



CREGG E. DALTON CFA
Citrus County Property Appraiser

Valuing the property that you value.

Inverness - Main
210 N Apopka Ave., Suite 200
Inverness, FL 34450
(352) 341-6600
(352) 341-6660/6515 Fax

www.citruspa.org
ccpaweb@citruspa.org

Crystal River - West Side
1540 N Meadowcrest Blvd.
Crystal River, FL 34429
(352) 564-7130
(352) 564-7131 Fax

REQUEST TO RELEASE INFORMATION ON A PROTECTED ADDRESS

A copy of the confidential applicant's Florida Driver License(s) must be attached for identification purposes. Information will not be released without proper identification. This request is good for a one-time release of information only. Future request(s) will require a separate form.

I/We, [print name(s)] _____, request the Property Appraiser's Office release my confidential record information for property I own identified as follows: Alternate Key # _____ or Property Address _____

I authorize release or delivery via email to me or my spouse:

Phone: _____ Email: _____

Or, I authorize release or delivery via email to the following Non-Owner:

Name: _____ Company Name: _____

Phone: _____ Email: _____

Please check the information you wish to have released:

<input type="checkbox"/> Parcel ID Number	<input type="checkbox"/> Legal Property Description	<input type="checkbox"/> Official Record Book and Page
<input type="checkbox"/> Physical/Street Address	<input type="checkbox"/> Neighborhood Name	<input type="checkbox"/> GPS Coordinates
<input type="checkbox"/> Mailing Address	<input type="checkbox"/> Subdivision	<input type="checkbox"/> Other:

All Property Owners that applied for confidential status must sign this form.

Signature: _____ Date: _____

Signature: _____ Date: _____

STATE OF FLORIDA
COUNTY OF CITRUS

Sworn to and subscribed before me by means of physical presence or online notarization this date _____
by _____ (name of person making statement).

Personally Known OR Produced Identification and who did take an oath. Type of Identification Produced:
_____ Online Notary (Check Box if acknowledgment done by Online Notarization)

Notary Signature and Seal

OFFICE USE: PA Representative initials _____. A copy of this Release has been noted in CAMA for internal tracking.