



Affidavit Verifying Status for City Public Benefit Application

By executing this affidavit under oath, as an applicant for a City of Acworth, Georgia, Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for a City of Acworth, (**check one of the following**):

- | | |
|--|---|
| <input type="checkbox"/> Business License or | Miscellaneous Licenses (check one below): |
| <input type="checkbox"/> Georgia Occupational Tax Certificate | <input type="checkbox"/> Auctioneers |
| <input type="checkbox"/> Alcohol Beverage License | <input type="checkbox"/> Pawn Brokers |
| <input type="checkbox"/> Taxicab License | <input type="checkbox"/> Massage Therapists |
| <input type="checkbox"/> Insurance Company License | <input type="checkbox"/> Billiard Rooms Operations |
| <input type="checkbox"/> Employee Benefits (Retirement, Health, Disability) | <input type="checkbox"/> Precious Metals and Gems Dealers |
| <input type="checkbox"/> Contracts (Please specify type) _____ | <input type="checkbox"/> Flea Markets |
| <input type="checkbox"/> Other public benefit (<i>indicate, if not listed above</i>) _____ | |

Name of Business _____

Check only one:

- 1) I am a United States citizen.
- 2) I am a legal permanent resident of the United States.
- 3) I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

_____.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed this ____ day of _____, 20__ in _____(city), _____(state).

**SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
____ DAY OF _____, 20__**

Signature of Applicant

Notary Public _____

Printed Name of Applicant

My Commission Expires: _____

*Note: O.C.G.A. § 50-36-1(e)(2) requires that aliens under the federal immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below: