

CABLEVISION SENIOR CITIZEN  
DISCOUNT PROGRAM ELIGIBILITY FORM

I, \_\_\_\_\_ hereby swear that I am eligible for Cablevisions Senior Discount Program by one of the following criteria.

Please Check Appropriate Criteria

\_\_\_\_\_

(a) A member of PAAD (Photocopy of membership card must accompany this form); and (b) not sharing the same dwelling with more than one other person under the age of 62.

\_\_\_\_\_

(a)over the age of 62; (b) with an annual income of \$20,016 if single, or \$24,542 if married; (c) a permanent resident of the State of NJ for at least 30 days; (d) and not sharing a dwelling with more than one other person under the age of 62.

IN TESTIMONY WHEREOF, I have hereto set my hand and affirmed my official Seal, This \_\_\_\_\_ Day of \_\_\_\_\_

\_\_\_\_\_. (Notary)

Customer Name \_\_\_\_\_ Home Telephone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_

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

\*Notary Seal Required

RETURN TO:

Cablevision  
Attention: Senior Discount Program

765 Broad St., 3rd Floor  
Newark, NJ 07102

These discounts are provided as part of Cablevision's Current policy and may not be available in all franchise areas Pricing discounts and packages are subject to change at any time in accordance with applicable law