E-VERIFY AFFIDAVIT

Columbus, GA/Muscogee County
E-Verify Private Employer Affidavit Pursuant to O.C.G.A. § 36-60-6(d)

By executing this affidavit under oath, as an applicant for a(n)_____

(business license, occupational tax certificate, or other document required to operate a business) as referenced in O.C.G.A. § 36-60-6(d), from the **City of Columbus, Ga./Muscogee County,** the undersigned applicant representing the private employer known as

_____ **(***printed name of private employer)* verifies one of the following with respect to my application for the above mentioned document:

1. (a) _____ On January 1st of the below signed year the individual, firm or corporation employed more than ten (10) employees. ***If the employer selected 1(a) please fill out Section 2 below.***

   (b) _____ On January 1st of the below signed year the individual, firm or corporation employed ten (10) or fewer employees.

2. **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 (Company ID / E-Verify Number) **Date of Authorization**

_____
Business License Account Number

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.

Executed on the _____date of _____, 20_____ in_____(City)_____(State)

_____ _____
Signature of Authorized Officer or Agent **Printed Name of and Title of Authorized Officer or Agent**

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

_____ DAY OF _____, 20_____

_____
NOTARY PUBLIC
My Commission Expires:

_____