

STATE OF FLORIDA

LEE COUNTY PROPERTY APPRAISER

MATTHEW H. CALDWELL

Mailing Address: P.O. Box 1546 Fort Myers, Florida 33902-1546 **Physical Address:** 2480 Thompson Street Fort Myers, Florida 33901-3074



Telephone: (239) 533-6100 Website: www.leepa.org

AUTHORIZATION FOR THE RELEASE OF PERSONAL INFORMATION EXEMPT FROM PUBLIC DISCLOSURE

Completed forms may be submitted in person, via email to publicdisclosure@leepa.org, faxed to (239) 533-6038, or by US Mail. If you have any questions regarding this form, please call (239) 533-6100.

With this form, I hereby authorize the Lee County Property Appraiser (LCPA) to release certain personal information for my property that is exempt from public records disclosure, to the individual, organization, or agency named below:				
Name of individual, organization or agency to which the disclosure is to be made: (Please Print)				
Please release my information in the following manner: (Select one)				
Mail to:				
Email to:		Fax to:		
This authorization applies to the property listed below. \square Please include my additional properties listed on p.2.				
FolioId / Parcel Number / Account Number:				
Property Site Address:				
Title is held in the following name(s):				
This authorization is specific to the following information: (Check all that apply)				
☐ Owner Name	☐ Folio ID No.	☐ Property Description	☐ Property Record Card	
☐ Mailing Address	☐ Parcel ID No.	☐ Property Dimensions		
☐ Physical/Site Address	☐ GPS Coordinates	☐ Property Size (ac./sf.)	
I, the owner of the property listed above, having qualified for and requested exemption from public records disclosure pursuant to Florida Statutes; do hereby authorize the Lee County Property Appraiser to release the above-specified information from my property record to the individual/entity I have designated on this form.				
Property Owner's Signature:			Date:	
Email Address:		Daytime Phone No.:		
The foregoing was acknowledged before me this		day of	, 20,	
by:		\square Personally known \square Produced Identification		
Printed Name of Property Owner		Type of Identification:		
Printed Name or Stamp of Notary Public (NOTARY SEAL)		Signature of Notary Public		

AUTHORIZATION FOR THE RELEASE OF PERSONAL INFORMATION EXEMPT FROM PUBLIC DISCLOSURE

FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		
FolioId / Parcel Number / Account Number:		
Property Site Address:		
Title is held in the following name(s):		