REQUEST FOR REDACTION OF EXEMPT PERSONAL INFORMATION FROM NON-JUDICIAL PUBLIC RECORDS

	I request to have exempt personal information removed		
	of the Circuit Court an		·
	Current/former government agency employ		
	Spouse of a current/former government age	-	
	Child of a current/former government agence	•	
	Protected individual requesting redaction in	tne	category checked below
	Statutory Basis for Removal- Check the appropriate box	(:	
	Victim of violent crime [FS 119.071(2)(j)1]*Must attach		Juvenile probation/detention officer, house parent,
	official verification of crime*		therapy provider, counselor and their supervisors [FS
	Victim of an incident of mass violence [FS		119.071(4)(d)2.k.]
	119.071(2)(o)]*		Public Defender and APDs [FS 119.071(4)(d)2.l.]
	Law enforcement officers or civilian staff, correctional		Criminal conflict counsel and civil regional counsel [FS
	and correctional probation officers [FS		119.071(4)(d)2.l.]
	119.071(4)(d)2.a.]		Dept of Business Regulation investigators and
	Dept of Children and Family investigator [FS		inspectors [FS 119.071(4)(d)2.m.]
	119.071(4)(d)2.a.]		Tax collectors (current only) [FS 119.071(4)(d)2.n.]
	Dept of Health investigator of child abuse or neglect		Dept of Health personnel involved in eligibility,
	[FS 119.071(4)(d)2.a.]		investigation, prosecution, and inspection [FS
	Dept of Revenue or local government child support		119.071(4)(d)2.o.]
	collection/enforcement personnel [FS		Impaired practitioner consultants retained by an
	119.071(4)(d)2.a.]		agency [F.S. 119.071(4)(d)2.p.]
	Florida Department of Financial Services investigative		0 ,
	personnel [FS 119.071(4)(d)2.b.]		119.071(4)(d)2.q.]
	Office of Financial Regulation's Bureau of Financial		Agency inspector general office or internal audit
	Investigations investigative personnel [F.S.		department employees with auditing or potential
_	119.071(4)(d)2.c.]		criminal investigating or disciplinary duties [FS
	Firefighter [FS 119.071(4)(d)2.d.]	_	119.071(4)(d)2.r.]
	Justice or judge [FS 119.071(4)(d)2.e.]		Addiction treatment facility director, manager,
	State attorney and ASAs [FS 119.071(4)(d)2.f.]		supervisor, nurse, or clinical employee [FS
	Statewide prosecutor and asst. statewide prosecutors	_	119.071(4)(d)2.s.]*
_	[FS 119.071(4)(d)2.f.]		Child advocacy center director, manager, supervisor,
	General or Special Magistrate [FS 119.071(4)(d)2.g]	_	clinical employee of [FS 119.071(4)(d)2.t.]
U	Judge of Compensation Claims, Administrative Law	U	Domestic violence center current or former staff and
_	Judge [FS 119.071(4)(d)2.g]	_	advocates [F.S. 119.071(4)(d)2.u.]
		_	, , , , ,
	Local Govt. or Water Mgt. District Human resources		U.S. Judge or U.S. Magistrate [FS 119.071(5)(i)1.]*
_	manager/assistant manager [FS 119.071(4)(d)2.h.]		Member of US Armed Forces, reserve, or National
	Local Govt. or Water Mgt. District Labor or employee	_	Guard, who served after 9/11/01 [FS 119.071(5)(k)1.]
	relations manager/assistant manager [FS	J	Public guardians and employees with fiduciary
_	119.071(4)(d)2.h.]	***	responsibilities [FS 744.21031]
	Code enforcement officer [FS 119.071(4)(d)2.i.]		ames of spouse/children for marked individuals are
	Guardian ad litem [FS 119.071(4)(d)2.j.]	no	ot exempt

REQUESTOR CONTACT INFORMATION FOR HERNANDO COUNTY

Printed Name:			
Telephone Number:		E-mail addre	ss:
	INFOR	MATION TO BE	REDACTED
property description, neighborh	ood/subdivision name	and/or lot numb	address, parcel ID number, plot/lot ID number, legal per, GPS coordinates, other descriptive property Box addresses are not exempt under Ch. 119.
Home address:			
Date of birth:			
			umber(s), Place(s) of employment (spouse/child), curity Number (Do NOT list the number)
Only the documents identified b	y the requestor will be request. This may incl	e redacted. Once lude; Notice of C	public record, which is a risk undertaken by the requestor. redaction is requested and completed, future redactions ommencements, Satisfactions/Assignments of Mortgage
has my permission to (2019). I understand	ew of the Official Recor modify a copy of the	rds of the Hernar following documed copy will be r	N HERNANDO COUNTY Indo County Clerk of Court, I agree that the Clerk Inents in accordance with Ch. 119.071, Fla. Stat. Inents available to the public, unless otherwise
Instrument Number	Book	Page	Document Title
Documents Other Tha	n Official Record	<u></u>	

RELEASE TO GOVERNMENTAL AGENCIES: An un-redacted version of these documents will be provided to the Hernando County Property Appraiser and Tax Collector to allow them to perform their governmental duties and responsibilities. To redact information held by the Hernando County Property Appraiser or the Tax Collector you must make a written request to those agencies directly under Florida Statue 119.071(4)(d). To redact information held by the Hernando County Property Appraisers Office call (352) 754-4190 or the Tax Collector at (352) 754-4180.

<u>RELEASE FOR TITLE SEARCHES:</u> An un-redacted version of these documents may be provided to title insurers, agents or agencies and attorneys conducting title searches as authorized in Florida Statute 28.2221(6)(b). Notice of any title search release will be sent to the most recent address on the recorded documents on the redaction request provided by the requestor.

RELEASE OF PRIOR REDACTIONS: If you have previously requested protection of a home address in another county in the State of Florida, that is no longer your residence, you are required by Florida law to submit a written, notarized request to release the redacted information and submit that request to that county. Please contact that county for instructions on how to un-redact your information.

DOCUMENTS TO BE REDACTED IN HERNANDO COUNTY (CONT.)

Signature:	Date:		
Job Title of Eligible Government Employee	Employing Agency		
N STATE OF FLORIDA	IOTARY ACKNOWLEDGEMENT		
COUNTY OF			
Sworn to and subscribed before me on by means of □physical presence or □online notarization on (date			
, 20, by	<i>_</i>		
who is personally known, OR who	produced identification,		
Type of identification produced/ID			
[SEAL]	Notary Public, State of Florida		
	{Print, type or stamp commissioned name of Notary}		
	My Commission Expires:		