OCCUPATIONAL TAX CERTIFICATE APPLICATION

S.A.V.E AFFIDAVITAFFIDAVIT VERIFYING LEGAL STATUS FOR CITY PUBLIC BENEFIT

THIS FORM MUST BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC.

Before the undersigned officer authorized to admi	nister oaths appeared:
	who being duly sworn, deposes and states under oath as follows:
(Print Name)	
I am over the age of 18 years of age and I am not this affidavit.	suffering from any legal disabilities which would prevent me from making
_	olicant for a City of Auburn, Georgia Occupation Tax Certificate, Alcohol G.A. § 50-36-1. I am applying for this public benefit on behalf of the rship, or other private entity:
(Print Name or Business Name)	
Check the following that applies to you:	
o In	AM A LEGAL PERMANENT RESIDENT 18 years or older or I am an therwise QUALIFIED ALIEN or NON-IMMIGRANT under the Federal mmigration and Nationality Act, 18 years of age or older, and lawfully resent in the United States with an Alien Registration number of :
- (.	Alien Registration Number)
	at he or she is 18 years of age or older and has provided at least one C.G.A §50-36-1 (f) (1), with this affidavit. The secure and verifiable classified as: (Type of Document)
_	son who knowingly and willfully makes a false, fictitious, or davit shall be guilty of a violation of O.C.G.A. § 16-10-20.
	Date:/
Signature of Applicant	
Printed Name of Applicant	
SWORN AND SUBSCRIBED BEFORE ME ON THIS DAY OF 20	17.
NOTARY PUBLIC	
My commission expires:	