



# Mitch Burke, CFA

1000 Cecil G. Costin Sr. Blvd, Room 110 • Port St. Joe, FL 32456  
850-229-6115 • Fax 850-229-6661 • www.gulfpa.com

## REQUEST FOR RELEASE OF INFORMATION ON PROPERTY CURRENTLY EXEMPT FROM PUBLIC RECORD

Pursuant to 2019-12, Laws of Florida (Section 119.071(4)(d))

### INSTRUCTIONS:

This office may release information on a protected property in one of two ways.

Option 1: The protected person may visit our office, produce personal identification, specify the information requested (below on this form) and sign this release. Under this option, notarization is not required.

Option 2: If you are unable to visit this office in person, you must complete this form, have the form notarized, and either deliver, mail, or email the form to this office. The email address is **sam@gulfpa.com**. If this request is urgent or an emergency in nature, DO NOT return via email. Instead, it is recommended the protected person visit our office.

**This request is good for a one-time release of information only**

I, \_\_\_\_\_ (print name of the confidential applicant) Request the release of the information marked below for the property I own at:

\_\_\_\_\_  
(print the street number, street name, city and zip code)

Specify the information requested:

- Property Record Card (This record contains all protected property data elements)
- Most Recent Proposed Property Tax Notice (Also know as the TRIM notice)
- Copy of Deed

Check and sign if you are the owner and receiving information in person at our office. \_\_\_\_\_

I authorize release via email to me or my spouse. Email: \_\_\_\_\_

I authorize release via email or in-person to the following non-owner.

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Company Name: \_\_\_\_\_

### Notary Section:

Note: The Property Appraiser's office does not notarize documents.

\_\_\_\_\_  
Signature of confidential applicant (in presence of notary)

State of Florida

County of \_\_\_\_\_

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

By \_\_\_\_\_

Notary Seal:

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