GEORGIA STATE CONSTRUCTION INDUSTRY LICENSING BOARD  
DIVISION OF LOW VOLTAGE CONTRACTORS  
237 Coliseum Drive  
Macon, Georgia 31217  
(478) 207-2440 [Telephone]  
888-866-9718 [Fax]  
www.sos.ga.gov/plb/construct

## LOW VOLTAGE CONTRACTORS  
STATEWIDE LICENSES

### GENERAL INFORMATION and CHECKLIST

A Complete Application Packet Includes:
- Application for License Examination Form (including 3 reference letter forms)

**OTHER MATERIALS MAILED TO APPLICANTS:**

- **Approximately 45 Days Prior to the Examination**  
  Letter from the Board notifying the applicant of approval or disapproval to take the examination. If approved, applicant will receive the Candidate Information Bulletin, which includes an outline of topics covered in the examination.

- **Approximately 2 Weeks Prior to the Examination**  
  Admission Notices from AMP to scheduled applicants, giving the date and location of the examination, as requested on the AMP-GA 15 form. [If you receive an approval letter from the Board, but do not receive an admission notice, contact AMP at (800) 345-6559.]

- **Approximately 45 Days After the Examination**  
  Examination Results. Applicants who failed the exam will receive a new Examination Scheduling Form to apply for another examination date. Applicants who passed the examination will receive their license identification card.

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### LICENSES REQUIRED

Low Voltage Licenses are required of persons who contract to install, alter, service, or repair low voltage systems. Separate licenses are issued for general, alarm, telecommunication, and unrestricted low voltage contracting. See §43-14-2 of the Excerpts from the Board Laws and Rules for definitions and §43-14-13 for exemptions to the requirements by downloading from our web page: [www.sos.ga.gov/plb/construct](http://www.sos.ga.gov/plb/construct).

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### RESTRICTIONS ON STATEWIDE LOW VOLTAGE CONTRACTOR LICENSES

Low Voltage Contractor Licenses are required of persons who contract to install, alter, repair, or service low voltage systems. Low Voltage systems are defined in O.C.G.A. §43-14-2 (See Excerpts from the Board Laws and Rules). General System Low Voltage Contractor licenses cover low voltage systems, other than alarm and telecommunications systems. (See Board Rule 121-2-.04.) Alarm and telecommunications licenses also cover general systems. Unrestricted licenses cover all low voltage systems.

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Please detach and keep these instructions for your records.
APPLICATION FOR LOW VOLTAGE CONTRACTOR
GEORGIA STATE BOARD OF CONSTRUCTION
237 Coliseum Drive
Macon, Georgia 31217
Phone (478) 207-2440
www.sos.ga.gov/plb/construct

Please read the instructions carefully and be familiar with the laws and rules governing the practice of low voltage in the State of Georgia. Visit the following web site for information: http://www.sos.ga.gov/plb/construct.

**Important**
The Board cannot process incomplete applications. If any item is missing, incomplete or incorrect, your application cannot be reviewed by the Board. Please review this application before you submit it to ensure that all information and documentation is complete and correct. Incomplete applications result in delayed processing. Incomplete applications are void after one year. Only complete applications received by the deadline are reviewed by the Low Voltage Board.

Application Checklist

The following checklist is an important part of your application. Please use this checklist to ensure that you submit a COMPLETE application. Do not send the checklist with your application; it is for your use only!

The $30.00 non-refundable application fee payable to Georgia State Board of Construction must be included with application

- **EXPERIENCE**: All information on your employer(s) and details of your work experience are completed.

- **PERSONAL HISTORY**: Beginning October 15, 2007, all applicants must submit a background check with the application. This may be obtained through your local law enforcement center.

- **NOTARIZED APPLICATION**: The four-page completed application must be mailed to the Board’s office at the address listed above and received in the board office no later than 60 days prior to the expected exam date. The Board, at their next scheduled meeting, will review the application with required documentation. Approval of licensure is at the Board’s discretion.

- **Three (3) original notarized reference letters are attached from the people listed in Part III.**

- **OTHER STATE LICENSURE CERTIFICATION**: If you are applying for reciprocity, you MUST include a letter of verification/good standing from the North Carolina state licensing board stating that you have taken the state exam. Copies of your scores or your current license are not acceptable.

