



Sanitation Department - Optional Services Discount Form

The undersigned resident requests consideration for a 50% discounted rate for optional sanitation services. Such discount is available for residents in which the head of the household is at least 65 years of age or for residents possessing a medical condition which prohibits them from placing refuse receptacles curbside. Proof of age (such as a driver's license, state issued identification card, or military identification) or physician's documentation of a medical condition is required and to be submitted with this form.

Name _____

Address _____

Date _____

Phone _____

Email _____

Signature _____

Check the condition that applies (only one condition required):

- Resident requested Senior Citizen Discount
- Resident requested Medical Condition Discount

Check the optional service requested:

- Rear yard trash- collected 1x per week
- Rear yard trash- collected 2x per week
- Second weekly trash collection

Please return form (with proof of eligibility)
Deliver in person: to City Hall, or
Email to: rjones@brentwoodmo.org or
Mail to: City of Brentwood - Attn: Finance
2348 S. Brentwood Blvd.
Brentwood, MO 63144

FOR OFFICIAL USE ONLY	
Verified:	<input type="checkbox"/> Applicable Condition
	<input type="checkbox"/> Requested Optional Service
Date	_____
By	_____