

DeKalb County Community Development

Senior Tree Removal Program

S.A.V.E. Affidavit

SYSTEMATIC ALIEN VERIFICATION OF ENTITLEMENT

O.C.G.A. § 50-36-1(e) (2) Affidavit

Notary Public

Signature of Homeowner		Date
Executed in	(City),	(State)
makes a false, fictitious, or frauduler	under oath, I understand that any pents of the statement or representation in an and face criminal penalties as allowed	affidavit shall be guilty of a
The secure and verifiable document	t provided with this affidavit can best	be classified as:
Refer to the attached document (and Secure and Verifiable Documents U	d link below) that are verifiable for identification identification in the link below) that are verifiable for identification.	entification purposes:
	eby verifies that he or she is 18 years ocument, as required by O.C.G.A. §	
My alien number issued by the Depa	artment of Homeland Security or oth	er federal immigration agency is:
	citizen. ent resident of the United States. or non-immigrant under the Federal Department of Homeland Security or	
Community Development, the under application for a public benefit:	rsigned applicant verifies one of the f	following with respect to my
i i ee Keiliovai Fiografii, as lelelell	nced in O.C.G.A. § 50-36-1, from Del	Naib County Department of

My Commission Expires:

(SEAL)