

CITY OF TROY, ALABAMA

DECLARATION OF U.S. CITIZENSHIP AND/OR LAWFUL PRESENCE OF AN ALIEN

The Alabama Legislature recently passed a sweeping immigration law. The law is known as the Beason-Hammon Alabama Taxpayer and Citizen Protection Act, Act No. 2011-535 (hereinafter referred to as the "Act"). The Act prohibits aliens unlawfully present in the United States from (1) receiving, with certain exceptions, state or local public benefits defined by the Act or (2) entering into or attempting to enter into business transactions with a city (state or local public benefits and business transactions are hereinafter collectively referred to as "Benefits").

The Act requires that any individual that receives a Benefit from a municipality must be a U.S. citizen or an alien lawfully present in the United States. Municipalities must obtain from each individual, including any individual that is a sole proprietor, both a signed declaration, either of citizenship or lawful presence as appropriate, and a demonstration of such status before Benefits may be provided to the individual by the municipality.

DIRECTIONS

This declaration must be completed and submitted by the applicant(s) to the City/Town prior to the issuance of any Benefits, which declaration shall be incorporated into and become a part of and a condition of any Benefits authorized by the City/Town. A violation of the Act may disqualify the recipient from the Benefits issued by the City/Town.

Further, the Act provides that any person who knowingly makes a false, fictitious, or fraudulent statement or representation as a part of this declaration shall be guilty of perjury in the second degree pursuant to § 13A-10-102, Ala. Code 1975. Each time a person receives a Benefit based on such statement or representation shall constitute a separate violation.

Note: Form C, contained herein, is only applicable if you are submitting a bid or response to request for proposals, entering into a contract with the City/Town (i.e., all vendors), or receiving any grants or incentives issued by the City/Town. If you are only applying for a business license or renewing a business license, you do not need to complete Form C in order to obtain your business license.

SECTION I - APPLICATION FOR BENEFITS

Applicant's Legal Name(s): _____

Doing Business As (if applicable): _____

Type of Ownership (check one):

- Individual or Sole Proprietorship (complete Form A or B)
- Partnership
- Limited Partnership
- Limited Liability Partnership (LLP)
- Limited Liability Company (LLC) (Single Member)
- Limited Liability Company (LLC) (Multi-Member)
- Corporation
- Other (please explain): _____

Current Taxpayer Identification Number (if available): _____

Business Location: _____
(Address) (City) (State) (Zip)

Type of Benefit Applied For (check one):

- License
- Permit
- Contract
- Grant
- Incentive
- Bid
- Services
- Employment
- Assistance
- Other Benefits (please explain):

EACH INDIVIDUAL OR SOLE PROPRIETOR SHALL COMPLETE THE FOLLOWING:

SECTION II - U.S. CITIZENSHIP OR NATIONAL STATUS

Are you a citizen or national of the United States (check one)? Yes No

If you checked YES: Complete the Proof of Citizenship Demonstration and Declaration - **Form A**.

If you checked NO: Complete the Verification, Demonstration and Declaration of Lawfully Present Alien - **Form B**.

EVERY BUSINESS ENTITY OR EMPLOYER (I.E., INDIVIDUAL OR SOLE PROPRIETORSHIP, PARTNERSHIP, LIMITED PARTNERSHIP, LIMITED LIABILITY PARTNERSHIP, LIMITED LIABILITY COMPANY, CORPORATION OR OTHER ENTITY) THAT ENTERS INTO A CONTRACT (WRITTEN OR UNWRITTEN) WITH THE CITY OF TROY OR RECEIVES A GRANT OR INCENTIVE FROM THE CITY OF TROY SHALL COMPLETE THE FOLLOWING¹

EFFECTIVE JANUARY 1, 2012

SECTION III - CONTRACTS, GRANTS AND INCENTIVES BY CITY

E-Verify Notice

The Act is applicable to all bids, requests for proposals, contracts, grants, or incentives entered into or issued by the City. As a condition for the award of a contract, grant, or incentive, and as a term and condition of the contract, grant, or incentive with the City of Troy, Alabama in accordance with the Act, any business entity or employer that employs one or more employees shall not knowingly employ, hire for employment, or continue to employ an unauthorized alien and shall attest to such by sworn affidavit signed before a notary. Such business entity or employer shall provide a copy of such affidavit to the City/Town as part of its bid or proposal for the contract, grant, or incentive along with documentation establishing that the business entity or employer is enrolled in the E-Verify program.

The required affidavit form is attached as **Form C**.

During the performance of the contract, such business entity or employer shall participate in the E-Verify program and shall verify every employee that is required to be verified according to the applicable federal rules and regulations. The business entity or employer shall assure that these requirements are required of every subcontractor in accordance with the Act and shall maintain records that are available upon request by the City/Town, state authorities or law enforcement to verify compliance with the requirements of the Act. Failure to comply with these requirements may result in breach of contract, termination of the contract or subcontract, and possibly suspension or revocation of business licenses and permits in accordance with the Act.

¹ Applies to all vendors.

For official use only.

FORM

C

Received by _____, date _____.

E-Verify Affidavit

Compliance with the requirements of the Act is required for City of Troy, Alabama contracts, grants and incentives as a condition of the contract, grant, or incentive performance.

Complete one of the affidavits below as applicable:

I, _____, a duly authorized officer or agent of _____ ("Contractor"), do execute this affidavit on behalf of Contractor and, by executing this affidavit, the undersigned Contractor verifies that it is a (check one):

- Sole proprietorship
- Partnership
- Corporation
- Other Business Entity

that has no employees.

OR

I, _____, a duly authorized officer or agent of _____ ("Contractor"), do execute this affidavit on behalf of Contractor and, by executing this affidavit, the undersigned Contractor verifies its compliance with the Beason-Hammon Alabama Taxpayer and Citizen Protection Act, Act No. 2011-535 (Code of Alabama (1975) § 31-13-9), stating affirmatively that it does not knowingly employ, hire for employment, or continue to employ an unauthorized alien and that the Contractor (check one):

- Sole proprietorship
- Partnership
- Corporation
- Other Business Entity

which is contracting with or receiving grants or incentives from the City of Troy has registered with and is participating and will participate during the performance of any contract with the City in the federal work authorization program known as "E-verify", web address <https://e-verify.uscis.gov/enroll>, operated by the United States Citizenship and Immigration Service Bureau of the United States Department of Homeland Security to verify information of newly hired employees, pursuant to the Immigration Reform and Control Act of 1986 (IRCA), P.L. 99-603, in accordance with the applicability provisions of the Alabama Immigration Act.

The undersigned further represents that, should it employ or contract with any subcontractor(s) in connection with the physical performance of services pursuant to the contract with the City of Troy, Alabama, that the Contractor will secure from such subcontractor(s) verification of compliance with Code of Alabama (1975) § 31-13-9 in a form substantially similar to this affidavit. Contractor further agrees to maintain records of such compliance and provide a copy of each such verification to the City of Homewood, at the time the subcontractor is retained to perform such services.

E-Verify Employment Eligibility Verification User Identification Number

Name of Contractor

Signature of Authorized Officer or Agent of Contractor

Title of Authorized Officer or Agent of Contractor

Printed Name of Authorized Officer or Agent

Sworn to and subscribed before me on this ____ day of _____, 20__.

NOTARY PUBLIC

My Commission Expires: _____