SEE SEPARATE APPLICATION FOR REINSTATEMENT BY RE-EXAMINATION for licenses lapsed more over three (3) years.

Detach and keep this information for your records.
INSTRUCTIONS TO APPLY FOR
LOW-VOLTAGE CONTRACTORS LICENSE

Based on Out of State Examination

Please read these instructions carefully before completing your applications. Type or hand print your application.

Under Board Rule 121-2-.05, Statewide License by Endorsement, the Division of Low-voltage Contractors may accept results of approved out of state examinations for licensure. The Board has approved:

- The examinations for Unlimited or Low-voltage classifications administered by the North Carolina State Board of Examiners of Electrical Contractors; and

Persons applying for Georgia license based on these examinations must also meet the experience and other requirements for Georgia license.

To apply, complete the license application form as instructed. In addition, an original letter of certification from the North Carolina Licensing Board must be submitted. The certification must state that the applicant holds a current license and has passed the state examination. The application fee of $30.00 must be submitted with the application.

The examination scheduling form and examination fee are not required for application based on out of state examination.

DETACH AND KEEP FOR YOUR OWN RECORDS
APPLICATION FOR LOW VOLTAGE CONTRACTOR

Application Fee $30.00 (non-refundable)
In the form of a money order or company or personal check made out to GCILB

License Type: __________ General
(Check only one category)
_____________ Alarm
_____________ Telecommunications
_____________ Unrestricted

Additional License Types (currently or previously issued by the Georgia Professional Licensing Boards):

Method Obtained by:
Applicant is applying for above referenced license by:
( ) Examination
( ) Reciprocity with the State of North Carolina

Name
as desired on License First Middle Last Suffix

Social Security Number (required for tracking purposes) Date of Birth

Physical Address
P.O. Box not acceptable Number and Street Apt. No City/State Zip

Mailing Address
(if different) P.O. Box OR Number and Street Apt. No City/State Zip

Daytime Telephone Number Business or Cell phone Number

E-mail address:

_______ I am requesting Veterans’ Preference Points (exam applicants only).

Attached is a copy of my DD-214
**PART II – EXPERIENCE RECORD**

**INSTRUCTIONS:**
- Applicants must list at least 1 year of installation experience.
- Applicants for an alarm or telecommunication license must have experience installing these systems.
- Applicants for an unrestricted license must have experience in both alarm and telecommunication installations.
- For each period of employment, list the information requested.
- Describe briefly, but concisely, the low voltage work you performed, your duties, and degree of responsibility. See Board Rule 121-2-.04 for a description of the experience requirements.
- Give the approximate number of hours per week and percentage of time you performed the duties described.
- For more than 5 employers, attach additional pages, using this format and writing your name at the top.

**SPECIFY WORK RELATING TO LOW VOLTAGE DUTIES – BEGIN WITH PRESENT EMPLOYMENT**

<table>
<thead>
<tr>
<th>Name of Employer:</th>
<th>Phone: ( )</th>
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<tbody>
<tr>
<td>Employer's Complete Address:</td>
<td></td>
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<tr>
<td>Name of Supervisor:</td>
<td>Job Title of Supervisor:</td>
</tr>
<tr>
<td>Your Job Title</td>
<td>Employed FROM: [Mo/Yr]</td>
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<tr>
<td>Approximate # of Hours/Week perform duties listed below:</td>
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<tr>
<td>Description of Low Voltage Duties:</td>
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</table>
PART III – REFERENCES

INSTRUCTIONS: List below the names, complete addresses, and telephone numbers of three (3) persons who have knowledge of your low voltage experience to whom the Division may refer. At least one reference must be a low voltage contractor. 

Attach 3 completed original and notarized reference forms from the people listed below.

Name: _______________________________________ Telephone Number: (       ) ___________________________
Address: ___________________________________________ Street City State Zip Code

Name: _______________________________________ Telephone Number: (       ) ___________________________
Address: ___________________________________________ Street City State Zip Code

Name: _______________________________________ Telephone Number: (       ) ___________________________
Address: ___________________________________________ Street City State Zip Code

PART IV – PERSONAL HISTORY

Have you received a diploma in Engineering Technology or a certificate for completion of a vocational-technical college program? ☐ No ☐ Yes If yes, attach copy of diploma or certificate.

