

I-9 IDENTIFICATION VALIDATION ATTESTATION

Consumer Name:		Consumer PPL ID:
(First name Last name)		-
Personal Assistant (PA) Name:		PA PPL ID:
(First name Last name)		
PPL must make sure that your PPAs must complete these items		wed to work in the United States.
•	uired documents listed on pa	ge 2 of USCIS Form I-9; and see that your PA is the same
As a co-employer, you must con signing on the line at the bottom		g all three boxes below and
☐ I understand these requireme	ents and told my PA about the	em.
☐ Because my PA has chosen to verify my PA's documents		in-person or video check, I agree stration.
☐ My PA provided I-9 documenthe I-9 documents my PA sub	•	L@Home. I personally checked ney belong to my PA.
I certify that the information above is tr consumer or Designated Representation		
Consumer or Designated Representative Signature		Date
Send a complete	and signed form to the PPL vi	a fax, email or mail.
Fax	Email	Mail
1-833-951-0828	NYCDPAP@pplfirst.com	Public Partnerships LLC 17 Plaza Dr. Latham, NY 12110