# **Secondary Metals Recycler Registration Form**

Pursuant to O.C.G.A. § 10-1-360, beginning July 1, 2012, secondary metals recyclers who purchase regulated metal property in any quantity must register with the appropriate sheriff's office or offices.

### **To Determine the County of Registration**

- **Business (Corporation or Partnership)** If you are registering as a *business*, you must register with the sheriff in each county where you maintain a place of business. If you maintain a place of business in more than one county, you must file a separate registration form for each business location.
- **Individual (Sole Proprietor)** If you are registering as an *individual*, you must register in the county where you reside.
- Non-resident of Georgia

If you are <u>not</u> a resident of Georgia, you must register in the county where you primarily engage or intend to engage in business as a secondary metals recycler.

### **The Registration Process**

- Obtain a copy of the *Secondary Metals Recycler Registration* form online at \_\_\_\_\_\_ or by visiting the \_\_\_\_\_\_ County Sheriff's Office.
- Complete and submit the registration form *in person* to the appropriate sheriff's office or offices.
- Application for registration must include:
  - □ Non-Refundable Registration Fee Submit payment of \$200 with the registration form; the payment must be made by check or money order payable to the \_\_\_\_\_\_ County Sheriff's Office. Checks returned for insufficient funds are subject to a \$30 service charge pursuant to O.C.G.A. § 16-9-20.
  - □ Identification
  - □ Citizenship / Qualified Alien Status

If you are a qualified alien, your Secure and Verifiable documentation must be attached to the application.

• Read the instructions carefully and be familiar with the laws governing Secondary Metals Recyclers in the State of Georgia. Visit our website for information: \_\_\_\_\_

#### **Registration**

Each registration is valid for a 12 month period beginning with the effective registration date as established by the sheriff's office once all registration requirements are met.

#### **Questions?**

Contact \_\_\_\_\_

\_\_\_\_\_ at your local sheriff's office at \_\_\_\_\_

This is an official document and may not be altered, except to individualize sheriff's office information.

Secondary	Metals	Recycler	Registration
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Name of Corporation applicable)	or Partnership (if					
Full Name of Individu						
	(Please print)	First	Middle		Last	
Physical Address	Provide street address; include apartment number if applicable. ( <i>P.O. Box not acceptable;</i> must be a physical street address in Georgia where an individual can be located in-person for the company.)					
	City / State / Zip					
Aailing Address	If different from above, provide street	t address; include	apartment number i	f applicable; or, provi	de P.O. Box.	
	City / State / Zip					
Contact Information	Email					
	Day Telephone Number	Evening Teleph	none Number	Cell Number		
<i>he active on-site mand</i> Name of the On-Site I		First	Middle		Last	
Physical Address	Provide your street address; include apartment number if applicable. (P.O. Box not acceptable.)					
	City / State / Zip					
Contact Information	Email					
	Day Telephone Number	Evening Telepl	none Number	Cell Number		
8	e: \$200 (Non-refundable.) The r identification.	e fee for check	s returned due	to non-sufficient	funds is \$30.0	
Provide a copy of you						

July, 2012

# **Secondary Metals Recycler Registration – Registrant Affidavit**

I hereby swear and affirm that all information provided in this registration form is true and correct to the best of my knowledge and belief. I further swear and affirm that I have read and understand the current state laws relating to secondary metals recyclers in Georgia and I agree to abide by these laws, as amended from time to time.

*By signing this application, I hereby swear and affirm one of the following to be true and accurate pursuant to O.C.G.A. § 50-36-1:* 

- 1. \_\_\_\_\_ I am a United States citizen 18 years of age or older. Please submit a copy of your current Secure and Verifiable Document(s) such as driver's license, passport, or other approved documentation.
- 2. \_\_\_\_\_ I am not a United States citizen, but I am a legal permanent resident of the United States 18 years of age or older, or I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older with an alien number issued by the Department of Homeland Security or other federal immigration agency. Please submit a copy of your current immigration document(s) which includes either your Alien number or your I-94 number and, if needed, SEVIS number.

By signing below, I acknowledge that I understand that I must comply with all Georgia laws relevant to secondary metals recyclers at all times.

- □ I am informed of the statutes pertaining to the Secondary Metals Recyclers pursuant to HB872, and the following statutes O.C.G.A. § 10-1-350 *through* O.C.G.A. § 10-1-363, O.C.G.A. § 40-3-36, O.C.G.A. § 40-3-56.
- □ I acknowledge that I understand the definition of secondary metals recycler as defined in O.C.G.A. § 10-1-350. 'Secondary metals recycler' means any person who is engaged, from a fixed location or otherwise, in the business in this state of paying compensation for regulated metal property that has served its original economic purpose, whether or not engaged in the business of performing the manufacturing process by which regulated metal property is converted into raw material products consisting of prepared grades and having an existing or potential economic value.
- □ I understand I may visit <u>www.georgiarecyclers.org</u> for a summary of the laws relevant to Georgia secondary metals recycler information provided by The Georgia Recyclers Association but I understand that this summary does not substitute the advice of legal counsel or reading of the actual laws.

In making the above attestation, I understand that making any false statements or writings on any part or portion of this application is a violation of O.C.G.A. 16-10-20. Failure to make full and accurate disclosures may result in criminal prosecution.

Signature of Individual Completing Registration Application

Print Individual Completing Registration Application

## TO BE COMPLETED IN THE PRESENCE OF THE SHERIFF OR HIS DESIGNEE UPON SUBMISSION OF THIS APPLICATION TO THE APPROPRIATE SHERIFF'S OFFICE

Secondary Metals Recycler Signature

Sheriff or Sheriff's Designee Signature

Effective Date of Registration

**Registration Number** 

Date

Date

Date

Expiration Date of Registration