



Flagler County Tax Collector

Request for Exemption from Public Records Disclosure

Reference: Florida Statute 119.071

Law Enforcement / Public Safety Request to Remove Information from Public Inspection

As of July 1, 2019, the definition of home address has been expanded to include the parcel identification number and legal description. Removing this information from the public records may result in unintended consequences, such as the inability to prove ownership of your property. While you are entitled to this exemption, know that you are effectively removing the information from the Public Records.

In order to obtain a copy of the original (un-redacted) image, a specific notarized request will be required. For your convenience, a copy is attached.

Incomplete submissions that cannot be verified by the Tax Collector's Office will not be processed and will be returned to sender. If information supplied is insufficient to make a determination, the Tax Collector may require additional information. You may attach additional evidence or documentation, verifiable by the Tax Collector, to support your claim of qualification.

Return to: Flagler County Tax Collector
PO Box 846
Bunnell, FL 32110
(386) 313-4160

or, email a copy to:
taxcollector@flaglertax.com

For suppression of documents recorded with the Flagler County Clerk of Courts, please contact that office directly at (386) 313-4360.

For suppression of information in the public records of the Property Appraiser's office and website, please contact that office directly at (386) 313-4150.



SUZANNE JOHNSTON, C.F.C.

Flagler County Tax Collector

1769 E. Moody Blvd, Bldg. 2, Ste 102 / P.O. Box 846 / Bunnell, FL 32110

Phone: 386-313-4160 / Fax: 386-313-4161

www.flaglertax.com

REQUEST FOR EXEMPTION FROM PUBLIC RECORDS DISCLOSURE

Florida Statute 119.071

I, _____ hereby request to have my exempt personal information be removed from records maintained by the Flagler County Tax Collector's Office.

Exempt information held under FS 119.071 or FS 493.6122 or FS 741.465 as (select all that apply):

- Current/former government agency employee in the category checked below
- Spouse of a current/former government agency employee in the category checked below
- Child of a current/former government agency employee in the category checked below

Check the appropriate item:

- Addiction treatment facility directors, managers, supervisors, nurses, or clinical employees [FS 119.071(4)(d)2.s.] (eff. 7/1/18)
- Child advocacy center directors, managers, supervisors, clinical employees of [FS 119.071(4)(d)2.t.] (eff. 7/1/18)
- Child support hearing officers [FS 119.071(4)(d)2.g.]
- Code enforcement officers [FS 119.071(4)(d)2.i.]
- County Tax Collectors (current only) [FS 119.071(4)(d)2.n.]
- Criminal conflict counsel and civil regional counsel [FS 119.071(4)(d)2.l.]
- Dept. of Business Regulation investigators and inspectors [FS 119.071(4)(d)2.m.]
- Dept. of Children and Family investigators [FS 119.071(4)(d)2.a.]
- Dept. of Health investigators of child abuse or neglect [FS 119.071(4)(d)2.a.]
- Dept. of Health personnel involved in eligibility, investigation, prosecution, and inspection [FS 119.071(4)(d)2.o.]
- Dept. of Revenue or local government child support collection/enforcement personnel [FS 119.071(4)(d)2.a.]
- Emergency medical technicians or paramedics [FS 119.071(4)(d)2.q.]
- Employees in an agency's office of inspector general or internal audit department whose duties include auditing or investigating potential criminal or disciplinary activities [FS 119.071(4)(d)2.r.]
- Firefighters [FS 119.071(4)(d)2.d.] Justice or judge [FS 119.071(4)(d)2.e.]
- General or Special Magistrates [FS 119.071(4)(d)2.g.]
- Guardian ad litem [FS 119.071(4)(d)2.j.]
- Impaired practitioner consultants retained by an agency [F.S. 119.071(4)(d)2.p.]
- Judges of Compensation Claims, Administrative Law Judges [FS 119.071(4)(d)2.g.]
- Juvenile probation/detention officers, house parents, therapy providers, counselors and their supervisors [FS. 119.071(4)(d)2.k.]
- Law enforcement officers or civilian staff, correctional and correctional probation officers [FS 119.071(4)(d)2.a.]
- Local Govt. or water mgt. district human resources managers/assistant managers [FS 119.071(4)(d)2.h.]
- Local Govt. or water mgt. district labor or employee relations managers/assistant managers [FS 119.071(4)(d)2.h.]
- Members of U.S. Armed Forces, reserve, or National Guard, who served after 9/11/01 [FS 119.071(5)(k)1.]
- Nonsworn investigative personnel of the Florida Department of Financial Services [FS 119.071(4)(d)2.b.]
- Nonsworn investigative personnel of the Office of Financial Regulation's Bureau of Financial Investigations [F.S. 119.071(4)(d)2.c.]
- Public defenders and assistant public defenders [FS 119.071(4)(d)2.l.]
- State attorney and assistant state attorneys [FS 119.071(4)(d)2.f.]
- Statewide prosecutors and assistant statewide prosecutors [FS 119.071(4)(d)2.f.]
- U.S. attorney or assistant attorney, U.S. appellate judge, U.S. district court judge, U.S. magistrate [FS 119.071(5)(i)1.]
- Victims of domestic violence participating in the Address Confidentiality Program [FS 741.465]
- Victims of violent crime [FS 119.071(2)(h)1]
- Victims of an incident of mass violence [FS 119.071(2)(o)]

