Waste Management of St. Louis

SENIOR CITIZEN APPLICATION
AND
REGISTRATION FORM

Complete the information below. Submit the completed senior citizen application and registration form along with proof of age and residency, if applicable, to the building office in Jennings City Hall.

_____ _____
NAME DATE OF BIRTH

_____
STREET ADDRESS

Jennings	Missouri	63136
CITY	STATE	ZIP CODE

_____ _____
TELEPHONE NUMBER DRIVER LICENSE

_____ _____
SIGNATURE DATE

OFFICE OF THE REGISTRAR USE ONLY

Certificate#: _____

Approve: _____