Have you ever held a low voltage contractors’ license? ☐ No ☐ Yes If yes, attach a copy or evidence of license.

If yes, type of license held ____________________________, Agency that issued license ____________________________.

Have you ever had a license revoked, suspended, or otherwise sanctioned by any board or agency, or have you ever been denied issuance of or, pursuant to disciplinary proceedings, refused renewal of a license by any board or agency in Georgia or other state? ☐ No ☐ Yes If yes, please explain ____________________________.

Have you: (1) been convicted of a misdemeanor (other than minor traffic violation) within the past five years; (2) ever been convicted of a felony; or (3) entered a plea of guilty, nolo contendere, or under “First Offender Act”? ☐ No ☐ Yes If you answered “yes”, you must submit to the Board the following: a copy of conviction/sentencing document(s) from the Court before which you were convicted and sentenced, signed by the presiding judge, and showing said conviction and sentence; AND b0 a statement (on official letterhead) from you probation/parole officer regarding your current status/completion of any probation/parole. Your application will not be processed until this information is received and reviewed by the Board.

PART V – CERTIFICATION

I hereby swear and affirm that all information provided in this application 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 and rules and regulations of the Georgia Construction Industry Licensing Boards, and I agree to abide by these laws and rules, as amended from time to time.

By signing this application, electronically or otherwise, 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 document as indicated on page 15 of the application.

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.

In making the above attestation, I understand that any failure to make full and accurate disclosures may result in disciplinary action by the Georgia Construction Industry Licensing Boards and/or criminal prosecution.

Signature of Applicant ___________________________________________ Subscribed to and sworn before me ___________day of __________________, _______.

__________ Notary Seal My Commission Expires: ______________

Date ___________ Notary Public
Dear Sir or Madam:

The applicant named on this form is required to furnish evidence of his or her ability, experience, and professional skills in the field of Low Voltage Contracting. The applicant is required to furnish the State Construction Industry Licensing Board, Division of Low Voltage Contractors with three references attesting to his or her qualifications. These references must have worked directly with the individual on low voltage projects. At least one reference must be from a licensed low voltage contractor.

The Division wishes to point out that the statements submitted must be from personal knowledge only and made with the full realization of the responsibility toward the public. In view of this responsibility, the Division requests your cooperation by answering truthfully, carefully, and completely the questions printed on the back of this letter. It is unlawful to make false statements regarding an applicant’s experience.

Please be assured that the information you furnish will be treated as confidential and will not be released without specific authorization by the Division.

To further assure confidentiality, the enclosed form may be placed in a sealed envelope with your signature across the flap and given to the applicant to include with the application.

Sincerely,

State Construction Industry Licensing Board

Division of Low Voltage Contractors
Low Voltage Contractors
Applicant Reference Form

Applicant Name: ____________________________________________________________

1. How well do you know the applicant? ( ) very well ( ) well ( ) slightly ( ) not at all
2. List dates (months and years) of contact with the applicant, from ___________ to ___________
3. Do you have personal knowledge of the applicant’s supervised installation experience by a licensed low voltage contractor on low voltage systems (as defined below) ( ) Yes If yes, complete form ( ) No If no, complete only numbers 1, 2, 3, 5, 6, and signature.

   • “General low-voltage systems” mean any electrical systems, other than alarm or telecommunication systems, involving low-voltage wiring, including, but not limited to stand alone intercom systems and call alert systems (audio or visual); distribution wiring for alarm systems and telecommunications systems including local area network systems; sound systems; public address systems; the low voltage side of energy management systems; antenna systems and satellite dish systems, irrigation system wiring; and low voltage lighting.

   • “Alarm system” means any device or combination of devices used to detect a situation, causing an alarm in the event of a burglary, fire, robbery, medical emergency, or equipment failure, or on the occurrence of any other predetermined event.

   • “Telecommunication system” means a switching system and associated apparatus which performs the basic function of two-way voice or data service, or both, and which can be a commonly controlled system capable of being administered both locally and remotely via secured access.

