E-Verify Affidavit Private Employer Compliance Pursuant to O.C.G.A. § 36-60-6(d)

This form is required by the State of Georgia. Please have it notarized and return it with your completed renewal application.

Number of Employees
More than ten (10) employees, check this box.
By executing this affidavit, the undersigned private employer verifies it's compliance with O.C.G.A. §36-60-6, stating affirmatively that the individual, firm or corporation employs more than ten (10) and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. §13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:
Federal Work Authorization Number Date of Authorization
Exempt-Less than ten (10) employees, check this box. Exempt from O.C.G.A. §36-60-6 -By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs fewer than eleven (11)and therefore, is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90.
I hereby declare under penalty of perjury that the foregoing is true and correct.
Executed on,,20in,(city)(state)
Signature of Authorized Officer or Agent
Printed name and Title of Authorized Officer or Agent
NOTARY:

Subscribed and sworn to me this ______DAY OF_____, 20_____

NOTARY PUBLIC MY COMMISSION EXPIRES _____ (SEAL)