



Bill Furst
SARASOTA COUNTY
PROPERTY APPRAISER

REQUEST FOR EXEMPTION FROM PUBLIC RECORDS DISCLOSURE (§ 119.071, Florida Statutes)

Return to: Sarasota County Property Appraiser
 ATTN: Administrative Director
 2001 Adams Lane
 Sarasota, FL 34237
 Or scan and email to: PA@SC-PA.com

Pursuant to Section 119.01, F.S., it is the policy of the State of Florida that all state, county and municipal records, which are not exempt by law, be open for inspection and copying by any person. It is the duty of this agency to provide public access to non-exempt records we maintain in the most efficient way possible, preferably by remote electronic access via our website.

Florida Statutes provide a limited list of property owners (and their spouses and children) who may qualify to have their home addresses, phone numbers, and in some cases additional data, protected in our records.

INSTRUCTIONS: Complete this form to request exemption from public records disclosure for property you own in Sarasota County, Florida, if you are law enforcement personnel, firefighter, judge, state attorney, or other qualified personnel as defined in 119.071(4) or 493.6122, Florida Statutes.

Incomplete submissions that cannot be verified by the Property Appraiser will not be processed and will be returned to sender. If information supplied is insufficient to make a determination, the Property Appraiser may require additional information. Attach any additional evidence or documentation, verifiable by the Property Appraiser, to support your claim of qualification.

I _____ (PRINT NAME) am requesting the suppression of certain personal information contained in my property record from the Property Appraiser's public records.

Please provide the Account Number/Parcel ID, owner name and address of the property to be suppressed:

Account Number/Parcel ID: _____

Owner Name(s): _____

Property Address: _____

Permanent Mailing Address Change (if applicable) - I request your office change my mailing address to:

Mailing Address: _____

If request is for multiple properties, a separate form must be filled out for each Account/Parcel ID. The Property Appraiser is not responsible for blocking addresses on parcels or accounts for which a form has not been received, qualified and approved.

If this request is for a newly purchased property for which your name does not yet appear on the tax roll records, a copy of the new deed must be attached.

SELECT THE APPROPRIATE EMPLOYMENT STATUS AND CLASSIFICATION PER §119.071:

- I am:** Currently employed as OR Formerly employed as
 Spouse of a current OR Spouse of a former
 Child of a current OR Child of a former

CURRENT OR FORMER ARE ELIGIBLE:

- Law enforcement personnel sworn or civilian [§119.071(4)(d)2.a]
- Investigators with Department of Children and Families or Department of Health [§119.071(4)(d)2.a]
- Department of Revenue or Local Government revenue collection personnel [§119.071(4)(d)2.a]
- Department of Financial Services non-sworn investigative personnel [§119.071(4)(d)2.b]
- Office of Fin. Regulation’s Bureau of Financial Investigations non-sworn investigative personnel [§119.071(4)(d)2.c]
- Firefighters certified in compliance with s 633.408 [§119.071(4)(d)2.d]
- Judge (County, Circuit, Appeal) or Justices of the Supreme Court [§119.071(4)(d)2.e]
- State Attorney (or Assistant) or State Prosecutor (or Assistant) [§119.071(4)(d)2.f]
- Human resources, employee relations, managers local govt. or water mgmt. [§119.071(4)(d)2.h]
- Code Enforcement Officer [§119.071(4)(d)2.i]
- Guardian ad litem as defined in s. 39.820 [§119.071(4)(d)2.j]
- Juvenile Probation Officers / Supervisors and other similar [§119.071(4)(d)2.k]
- Public Defender / Assistant / Conflict Counsel and other similar [§119.071(4)(d)2.l]
- Investigator/Inspector of Dept. of Business & Professional Regulation [§119.071(4)2.m]
- Department of Health – Certain Personnel as defined in [§119.071(4)2.o]
- Impaired Practitioner Consultants [§119.071(4)2.p]
- Emergency Medical Technicians or Paramedics certified under chapter 401 [§119.071(4)(d)2.q]
- Office of Inspector General personnel or internal audit department as defined in [§119.071(4)2.r]
- U.S. Attorney or Assistant or U.S. Judge or U.S. Magistrate as defined in [§119.071(5)(i)]*
- Servicemember: Armed Forces, Reserve Component, or National Guard, who served after 09/11/2001 as defined in [§119.071(5)(k)]* (Copy of supporting evidence required)

