

\_\_\_\_\_  
Taxpayer Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip

RDS Account Number: \_\_\_\_\_

## Affidavit Verifying Status of Benefit Applicant

### **\*\*REQUIRED\*\***

Pursuant to the Georgia Security and Immigration Compliance Act (O.C.G.A 50-36-1), effective July 1, 2007, every agency in **Fulton County** providing public benefits through any local program is responsible for determining the immigration status of citizen applicants for said benefits.

By executing this affidavit under oath, as an applicant for benefits, I am stating the following with respect to my application for benefits from Fulton County Government:

**Select one of the below.**

\_\_\_\_\_ I am a United States citizen 18 years of age or older;

\_\_\_\_\_ I am a legal permanent resident 18 years of age or older;

\_\_\_\_\_ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act, Title 8 U.S.C., as amended, 18 years of age or older and lawfully present in the United States. My alien number issued by the U.S. Department of Homeland Security or other federal immigration agency is \_\_\_\_\_.

The undersigned applicant also hereby verifies that he or she has provided at least one secure and verifiable document, as required by O.C.G.A § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

\_\_\_\_\_  
*(Please enclose legible copy of document with Affidavit.)*

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.

Executed in \_\_\_\_\_(city), \_\_\_\_\_(state).

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Subscribed to and sworn before me on this the

\_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires:

\_\_\_\_\_

**\*\*FORM REQUIRED\*\*** This form must be completed and returned with a copy of your secure and verifiable document, your Fulton County Occupational Tax Renewal and payment. Failure to return the completed Affidavit with your renewal and payment will delay the issuance of your occupational certificate.