



**Request for Withdrawal of Public Records Exemption**

Property Address: \_\_\_\_\_

I, \_\_\_\_\_, hereby request that the exemption from the Public Records Law pursuant to Chapter 119, Florida Statutes, be withdrawn on the above referenced property address.

I understand that this will allow my name, home address and telephone number to become part of the public records of the Property Appraiser's Office, I understand that it is my responsibility to check with other public agencies regarding maintaining the confidentiality of this information by other such agencies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_



***Only complete the following notary section if you are not submitting this form in person.***

State of Florida  
County of Leon

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary

(Notary Seal)

\_\_\_\_\_  
Name of Notary

Produced Identification \_\_\_\_\_ Type of Identification Produced \_\_\_\_\_

Revised 8/16/19

*This section is for Property Appraiser's Use Only*

Parcel ID: \_\_\_\_\_

Applicant ID Verified by: \_\_\_\_\_  In person Date: \_\_\_\_\_

Withdrawn in iasWorld by: \_\_\_\_\_ Date: \_\_\_\_\_

Delivered to Tax Collector by: \_\_\_\_\_ Date: \_\_\_\_\_

Delivered to GIS/Webmaster by: \_\_\_\_\_ Date: \_\_\_\_\_



(850) 606-6200



admin@leonpa.org



www.leonpa.org

Find us on

