



Request to Remove Property from Public Record Exempt List

Original Applicant Name: _____ Date of Request: _____

Parcel number(s): _____

As the property owner of the above listed parcel(s), I am knowingly and voluntarily requesting that the above listed parcel(s) be taken off the public records exempt list in reference to the Alachua County Property Appraiser's office only. This request does not pertain to any other government agencies. I understand that the information held by the Alachua County Property Appraiser regarding my parcel(s) will be subject to any public records request as detailed in FSS 119 (Florida Public Records Laws).

All information relevant to the parcel(s) listed above will be viewable via our website at www.acpafll.org.

Signing below confirms that you, as the property owner and original applicant, understands the contents of this letter and its purpose to remove the confidential status of my parcel(s) with the Alachua County Property Appraiser's Office in accordance with FSS 119.

Original Applicant Signature: _____ Date: _____

Notary

State of Florida

County of _____

This instrument was sworn to and subscribed before me on this date _____, by

_____ who is personally known to me or who has

produced _____ as identification by means of

physical presence or online notarization.

Notary Signature (SEAL)

My Commission Expires _____