4. Check the low voltage systems the applicant has experience installing & specify the length of time for each system.
   • General Low Voltage Systems Length of time installing _______________
   • Alarm Systems Length of time installing _______________
   • Telecommunications Systems Length of time installing _______________
   • All above Low Voltage Systems Length of time installing _______________

5. What was/is your relationship with the applicant? __________________________________________

6. What is your opinion of the applicant’s personal integrity and reputation:
   ______________________________________________________________________________

7. Considering the need to protect the public health, safely and welfare, in your opinion how does this applicant rank in professional competence and responsibility:
   ( ) Qualified ( ) Additional experience needed ( ) Unqualified

8. Based on your personal knowledge of the applicant’s experience in installing low voltage systems, do you recommend the applicant for low voltage licensure? ( )yes ( ) no

I certify that the above statements are true and correct to the best of my personal knowledge, not made for the purpose of aiding an unqualified applicant to become licensed but with full realization of the responsibility toward the public where the safeguarding of life, health and property is concerned or involved.

Print name ___________________________ Low Voltage License No. ______ State of License ______
Present position ___________________________ Company ___________________________
Address ___________________________ Day-time number (______)________________________
Subscribed and sworn to before me this ____________ day of __________, ______
Signature & Date ___________________________
Notary Seal & Date commission expires ____________________________
Dear Sir or Madam:

The applicant named on this form is required to furnish evidence of his or her ability, experience, and professional skills in the field of Low Voltage Contracting. The applicant is required to furnish the State Construction Industry Licensing Board, Division of Low Voltage Contractors with three references attesting to his or her qualifications. These references must have worked directly with the individual on low voltage projects. At least one reference must be from a licensed low voltage contractor.

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Low Voltage Contractors
Applicant Reference Form

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     involving low-voltage wiring, including, but not limited to stand alone intercom systems and call alert
     systems (audio or visual); distribution wiring for alarm systems and telecommunications systems including
     local area network systems; sound systems; public address systems; the low voltage side of energy
     management systems; antenna systems and satellite dish systems, irrigation system wiring; and low voltage
     lighting.
   • "Alarm system" means any device or combination of devices used to detect a situation, causing an alarm in
     the event of a burglary, fire, robbery, medical emergency, or equipment failure, or on the occurrence of any
     other predetermined event.
   • “Telecommunication system” means a switching system and associated apparatus which performs the basic
     function of two-way voice or data service, or both, and which can be a commonly controlled system capable
     of being administered both locally and remotely via secured access.
4. Check the low voltage systems the applicant has experience installing & specify the length of time for each
   system.
   • General Low Voltage Systems  Length of time installing _______________
   • Alarm Systems  Length of time installing _______________
   • Telecommunications Systems  Length of time installing _______________
   • All above Low Voltage Systems  Length of time installing _______________
5. What was/is your relationship with the applicant? ______________________________________________
6. What is your opinion of the applicant’s personal integrity and reputation:
   __________________________________________________________________________________________
7. Considering the need to protect the public health, safely and welfare, in your opinion how does
   this applicant rank in professional competence and responsibility:
   ( ) Qualified  ( ) Additional experience needed  ( ) Unqualified
8. Based on your personal knowledge of the applicant’s experience in installing low voltage systems, do
   you recommend the applicant for low voltage licensure? ( )yes ( ) no

I certify that the above statements are true and correct to the best of my personal knowledge, not made for the
purpose of aiding an unqualified applicant to become licensed but with full realization of the responsibility
toward the public where the safeguarding of life, health and property is concerned or involved.

Print name ___________________________  Low Voltage License No. _______  State of License _______
Present position ___________________________  Company ___________________________
Address ___________________________  Day-time number ( ) ___________________________
                                                                 Subscribed and sworn to before me this __________ day of ____________________, ________
Signature & Date ____________________________________________________

Notary Seal & Date commission expires
Dear Sir or Madam:

The applicant named on this form is required to furnish evidence of his or her ability, experience, and professional skills in the field of Low Voltage Contracting. The applicant is required to furnish the State Construction Industry Licensing Board, Division of Low Voltage Contractors with three references attesting to his or her qualifications. These references must have worked directly with the individual on low voltage projects. At least one reference must be from a licensed low voltage contractor.

