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# 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 _____ [*name of county or municipal corporation*], 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. Select either (a) or (b) in the following:**

**(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 Date of Authorization

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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 _____, 201___ 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 _____, 201___.**

_____
**NOTARY PUBLIC**

**My Commission Expires:**

_____

Submit