



FORM A

City of Lawrenceville

Private Employer Affidavit Pursuant to O.C.G.A. §36-60(d)

By executing this affidavit under oath, as an applicant for a(n) Business License or Occupational Tax Certificate as referenced in O.C.G.A. § 36-60-6(d), from The City of Lawrenceville the undersigned applicant representing the private employer known _____ [business name] verifies one of the following with respect to my application for the above mentioned document.

1. Choose ONE of 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 (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 Id Number

Date of Authorization

- 3. _____ There have been no changes to the name, address, owners, or managers of the business.
- 4. The business has _____ number of employees and _____ number of professionals.
- 5. Business License 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 Officer or Agent

Subscribed and Sworn before me

On this ___ day of _____, 20__.

Notary Public and Seal