

## E-Verify Private Employer Affidavit Pursuant to O.C.G.A. § 36-60-6(d) \*\*This form is required by Georgia State Law\*\*

By executing this affidavit under [business license, occupation tax ce			
referenced in O.C.G.A. § 36-60-6(d representing the private employer ve	l), from <u>City of</u>	Dunwoody, Georgia, the	
Company Name		_	
1a: More than 10 company/nation	n-wide number	of employees (see E-Verify	section below)
1b: Less than 10 company/na below)	tion-wide numb	per of employees (proceed	to signature portion
Only complete this section if you	selected 1a		
E-Verify Number:	_ (not your FEIN	1)	
E-Verify Authorization Date:			
In making the above representation willfully makes a false, fictitious, or guilty of a violation of O.C.G.A. § 16-	fraudulent stat	ement or representation in	an affidavit shall be
Signature of Authorized Officer	Date		
Printed Name and Title of Authorized	Officer	_	
Executed in	_ (City),	_ (State).	
SUBSCRIBED AND SWORN BEFORE M	1E ON THIS THE	DAY OF	, 202
NOTARY PUBLIC/SEAL		My Commission Expires	