

REQUEST TO RELEASE CONFIDENTIAL INFORMATION

Complete and submit this form to request a Property Record Card for a property currently held as 'confidential' by the Seminole County Property Appraiser's office. Must be completed by the confidential owner ONLY. Complete all sections.

The document **must be notarized**.

This request is good for a one-time release of information only. Future requests will require a separate form submission.

I, _____, (*print name of confidential owner*) am requesting the release of information contained in the property record card for the following property:

Parcel ID # (17 digits): ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____

Situs Address: _____

I authorize release and/or delivery via email to myself and/or my spouse.

Email: _____

Phone: _____

I authorize release and/or delivery via email to myself the following non-owner/third party.

Name: _____

Email: _____

Phone: _____

I hereby affirm that the above information provided is true and correct to the best of my knowledge.

Signature: _____ Date: _____

STATE OF FLORIDA, COUNTY OF _____ PHYSICAL PRESENCE ONLINE NOTARIZATION

Sworn to (or affirmed) and subscribed before me this ____ day of _____, 20____, by _____

(Notary Seal)

(Signature of Notary)

____ Personally Known ____ OR Produced Identification: _____
(type of identification)

Return this form via email to
confidential@scpafl.org

or mail to
Seminole County Property Appraiser, Attn: CONFIDENTIAL
1101 E. First Street
Sanford, FL 32771