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E-Verify Private Employer Affidavit Pursuant to O.C.G.A. § 36-60-6(d)

This affidavit is required by Georgia State Law

By executing this affidavit under oath as referenced in O.C.G.A. § 36-60-6(d), the undersigned applicant for a Business License from the City of Brookhaven, Georgia, representing the private employer known as

_____[printed name of private employer],
verifies the following with respect to my application for a Business License:

- ☐ a) On January 1st of the below signed year, the individual, firm, or corporation employed **more than ten (10) employees.**
- ☐ b) On January 1st of the below signed year, the individual, firm, or corporation employed **ten (10) or fewer employees.**

If the applicant selected (a), please fill out below section.

The employer has registered with and utilizes the federal work authorization program in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6(a). The undersigned private employer also attests that its federal work authorization user identification number and date of authorization are as listed below:

Federal Work Authorization User Identification Number (not the FEIN number)

Date of Authorization

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 allowed by such statute.

Signature of Applicant

Date

Printed Name of Applicant

SUBSCRIBED AND SWORN

BEFORE ME ON THIS THE _____ DAY OF _____, 20 _____

Notary Public Signature

My commission expires: _____

Notary Stamp