

Franklin County Property Appraiser's Office  
Confidential Record Request Affidavit

BEFORE ME, the undersigned authority, personally appeared who in my presence, upon being duly sworn and deposed, states the following:

1. I own the real property or tangible personal property identified by the following property address, account number(s) or Parcel ID number(s)\*:

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\*you can locate the parcel number on the Property Appraiser's website [www.franklincountypa.net](http://www.franklincountypa.net) or on your tax bill.

2. My home address is as follows:

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Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

3. Pursuant to Florida Statute §119.071, I request that Franklin County Property Appraiser's Office suppress any information that would reveal my home address from appearing in your records.

Select the appropriate status and classification per §119.071:

Current or former personnel are eligible as well as their spouse and child(ren):

- Sworn or civilian law enforcement personnel [(4)(d)2.a]
- Investigators with Department of Children and Families or Department of Health [(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 [(4)(d)2.b]
- Investigative personnel of the Office of Financial Regulation's Bureau of Financial Investigations [(4)(d)2.c]
- Firefighters certified in compliance with s 633.35 [(4)(d)2.d]
- Judge (County, Circuit, Appeal) or Justices of the Supreme Court [(4)(d)2.e]
- State Attorney (or Assistant) or State Prosecutor (or Assistant) [(4)(d)2.f]
- Human resources, employee relations, managers of local government or water management [(4)(d)2.h] Code Enforcement Officer [(4)(d)2.i]
- Guardian ad litem as defined in s. 39.820 [(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 [(4)(d)2.l]
- Investigators or inspectors of the Department of Business and Professional Regulation [(4)2.m]
- Department of Health – Certain personnel as defined in [§119.071(4)2.o]
- Impaired Practitioner Consultants [(4)2.p]
- Emergency Medical Technicians or Paramedics certified under chapter 401 [(4)(d)2.q]
- Office of Inspector General personnel or internal audit department as defined in [(4)2.r] US Attorney or Assistant or US Judge or US Magistrate as defined in [(5)(i)]
- Service member: a Member of the Armed Forces of the United States, or a reserve component of the Armed Force of the US, or the National Guard, serving after September 11, 2001. [(5)(k)] *(Copy of supporting evidence required)*

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Only current personnel are eligible as well as their spouse and child(ren):

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

OR I am a:  Victim as defined in [(2)(j)1]. *(Copy of supporting evidence required) This exemption is limited to five years from date of request, after which your information will no longer be exempt from public records.*

4. I hereby verify the above information to be true and correct and that I qualify as personnel as defined in Chapter 119.071(4) of the Florida Statutes. I understand that by suppressing information, no data regarding my parcel will appear on the Franklin County Property Appraiser’s website.
5. I am familiar with the nature of an oath and with the penalties provided by the State of Florida for falsely swearing to a document.

**NOTE: If you relocate or acquire additional property, you must submit another Confidential Record Request Affidavit.**

\_\_\_\_\_  
signature Owner's

State of Florida  
County of \_\_\_\_\_

SWORN TO and subscribed before me by means of  physical presence or  online notarization, this  
\_\_\_\_\_ by \_\_\_\_\_ who: is ( ) personally known to me or ( )  
has produced a driver’s license as identification.

(Notary Seal)

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

\_\_\_\_\_  
Printed Notary Name

If you have questions, please call 850-653-9236 or email rmskipperfcpa@yahoo.com

**Please return this affidavit to the Franklin County Property Appraiser's Office:**

Attn: Ownership/ Mapping Department  
Franklin County Property Appraiser's Office  
33. Market St, Suite 101 Apalachicola, Florida 32320