U.S. Citizenship and Immigration Services

SAVE

AFFIDAVIT VERIFYING STATUS FOR PUBLIC BENEFIT APPLICATION

By executing this affidavit under oath, as an applicant for the City of Poulan, Georgia Business License or Occupation Tax Certificate, Alcohol License, Insurance Company License 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 a City of Poulan public benefit:

For: _____
(Name of natural person applying on behalf of individual, business, corporation, or entity)

1.) _____ I am a United States Citizen

Or

2.) _____ I am a legal permanent resident 18 years of age or older or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States. *** All non-citizens must provide their Alien Registration Number Below**

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 O.C.G.A. § 16-10-20.

_____ _____
Signature of Applicant Date

_____
Printed Name of Applicant

* _____
Alien Registration Number For Non-Citizens

SUBSCRIBED AND SWORN
BEFORE ME ON THIS
_____ DAY OF _____, 20___

_____
NOTARY PUBLIC
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:

_____