

Michigan Department of Labor & Economic Growth
Bureau of Commercial Services
LICENSING DIVISION
P.O. Box 30018, Lansing, MI 48909
517-241-9288

AFFIDAVIT OF NON-CITIZEN, NON-RESIDENT OF MICHIGAN

AUTHORITY: Public Act 331 and 332 of 1998
COMPLETION: Mandatory
PENALTY:

Applicant	License Type
Home Address (Number and Street)	Country of Citizenship
City, State or Providence, Zip Code	

I hereby affirm that I am a citizen of the country named above, residing in that country. I do not have work authorization from the Immigration and Naturalization (INS) to work in Michigan and therefore cannot provide the Department of Labor & Economic Growth (DLEG) with a valid Social Security Number to complete my application for a license. I have provided proof of this to DLEG in the form of a true copy:

- Birth Certificate
- Certificate of Citizenship
- Voter Registration Card
- Social Security Number
- Other, please specify _____

At such time as I receive work authorization from the INS and receive a Social Security Number, I will transmit my Social Security Number to DLEG at the address listed above.

I certify that the statements made here are true and correct. I have not withheld information that might affect the decisions to be made regarding this form. I am aware that a false statement or dishonest answer may be grounds for denial of my application or disciplinary action against my license, or may be punishable by law. I hereby authorize the Michigan Department of Labor & Economic Growth and its agents to investigate any statements made by me in this application, including checking criminal, civil, and administrative records. I further authorize the Department or its agents to examine my books and records at the Department's discretion.

Signature of Applicant

Date

Sworn before me, a notary public, on the date indicated above.

Signature of Notary Public

State of: _____

Type or print Commission Name

My commission expires on: _____

County or Providence of: _____