

Senior Citizen Utility Discount: Application & Consent Form

City of Yutan, Nebraska Department of Utilities

1. Applicant Information

Full Name: _____

Service Address: _____

City/State/Zip: _____

Utility Account Number: _____

Phone Number: _____

2. Eligibility Requirements

To qualify for the Senior Citizen Discount on municipal utility services, the applicant must meet the following criteria:

- Must be [**Age, e.g., 65**] years of age or older.
- Must be the primary account holder and reside at the service address listed above.
- Must provide valid proof of age and residency (Nebraska Driver's License or State ID).

3. Consent for Documentation & Record Keeping

I, the undersigned, understand that the City of Yutan requires a photocopy of my valid Nebraska Driver's License (or State ID) to verify my eligibility for the senior discount.

By signing this form, I acknowledge and agree to the following:

1. **Retention of Records:** I authorize the City to maintain a photocopy of my identification in my confidential customer file for auditing and verification purposes.
2. **Use of Information:** The information on my ID will be used solely for the administration of utility services and the verification of discount eligibility.
3. **Privacy Protection:** The City shall treat this information as a protected record. It will not be disclosed to the public except as required by the Nebraska Public Records Act or other state/federal legal requirements.

4. **Redaction Option:** I understand that I may redact (black out) my **Driver's License Number** and **Organ Donor status** on the copy provided, so long as my Name, Address, and Date of Birth remain clearly visible.

4. Verification & Signature

I certify under penalty of perjury that the information provided is true and correct. I understand that if I move or if my eligibility status changes, it is my responsibility to notify the City Utility Department.

Applicant Signature: _____ **Date:** _____

For Office Use Only

Received By: _____ **Date:** _____

ID Type Provided: [] Driver's License [] State ID [] Other: _____

Age Verified: [] Yes [] No

Discount Effective Date: _____

Instructions for the Applicant

Please Note: If you are submitting this via mail or a drop-box, please attach a clear photocopy of the front of your ID to this form. If you are submitting in person, a clerk can make the copy for you. You are encouraged to black out your license number for your own privacy; the city only requires your **name, address, and birth date** to confirm your discount.