

**CITY OF KEY WEST**  
**SENIOR CITIZEN/DISABILITY DISCOUNT APPLICATION**

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

As stipulated by the City Code of Ordinances, a 15% Senior Citizen/Disability discount has been established for residential customers who meet the income requirement and:

- Reaches the age of 60 years or older by October 1, OR
- Applicant is totally and permanently disabled, AND
- Total annual household income does not exceed \$ 31,704.00.

The discount shall apply to the base against a single residential unit in which the subscriber claims as his primary residence. All applicants must sign an affidavit stating their legal residence, age and provide proof of annual income to qualify for this discount. All accepted applicants will be required to reapply each year between October 1 and December 31.

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ # OF RESIDENTS IN HOUSEHOLD: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ SSN: \_\_\_\_\_

UTILITY BILLING ACCOUNT #: \_\_\_\_\_

ANNUAL HOUSEHOLD INCOME: \$ \_\_\_\_\_

PROOF OF INCOME: \_\_\_\_\_ IRS TAX FORM  
(ATTCH COPY) \_\_\_\_\_ HRS INCOME VERFICATION  
\_\_\_\_\_ OTHER

I affirm that the foregoing statements are true to the best of my knowledge and belief. I authorize the City of Key West to verify my statements. I certify the address given is my primary legal residence.

SIGNATURE OF APPLICANT: \_\_\_\_\_

WITNESSED BY: \_\_\_\_\_  
(Customer Service Representative)

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**This application must be notarized if NOT completed and witnessed at the City of Key West**

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State of Florida  
County of Monroe

Before me, the undersigned authority authorized to administer oaths and take acknowledgements, personally appeared \_\_\_\_\_ . Who being duly sworn and deposed, states that he/she is the person in the foregoing application and that he/she has read the said application and that the allegations and contents thereof are true and contents thereof are true and correct.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ My commission expires: \_\_\_\_\_