



**City Manager's Office**  
509 North McDonough Street  
P.O. Box 220  
Decatur, Georgia 30031  
404-370-4102 • Fax: 678-553-6518  
[info@decaturga.com](mailto:info@decaturga.com) • [www.decaturga.com](http://www.decaturga.com)

January 1, 2010

Dear Applicant:

Georgia law now requires applicants for public benefits in Georgia's cities and counties to verify their legal status. Specifically, the City of Decatur must, "require every applicant for such benefit to execute a signed and sworn affidavit verifying the applicant's lawful presence in the United States" (OCGA § 50-36-1(e)).

The State of Georgia has defined "public benefits" to include business licenses, alcoholic beverage licenses and certain other government services. In order to receive your license you must complete the affidavit on the back of this letter and return it to City Hall. Again, this is required by the State of Georgia. The City of Decatur cannot issue a waiver and has no discretion in making you complete the affidavit.

Your eligibility will be verified through the Systematic Alien Verification of Entitlement (SAVE) program operated by the United States Department of Homeland Security before the license is issued.

Thank you for cooperation.

Sincerely,

Peggy Merriss  
City Manager



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## *Affidavit Verifying Applicant Status for City of Decatur Public Benefit*

By executing this affidavit under oath, as an applicant for a public benefit referenced in O.C.G.A. Section 50-36-1, I am stating the following with respect to my City of Decatur, Georgia, application for:

(check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Business license or<br>occupation tax certificate<br><input type="checkbox"/> Alcohol license | <input type="checkbox"/> Taxi permit<br><input type="checkbox"/> Contract with City<br><input type="checkbox"/> Other public benefit Specify: _____ |
|--|---|

Name: \_\_\_\_\_. (**Must** provide name of natural **person** applying on behalf of individual, business, corporation, partnership, or other private entity.) If person is applying on behalf of a business, also specify the name of the business: \_\_\_\_\_.

- 1) \_\_\_\_\_ I am a United States citizen                      **OR**
- 2) \_\_\_\_\_ I am a legal permanent resident 18 years of age or older or I am otherwise a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.\*

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 Code Section 16-10-20 of the Official Code of Georgia.

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE ___ DAY OF _____, 20__  Notary Public My Commission Expires:	<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Signature of Applicant</td> <td style="width: 40%;">Date</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td colspan="2">Printed Name:</td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">* _____</td> </tr> <tr> <td colspan="2" style="text-align: center;"><small>Alien registration number for non-citizens</small></td> </tr> </table>	Signature of Applicant	Date	_____	_____	Printed Name:		_____		* _____		<small>Alien registration number for non-citizens</small>	
Signature of Applicant	Date												
_____	_____												
Printed Name:													
_____													
* _____													
<small>Alien registration number for non-citizens</small>													

\* Note: O.C.G.A. § 5-36-1(e)(2) requires that aliens under the Federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below: