

CITY OF SUMMERYVILLE
APPLICATION FOR PEDDLER LICENSE

Name of Applicant: _____

Applicant's Personal Address: _____

Cell Phone Number: _____

Land Line Phone Number: _____

Applicant's Height _____ Weight _____ Age _____ Sex _____ Race _____

If out of town provide local lodging address while peddling: _____

If Applicant is working for a corporation or another individual, provide the name of the employer, headquarters address, or address of closest branch office: _____

Activity including identification of the type of business and goods or services to be sold: _____

Applicant's Vehicle Make: _____ Model _____ Year _____
License Plate Number _____ State of Issuance _____

If vehicle belongs to person or corporation other than applicant list the owner's name, address, and contact telephone number: _____

** Attach copy of applicant's driver's license/official photo identification.

** Application and License fee of \$100 paid at time of application.

STATEMENT

The Applicant consents to a background check by the City of Summerville on the Applicant and that all information contained herein is true and correct. Applicant shall submit fingerprints to the Summerville Chief of Police, or designee, for identification and background check purposes.

Signature of Applicant

Date

CITY OF SUMMERVILLE
O.C.G.A. s 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Business License, as referenced in O.C.G.A. § 50-36-1, from THE CITY OF SUMMERVILLE, the undersigned applicant verified one of the following with respect to my application for public benefit:

- 1) _____ I am a United States citizen.
- 2) _____ I am a legal permanent resident of the United States.
- 3) _____ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____.

The undersigned applicant also hereby verified that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

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 as allowed by such criminal statute.

Executed in _____ (city), _____ (state).

Signature of Applicant

Printed Name of Applicant

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
____ DAY OF _____,

NOTARY PUBLIC

My Commission Expires:

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

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

1. Fill out this section between January 1, 2012, and June 30, 2012.

(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed five hundred (500) or more employees.

(b) _____ On January 1st of the below signed year the individual, firm, or corporation employed less than five hundred (500) employees.

If the employer selected 1(a) please fill out Section 4 below.

2. Fill out this section between July 1, 2012, and June 30, 2013.

(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed one hundred (100) or more employees.

(b) _____ On January 1st of the below signed year the individual, firm, or corporation employed less than one hundred (100) employees.

If the employer selected 2(a) please fill out Section 4 below.

3. Fill out this section on or after July 1, 2013.

(a) _____ On January 1st of the below signed year the individual, firm, or corporation employed more than ten (10) employees.

(b) _____ On January 1st of the below signed year the individual, firm, or corporation employed less than ten (10) employees.

If the employer selected 3(a) please fill out Section 4 below.

4. 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 Identification Number

Date of Authorization

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 _____, 201___ in _____ (city),

(state)

Signature of Authorized Officer or Agent

Printed Name of and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE ___ DAY OF _____, 201___.

NOTARY PUBLIC

My Commission