

TOWN OF BRASELTON
Mobile Transient Peddler License Application
Permit Only Valid for 90 Days from Time of Issuance

Mobile transient peddler includes solicitors and transient merchants, and means any person who engages in the business of selling any goods, wares, merchandise or services, or who solicits orders for such goods, wares, merchandise or services, by going from house to house or place to place; provided, however, that the word "peddler" shall not include persons distributing, or delivering goods or services, or soliciting orders for newspapers.

Instructions: Please print or type and return in person with \$100 fee (use additional sheets if necessary)

Business Name: _____

Federal Tax ID: _____

Georgia Sales Tax ID: _____

Business Address: _____

Applicant Name: _____

Applicant Social Security Number: _____

Applicant Mailing Address: _____

Relationship of Applicant to Employer or Business: _____

Applicant Phone Number: _____

Applicant E-mail Address: _____

Web Page: _____

Fully describe type of business and peddler activity: _____

Location the peddler activities will occur (if mobile transient peddler/solicitation, describe general geographic area of solicitation activity):

If a vehicle is to be used, a description of such vehicle, together with license number or other means of identification:

If the applicant has been convicted of any crime, misdemeanor or violation of any Town ordinance, please disclose the nature of the offense and the punishment or penalty assessed therefor.

:

I certify the above information is true and correct and contains no false or fraudulent information. In addition, I understand my business must conform to all Braselton ordinances, rules and regulations as it relates to Mobile Transient Peddlers. I understand that I am required, upon request, to provide the Town with records regarding overall sales, sales tax collection and amount in sales tax sent to the State of Georgia. I know that the holder of a Peddler License shall notify the Licensing Clerk of each change in any data required to be furnished by the Peddler Ordinance and this application within ten (10) days after such change occurs.

Signature: _____

I hereby certify that the above named Applicant signed his/her name to the Foregoing application stating to me That he/she knew and understood all Statements and answers made herewith, And has sworn that said statements And answers are true and correct
This _____ day of _____ 2006

Notary Public: _____

Required attachments for
Peddler License Application

1. Copy of Driver's License and Social Security card;
2. Good and sufficient security or proof thereof to the Town Manager or designee (e.g. verification of insurance coverage, bond, letter of credit, etc.).
3. Affidavits for Citizenship or Legal Alien status (page 4).
Affidavit A is to be completed by the applicant who is either a United States citizen or legal permanent resident.
Affidavit B is to be completed by the applicant who is either a qualified alien or nonimmigrant lawfully present in the United States.
4. Affidavits for Private Employer E-Verify Compliance (page 5).

U.S. CITIZEN/QUALIFIED ALIEN AFFIDAVIT

By executing this affidavit under oath pursuant to O.C.G.A. 50-36-1(e), as an applicant for a Town of Braselton Peddler License, I swear or affirm under oath the following with respect to my application for a Town of Braselton Peddler License for:

_____ Business Name

Check (X) One of the Following:

A _____ I am a United States citizen and 18 years of age or older.
A copy of a valid and verifiable ID must be presented as part of this affidavit.

OR

B _____ I am either a legal permanent resident of the United States or qualified alien or non-immigrant under the Federal Immigration and Nationality Act and 18 years of age or older and lawfully present in the United States of America.

Alien Registration number for non-citizens: _____ (Required)

Verification of your Affidavit will be made through the Systematic Alien Verification of Entitlement (SAVE) program operated by the United States Department of Homeland Security. Therefore, a front and back copy of one of the following documents must be attached to the Affidavit:

- 1. Valid, Unexpired Foreign Passport with I-94
- 2. Temporary Resident Alien Card (I-688)
- 3. Employment Authorization Card (I-76 or I-688A)
- 4. Employment Authorization Document (I-688B)
- 5. Refugee Travel Document (I-571)

Any person who knowingly or willfully makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of Official Code of Georgia 16-10-20

Sworn to and subscribed

Signature of Applicant

Print Name

Before me this ____ day
Of _____, 20__:

(SEAL)

Notary Public
My Commission Expires:

PLEASE EXECUTE THE APPLICABLE AFFIDAVIT BELOW FOR E-VERIFY COMPLIANCE. IF YOUR BUSINESS MEETS ONE THE EXEMPTION CRITERIA (see next page), PLEASE EXECUTE THE EXEMPTION AFFIDAVIT

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

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs more than ten employees and has registered with and utilizes the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. §13-10-90. Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Private Employer

OR

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

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation employs fewer than eleven employees and therefore, is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 13-10-90.

Signature of Exempt Private Employer

Printed Name of Exempt Private Employer

Any person who knowingly or willfully makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be guilty of a violation of Official Code of Georgia 16-10-20

Sworn to and subscribed

Signature of Applicant

Print Name

Before me this ____ day
Of _____, 20__:

(SEAL)

Notary Public
My Commission Expires:

Private Employer Exemptions for E-Verify

If your business falls into one of the below categories, it is exempt.

- After January 1, 2012 – Employers of 500 or more on January 1
- After July 1, 2012 – Employers of 100 to 499 as of January 1
- After January 1, 2013 – Employers of 11 to 99 as of January 1
- Never – Employers of 10 or less on January 1