

FORM C-2

*Pls fill-up all blanks legibly and completely.
Please type N/A if not applicable.*

BAYAWAN WATER DISTRICT CCC-221

APPLICATION FOR SENIOR CITIZEN DISCOUNT PRIVILEGE

Date of Application: _____

Application No. _____

ACCOUNT NAME:	ACCOUNT NO.
ADDRESS:	
DATE OF BIRTH:	AGE:
CONTACT DETAILS:	
DATE OF METER REGISTRATION:	

This is to request for availment of the Senior Citizen Discount Privilege per Republic Act 9994, otherwise known as the "Expanded Senior Citizens Act of 2010". I fully understand and agree on the specific terms and conditions in the grant of the privilege herein below stated, as follows:

- * Discount privilege of the Five Percent (5%) is applicable only on the month/s when water consumption does not exceed 30 cubic meters;
- * Discount privilege has a validity of one (1) year, subject to re-application/renewal;
- * Discount privilege is discontinued and reverted to its original scheme if not re-applied/renewed;
- * In case of death, discount privilege is discontinued;
- * Discount privilege is discontinued for any violation of district policies and shall not be excused from imposition of penalty.

This is to further certify that all information given above are true and correct.

_____ Date Applied

_____ Applicant's Signature Over Printed Name

(To be filled-up by BAWAD) REQUIREMENTS SUBMITTED:

- APPLICATION FORM
- PICTURE HOLDING THE LATEST NEWSPAPER (4R size)
- BARANGAY CLEARANCE
- VALID SENIOR CITIZEN CARD -- I.D. No. _____
- PROOF OF BILLING/CERTIFICATION FROM BAWAD Php20.00 -- OR No. _____
- BIRTH CERTIFICATE
- AUTHORIZATION LETTER (If applying through representative)
- GOVERNMENT ISSUED ID (of the Representative)
- OTHER DOCUMENTS PRESENTED

Evaluated by:

Recommending Approval:

APPROVED:

_____ Customer Service Representative

GINALYN P. PIOSCA
Admin Services Chief C

ALMA L ABRASALDO
General Manager

RENEWAL DATES:

Date: _____	Signature: _____	Date: _____	Signature: _____
Date: _____	Signature: _____	Date: _____	Signature: _____
Date: _____	Signature: _____	Date: _____	Signature: _____
Date: _____	Signature: _____	Date: _____	Signature: _____
Date: _____	Signature: _____	Date: _____	Signature: _____

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