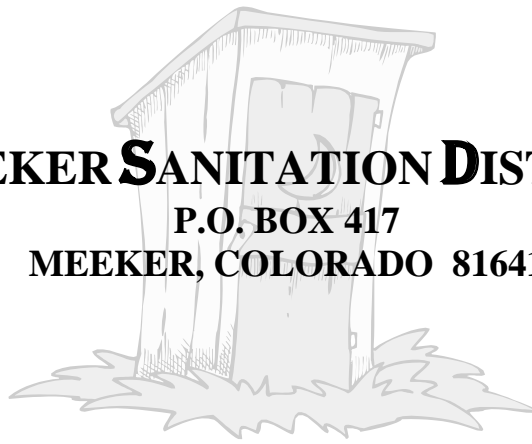


# MEEKER SANITATION DISTRICT

P.O. BOX 417  
MEEKER, COLORADO 81641

OFFICE  
265 EIGHTH STREET  
PHONE: 970-878-5192  
FAX: 970-878-5988



PLANT  
1150 MARKET STREET  
PHONE: 970-878-5345

## SENIOR CITIZEN SEWER RATE REDUCTION PROGRAM CERTIFICATION

Name: \_\_\_\_\_

Address:

Date of Birth \_\_\_\_\_ as evidence by

Household Members (Full-time residents of the house)

\_\_\_\_\_  
Name Date of Birth 20\_\_ Gross Income

\_\_\_\_\_  
Name Date of Birth 20\_\_ Gross Income

\_\_\_\_\_  
Name Date of Birth 20\_\_ Gross Income

\_\_\_\_\_  
Name Date of Birth 20\_\_ Gross Income

I hereby certify that the above information is true and correct and understand that should any information contained herein be incorrect I may be permanently ineligible for this program.

\_\_\_\_\_  
Signature Date

### AFFIDAVIT

I, \_\_\_\_\_, receive \$

per \_\_\_\_\_ from Social Security and have no other income.

\_\_\_\_\_  
Signature Date