ONLY CURRENT ARE ELIGIBLE:

- General / Special Magistrates or Administrative Judges [§119.071(4)(d)2.g]
- Judge of Compensation Claims, Administrative Law Judge [§119.071(4)(d)2.g]
- Child Support Enforcement Hearing Officer [§119.071(4)(d)2.g]
- County Tax Collector [§119.071(4)(d)2.n]

***CATEGORIES WITH ASTERISK** *I hereby affirm that I have made reasonable efforts to protect the information for which I am requesting protection from being accessible through other means available to the public. _____ (INITIALS REQUIRED)*

OR I am a:

- Victim as defined in [§119.071(2)(j)1]. Court documentation declaring you a victim must be submitted. This exemption is limited to five years from date of request, after which your information will no longer be exempt from public records.

OFFICE OF EMPLOYMENT: _____ EMPLOYEE ID NUMBER: _____

OFFICE ADDRESS: _____ JOB/POSITION HELD: _____

PRIMARY DUTIES/RESPONSIBILITIES: _____

ATTACH ALL OF THE FOLLOWING: a legible copy of employee ID/Badge w/photo, valid state-issued driver’s license or ID, and additional evidence or documentation to support your qualification for exempt status)

IF YOU ARE ACTIVELY EMPLOYED IN THIS POSITION, PROVIDE THE FOLLOWING:

SUPERVISOR’S NAME (PRINT): _____ SUPERVISOR’S PHONE: _____

IF YOU ARE RETIRED FROM OR FORMERLY EMPLOYED IN THIS POSITION, PROVIDE A CONTACT PHONE NUMBER TO THE HUMAN RESOURCES DIVISION FOR VERIFICATION OF PRIOR EMPLOYMENT:

Phone: _____

NOTICE – READ THOROUGHLY: I hereby affirm the above information to be true and correct and that I qualify as personnel defined in § 119.071, Florida Statutes. I understand that by suppressing information, no data held in the records of the Property Appraiser regarding my name and address will appear on the Property Appraiser’s website. The information provided on this request is itself held confidential by the Property Appraiser; however, it may be released upon entry of a court order. Upon submittal of this request, I agree to indemnify and hold harmless the Property Appraiser and staff for actions, reactions, or events that may be the direct or indirect result of this request. I understand the suppression of my information may present issues should I later choose to list my property for sale, refinance, shop for insurance, or attempt to pull permits for work performed to the property such as roofing, air conditioning, fencing, etc.; as most companies engaged in these industries rely upon data published in the public records of the Property Appraiser. I understand it is my responsibility to retain copies of my tax notices to supply to agents, contractors, or permitting agencies for such purposes. The Property Appraiser is not responsible for information contained on private business sites or public sites such as government websites or search engine sites such as Google, Bing or Yahoo. Such sites may have previously obtained property information from this office, a property information service, or previously ‘scraped’ data, and may have cached such information. Furthermore, I understand this request does not cover the blocking of my name and address from any documents including but not limited to deeds, mortgages, liens, and permits, either recorded in the public records of Sarasota County or held by any other government agency and which may be linked via a web link to or from the Property Appraiser’s website. For suppression of documents recorded with any other agency, you MUST contact those agencies directly.

I understand that if I am – per [§119.071(4)(d)2] a: firefighter, magistrate or judge, child support enforcement hearing officer, or county tax collector; or, per [§493.6122] a private investigator or other, who is eligible for this confidentiality only for the duration of employment, it is my responsibility to inform the Property Appraiser by submitting a notification letter with request for removal of confidentiality status should I no longer qualify under the statute.

I understand that, if approved, my information will be redacted from the Property Appraiser’s website during the next regularly scheduled update. Therefore, I understand that my information will be updated as timely as possible and feasible by the Property Appraiser. I understand it cannot and will not be removed from the site immediately upon submission of this request due to update cycles.

Lastly, I agree that by signing below, I have read and understand the aforementioned and availed myself of the opportunity to ask any questions of the Property Appraiser, seek clarification, or obtain additional information prior to this action being requested.

SIGNATURE OF APPLICANT: _____

DATE: _____

PHONE NUMBER(S) –REQUIRED: _____