



*Affidavit Verifying Status
for Cherokee County Alcoholic Beverage License*

By executing this affidavit under oath, as an applicant for a Cherokee County Alcoholic Beverage License, I am stating the following with respect to my application for a Cherokee County Alcoholic Beverage License _____
_____ [INSERT BUSINESS NAME]

I am a United States citizen or legal permanent resident 18 years of age or older;

OR

I am 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. (Please submit copies front and back of your qualifying status paperwork)

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.

Signature of Applicant

Date

Printed Name

SUBSCRIBED AND SWORN
BEFORE ME ON THIS THE
__DAY OF ____, 20__

Notary Public

Alien Registration number for non-citizens

My Commission Expires

Please mail notarized original and copies to: Development Service Center ~ 1130 Bluffs Parkway ~ Canton, Ga 30114

For staff use only

License #