List B
DOCUMENT THAT ESTABLISH IDENTITY

For individuals 18 years of older

• Driver’s license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex height, eye color and address.

• ID card issued by federal, state or local government agencies or entities provided it contains a photograph or information such as name, date of birth, sex, eye color, and address (including U.S. citizen ID card [INS Form I-197] and ID card for use of Resident Citizen in the U.S. [INS Form I-179])

• School identification card with a photograph

• United States military card or draft record

• Military dependent’s identification card

• United States Coast Guard Merchant Marnier Card

• Native American tribal document

• Driver’s license issued by a Canadian government authority
PERSONALLY APPEARED before the undersigned officer, duly authorized to administer oaths, came the undersigned, who after having been duly sworn, states under oath, the following:

1. That my name is_______________________ and that I am who I say I am;

2. That my address is________________________________________________________;

3. That I have presented sufficient personal identification to the notary that is true and accurate;

4. That I am legally in the United States of America;

5. That I am applying to the Georgia Department of Human Services, Residential Child Care Licensing, to operate a business / activity to be located at the following address:
   __________________________________________________________
   is subject to regulation by the Department of Human Services and that this affidavit is a material part of the application; and

6. That if the Department subsequently determines that the material information contained in this affidavit is false, I will be in violation of licensing / registration requirements, which may result in revocation of my license or registration or denial of my application for licensure.

Sworn to and subscribed before me  
This _______day of ______,_____.    

________________________  
Affiant

_______________________________  
NOTARY PUBLIC

STATE OF GEORGIA

My commission expires: ___________. 