENSION RECEIVED _____

IS ANY PERSON LIVING AT THIS ADDRESS EMPLOYED ON A FULL-TIME BASIS?

YES _____ NO _____ IF ANSWER IS YES, GIVE PERSON(S)
NAMES AND RELATIONSHIP TO HEAD OF HOUSEHOLD:

_____ (SIGNED - APPLICANT)