



**Alhambra Roll-Out Service Application  
Qualifying Senior Citizens and Physically Disabled**

In order to qualify, you must complete this form and return it to our office with copies of documentation indicating your eligibility.

Please email to [alhambra@republicservices.com](mailto:alhambra@republicservices.com) or mail to:  
Attn: Republic Services 104 S. First St , Alhambra, Ca 91801

**\*\* Please do not send us any original documentation\*\***

- Senior Citizen 62-years of age or older; head of household
- Physically disabled or handicapped

If you have any questions regarding this program, please contact us TOLL FREE at (800) 299-4898 or email us at [alhambra@republicservices.com](mailto:alhambra@republicservices.com).

NAME: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

AGE VERIFICATION: (Requires at least 1 copy of the documents below)

California Driver's License #: \_\_\_\_\_ California I.D. Card #: \_\_\_\_\_

Other: \_\_\_\_\_

DISABILITY VERIFICATION: (Requires at least 1 copy of the following documents i.e. driver's license, identification card, birth certificate or Department of Motor Vehicles handicap registration)

\_\_\_\_\_

The above-mentioned resident certifies that the information above is true and accurate.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>***OFFICE USE ONLY***</b>	
Date Received: _____	Verified By: _____
Verified Senior Citizen: _____	
Verified Physical Disability: _____	