



**Senior Citizens  
Penalty Exemption**

Account Number: \_\_\_\_\_

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

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proof of Age Presented: Yes  No

Utility Service in Name of Applicant: Yes  No

All of the above information and answers are complete and true to the best of my knowledge. If in the judgment of the City of Elberton, any representation or false statement was given, this exemption will be drawn and actions will be pursued under the penalties of fraud as provided by the Official Code of Georgia.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Customer Service Representative

\_\_\_\_\_  
Date