



APPLICATION FOR REDUCED
SANITATION AND SEWER RATES

DATE: _____

ACCOUNT # _____

I hereby request a reduced rate for sanitation and sewer services. I certify I am the sole occupant of the residence to which the applications applies I certify that I qualify for the Idaho Property Tax Reduction (current copy of taxes needs to be attached to the application showing qualifications). I do not need my garbage picked up more than once a week.

I fully understand that if I have more than one can each week of garbage, the charges will be the current prevailing rate, or if more than on person lives at this residence, the charges for sanitation and sewer will be raised to the current rates.

To receive the benefit, you must apply and qualify each year. It is not renewed automatically.

Signature of Resident

Address of Resident

Approved this _____ day of _____, 20_____.

Mayor Paul E. Fries SR.

ATTEST

Carma J. Maxey, City Clerk