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Sincerely,

State Construction Industry Licensing Board

Division of Low Voltage Contractors
Low Voltage Contractors
Applicant Reference Form

Applicant (individual’s) Name: _______________________________________________________

1. How well do you know the applicant? ( ) very well ( ) well ( ) slightly ( ) not at all

2. List dates (months and years) of contact with the applicant, from _______________ to ____________

3. Do you have personal knowledge of the applicant’s supervised installation experience by a licensed low voltage contractor on low voltage systems (as defined below) ( )Yes If yes, complete form ( )No If no, complete only numbers 1, 2, 3, 5, 6, and signature.

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4. Check the low voltage systems the applicant has experience installing & specify the length of time for each system.
   - General Low Voltage Systems 
     Length of time installing _______________
   - Alarm Systems 
     Length of time installing _______________
   - Telecommunications Systems 
     Length of time installing _______________
   - All above Low Voltage Systems 
     Length of time installing _______________

5. What was/is your relationship with the applicant? ____________________________________________

6. What is your opinion of the applicant’s personal integrity and reputation:
   ___________________________________________________________________________________

7. Considering the need to protect the public health, safely and welfare, in your opinion how does this applicant rank in professional competence and responsibility:
   ( ) Qualified ( ) Additional experience needed ( ) Unqualified

8. Based on your personal knowledge of the applicant’s experience in installing low voltage systems, do you recommend the applicant for low voltage licensure? ( )yes ( ) no

I certify that the above statements are true and correct to the best of my personal knowledge, not made for the purpose of aiding an unqualified applicant to become licensed but with full realization of the responsibility toward the public where the safeguarding of life, health and property is concerned or involved.

Print name _____________________________ Low Voltage License No. ______ State of License ______

Present position __________________________ Company __________________________

Address __________________________ Day-time number ( ) ______________

Subscribed and sworn to before me this __________ day of ______________, ________

Signature & Date __________________________

Notary Seal & Date commission expires
CONSENT FORM

I hereby authorize the Construction Industry Licensing Boards ("Board") to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

________________________________________________________________________
Full Name (Print)
________________________________________________________________________
________________________________________________________________________
Physical Address (P.O. Boxes NOT Accepted)

__________________________          ____________        ____________________      _________________
Sex                        Race                        Date of Birth             Social Security Number

One of the following must be checked:

☐ This authorization is valid for 90/180/___ (circle one) days from date of signature.

☐ I, ________________________________ give consent to the Board to perform periodic criminal history background checks for the duration of my licensure with this state.

_________________________________  __________________
Signature of Applicant             Date

Special licensure provisions (check if applicable):

☐ Working with mentally disabled
☐ Working with elder care
☐ Working with children
The Illegal Immigration Reform and Enforcement Act of 2011 (“IIREA”) provides that “[n]ot later than August 1, 2011, the Attorney General shall provide and make public on the Department of Law’s website a list of acceptable secure and verifiable documents. The list shall be reviewed and updated annually by the Attorney General.” O.C.G.A. § 50-36-2(f). The Attorney General may modify this list on a more frequent basis, if necessary.

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

_____ A United States passport or passport card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A United States military identification card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A driver’s license issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An identification card issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Mariana Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A tribal identification card of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at: [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

http://www.bia.gov/WhoWeAre/BIA/OJIS/TribalGovernmentServices/TribalDirectory/index.htm

_____ A United States Permanent Resident Card or Alien Registration Receipt Card [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ An Employment Authorization Document that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A passport issued by a foreign government [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Merchant Mariner Document or Merchant Mariner Credential issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Free and Secure Trade (FAST) card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A NEXUS card [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]

_____ A Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card [O.C.G.A. §50-36-2(b)(3); 22 CFR § 41.2]

_____ A driver’s license issued by a Canadian government authority [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]

_____ A Certificate of Citizenship issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____ A Certificate of Naturalization issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

_____ In addition to the documents listed herein, if, in administering a public benefit or program, an agency is required by federal law to accept a document or other form of identification for proof of or documentation of identity, that document or other form of identification will be deemed a secure and verifiable document solely for that particular program or administration of that particular public benefit. [O.C.G.A. § 50-36-2(c)]