CITY OF ELBERTON VENDING MACHINE / AMUSEMENT MACHINE REGISTRATION

Registration and payment is due between January 1 and March 31 of each year.

Mail to: City of Elberton P.O. Box 70 Elberton, GA 30635

Business Name:		
Location of Machines:		
Mailing Address:		
City, State, Zip		
Name of principal owner or officer:		
Contact Person:		
Telephone Number:		
Email Address:		
Federal Tax ID Number:		
Service Description:		
Number of Machines	Fee per Machine	Total Amount Due
	X 30.00	\$
I certify that the information and records shall be available for in Ordinance of the City of Elberton, G	spection as required in Section 10	rrect, to the best of my knowledge, -53 of the Occupational Tax
Signature	Title	Date

YOU MUST COMPLETE THE REVERSE SIDE OF THIS FORM.

CITY OF ELBERTON VENDING MACHINE / AMUSEMENT MACHINE REGISTRATION

Serial Number of Machine	Physical location/address of Machine		

You may attach additional sheets to this form.

PRIVATE EMPLOYER AFFIDAVIT PERSUANT TO O.C.G.A. 36-60-6(d) E-VERIFY AFFIDAVIT

By executing this affidavit for an occupational tax license to operate a business as referenced in O.C.G.A. 36-60-6(d), from the City of Elberton, Georgia, the undersigned applicant representing the private employer known as

(state busin	ess name)			
Verifies one	of the following with respect to n	ny application for the above	mentioned documen	t (check a or b):
a.	On July 1, 2012, the individual femployees and has registered volume commonly known as E-Verify, of the applicable provisions and dundersigned private employer identification number and date	vith and utilizes the federo r any subsequent replacer leadlines established by 0. hereby attests that its fede	al work authorizatio nent program, in acc C.G.A. 13-10-90. Furi eral work authorizat	n program cordance with thermore the
	Name of Private Employer			
	Federal Work Authorization User	dentification Number	Date of Authori	zation
b.	On July 1, 2012, the individual, employees and at this time is ex 13-10-90.			
makes false,	Effective July 1, 2013, the indiving employees will be required to refine above representation under oath fictitious, or fraudulent statement 10-20, and face criminal penalties of	egister and utilize the feden h, I understand that any person or representation in an affic	eral work authorizat son who knowingly an	tion program. d willfully
Executed on	the day of	_, 2013 in(c	eity),(s	tate)
Signature of	Authorized Officer or Agent			
Print Name of	of and Title of Authorized Officer, of	or Agent		
		SWORN TO AND SU	BSCRIBED BEFORE	ME THIS
(SEAL)		DAY OF		, 2013.
		NOTARY PUBLIC		
		My Commission Expire	es:	

To register for the E-Verify Program, go to the U.S. Citizenship and Immigration Services website (www.uscis.gov).

This affidavit must be submitted by the person completing this application for the company that is requesting license. Please make sure you submit a copy of the identification document as required on the last page.

Affidavit Verifying Status for Public Benefit–Required by the Georgia Security and Immigration Compliance Act SAVE AFFIDAVIT

By executing this affidavit under oath, as an applicant for an occupational tax license or other public benefit as referenced in the Georgia Security and Immigration Compliance Act (O.C.G.A. 50-36-1), the undersigned applicant representing:

1 1					
	usiness)tion for a public benefit:	, verifies one of the following wi	th respect to		
1.	I am a United States citizen. (doct etc.)	ument example: Driver's License, US Passport, US Mi	litary Card,		
2.	I am a legal permanent resident of the United States. (document example: 1-551 Permanent Resident Card, Certificate of Citizenship, etc.)				
3.		nigrant under the Federal Immigration and Nationa partment of Homeland Security or other federal im			
	immigration agency is:	by the Department of Homeland Security or other for borary Resident Card; Employment Authorization Card			
		nat he or she is 18 years of age or older and has provide 0.C.G.A. 50-36-1(c), with this affidavit.	ed at least one		
The secure a	and verifiable document provided wit	th this affidavit can best be classified as:			
false, fictitio		understand that any person who knowingly and willful entation in an affidavit shall be guilty of a violation of by such criminal statute.			
Executed on	n the day of	, 2013 in (city), (state)		
Signature of	f Authorized Officer or Agent				
Print Name	of and Title of Authorized Officer, or	r Agent			
(SEAL)		SWORN TO AND SUBSCRIBED BEFORE ME, DAY OF,			
		NOTARY PUBLIC			
		My Commission Expires:			

Secure and Verifiable Documents Under O.C.G.A. 50-36-2 Issued August 1, 2011 by the Office of the Attorney General, Georgia

The following list of secure and verifiable documents, published under the authority of O.C.G.A. 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- A United States passport or passport card
- o A United States military identification card
- O A driver's license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer
- O An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer
- A tribal identification card of a federally recognized Native American tribe, provided that it contains a
 photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date
 of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of
 federally recognized Native American tribes may be found at:
 http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm
- A United States Permanent Resident Card or Alien Registration Receipt Card
- o An Employment Authorization Document that contains a photograph of the bearer
- o A passport issued by a foreign government
- o A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard
- o A Free and Secure Trade (FAST) card
- o A NEXUS card
- o A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card
- o A driver's license issued by a Canadian government authority
- A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561)
- o A Certificate of Naturalization issued by the United States Department of Citizenship and
- o Immigration Services (USCIS) (Form N-550 or Form N-570)
- o In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit.