

APPLICATION SENIOR DISCOUNT

City of Santa Clarita

Please provide a copy of your driver's license or ID.

Send completed application and all required documents to:
Burrtec at 26000 Springbrook Avenue, Ste 101 Saugus, CA. 91350 or email santaclarita@burrtec.com

Name			
Address			
City		State	Zip
Telephone #			
Are you head of household?	Yes	No	
Are you 60 years of age or over?	Yes	No	
What is your birth date? Day	y/Month/Year		
*****COPY OF DI	RIVER LICENSE (PLEASE AT	-	D CARD ****
I certify under penalty of perjury that the	above information	n is true and cor	rect.
Applicant Signature			Date
	(Office use	Only)	
Review by:]	Date
Approved () De	enied ()		