



KATRINA SCARBOROUGH, CFA, CCF, MCF OSCEOLA COUNTY PROPERTY APPRAISER

PERMANENT NAME AND ADDRESS BLOCKING FOR PROPERTY IN OSCEOLA COUNTY

Pursuant to Florida Statute, Section 119.071, I _____ (Print Name) am requesting you suppress any information in your public records which would reveal my home address, including: PROPERTY I OWN IN OSCEOLA COUNTY FOR WHICH I HAVE BEEN GRANTED HOMESTEAD EXEMPTION, OR PROPERTY I OWN IN OSCEOLA COUNTY EITHER INDIVIDUALLY OR JOINTLY WITH ANOTHER PARTY, WHICH HAS NOT BEEN GRANTED HOMESTEAD, BUT FOR WHICH THE TAX BILL IS MAILED TO MY ATTENTION AT MY HOME ADDRESS, AS LISTED BELOW:

(If request is for multiple properties, a separate form must be submitted for each parcel or account)

PARCEL IDENTIFICATION NUMBER: _____

TANGIBLE PERSONAL PROPERTY ACCOUNT NUMBER (if applicable): _____

Title to the property is held in the following name(s): _____

Street Address of Property: _____

City: _____ Zip Code: _____

OFFICE OF EMPLOYMENT: _____

EMPLOYEE IDENTIFICATION NUMBER: _____ (Please attach copy of Employee ID/Badge)

PHONE NUMBER: Home: _____ Work: _____

I hereby verify the above information to be true and correct and I qualify as personnel as defined in Chapter 119.07 (4) (d) 1-8 Florida Statute.

I understand, by suppressing information, my name and mailing address will no longer appear on the Property Appraiser's Website.

IF NOT PERSONNEL AS DEFINED IN CHAPTER 119.071, Florida Statute, STATE REASON FOR CONFIDENTIAL REQUEST: _____

(Attach supporting documentation)

Notary Section:

Signature of confidential applicant (in presence of notary): _____

Print Name: _____

State of Florida, County of _____ Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____

By _____ Signature of Notary _____

Notary Seal

Name of Notary (Typed, Printed, or Stamped)

Personally known _____ or, Produced Identification _____ Type of Identification Produced _____

Approved: _____ Disapproved: _____ Entered by: _____ Date: _____