Office of Employment: _____

Office Address: _____

Job Title / Position Held: _____

If you are actively employed in this position, provide the following:

Supervisor's Name (Print): _____ Supervisor's Phone: _____

COPY OF DRIVER LICENSE AND WORK ID MUST BE ATTACHED

Notice: I hereby affirm the above information to be true and correct and that I qualify as personnel defined in Chapter 119.071(4) Florida Statutes. I understand that by suppressing information, no data held in the records of the Flagler County Tax Collector regarding my name and address will appear on the Tax Collector's website. The information provided on this request is itself held confidential by the Tax Collector; however, it may be released upon entry of a court order. Upon submittal of this request, I agree to indemnify and hold harmless the Tax Collector 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, seek insurance, or attempt to pull permits for work published in the public records of the Tax Collector. I understand it is my responsibility to retain copies of my tax notices to supply to agents, contractors, or permitting agencies for such purposes. I understand that a separate form will be required of me in order to release information at a future date. The Tax Collector 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. I understand that any recorded document transferring ownership of this property will trigger the removal of this protection. Furthermore, I understand this request does not cover the blocking of my name and address from any documents such as, but not limited to deeds, mortgages, liens, and permits, either recorded in the public records of the Flagler County Clerk's Office or held by any other government agency such as the municipal building departments or Property Appraiser's Office which may be linked via a web link to or from the Tax Collector's website.

I understand if I am a general or special magistrate, judge of compensation claims, administrative law judge of the Division of Administrative Hearings, child support enforcement officer or other who is eligible for this confidentiality only for the duration of employment, it is my responsibility to notify the Tax Collector and submit a Request for Removal of Confidentiality should I no longer qualify under the Florida Statute.

I understand that the normal update cycle of the Tax Collector's website is daily and that during certain times of the year it may be extended due to tax roll production. Therefore, I understand that my information will be updated as timely as possible and feasible by the Tax Collector. I understand it cannot and will not be removed from the site immediately upon submission of this request due to updated cycles.

IF YOU BELIEVE, YOU SHOULD BE PROTECTED BUT ARE NOT COVERED BY FLORIDA STATUTES:

Please know the Tax Collector's office does not determine the classifications of property owners who may qualify for exemption from public records disclosure (protected name and/or address status). Protections provided in statute are created by the Florida Legislature. If you believe an additional classification or position should be protected by statute, contact your local legislator or the Florida Legislature to express your concerns.

IF YOU DO NOT QUALIFY:

If you do not qualify for exemption from public records disclosure, there may be non-statutory options that could help protect your name and/or address; such as, placing title to the property into a Trust of a different name; or, changing your mailing address to a post office box. However, there are important considerations that should be weighed before making any changes to your property ownership. It is recommended that you contact an attorney specializing in the field of estate planning and real estate guidance in determining the best way to accomplish your goals in this regard.

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

1. I am over the age of eighteen (18) and have personal knowledge of the matters contained herein.
2. I am the owner/authorized agent of the following business:

(proof of ownership / authorized agent must be provided)

Located at _____

City _____ State _____ Zip Code _____

Phone Number: _____ E-Mail: _____

3. I request that my property identification and location information appearing in the records of the Flagler County Tax Collector's Office be held in confidence pursuant to F.S. 119.071 and F.S. 493.6122
4. I certify that the above information is true and correct. I am familiar with the nature of an oath and with the penalties provided by Florida for falsely swearing to a document.

Specify the information to be redacted: (select all that apply)

Account Number Physical/Business Address Mailing Address
 Owner/Business Name Property/Business Legal Description FEIN Number
 Parcel ID Number

NOTE: If this request is for multiple properties, each parcel or tangible personal property must be listed.
The Tax Collector is not responsible for blocking information on parcels or accounts not listed.

Tangible Personal Property Tax Account(s) to be coded confidential

(Account Number)

(Account Number)

(Account Number)

Local Business Tax Receipt Account(s) to be coded confidential

(Account Number)

(Account Number)

(Account Number)

Owner's Signature

Owner's Printed Name

State of Florida
County of _____

Sworn to and subscribed before me this _____ day of _____, 20_____.

By _____ who is personally known to me or who has produced
_____ as identification.

Notary Public (Seal)