



Affidavit Verifying Status for Effingham County Public Benefit Application

By executing this affidavit under oath, as an applicant for Effingham County, Georgia Business Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit as referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my application for an **Effingham County Business Occupation Tax Certificate, Alcohol License, Taxi Permit or other public benefit**

(Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity)

1) _____ I am a United States citizen

OR (Must select one)

2) _____ I am a legal permanent resident 18 years of age or older or I am a qualified alien or nonimmigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.

*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 Code Section 16-10-20 of the Official Code of Georgia.

******* ALL FORMS MUST HAVE NOTARIZED SIGNATURE *******

Signature of Authorized Officer or Applicant

Date

Printed Name and Title of Authorized Officer or Applicant

*

Alien Registration Number for Non-Citizens

***Note:** O.C.G.A. § 50-36-1(e)(2) requires that aliens under the Federal Immigration and Nationality Act, Title * 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.

SUBSCRIBED AND SWORN BEFORE ME ON THIS

THE _____ DAY OF _____, 20____.

SEAL

NOTARY PUBLIC

My Commission Expires: _____