

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: