

**REQUEST TO THE COLLIER COUNTY CLERK OF COURT
TO RELEASE REDACTED INFORMATION ON RECORDED DOCUMENTS
(Request by Protected Party)**

This request is made by

Printed Name: _____

I request that the Collier County Clerk of Court release an unredacted copy of the following redacted, recorded document:

Date of Request: _____ (Month Day, Year)

Official Records Book: _____ Page: _____ Instrument Number: _____

Describe the lawful purpose for the search: Property transaction Employment verification
 Proof of ownership or residency Explain other: _____

Identify the individual or property that is the subject of the search: _____

Identify the information that is to be released (name, address, place of employment):

A copy of the redacted document is attached to this request.

Signature

STATE OF FLORIDA
COUNTY OF COLLIER

Signed on _____ (Month Day, Year)

Sworn to (or affirmed) and subscribed before me by means of physical presence or
 online notarization on _____ (Month Day, Year) by

(affiant name) _____.

NOTARY PUBLIC

{Print, type, or stamp commissioned name of notary}

____ Personally known, OR
____ Produced identification
Type of identification produced/ID#

Internal Use Only:
Received on: _____ by: _____
Processed on: _____ by: _____
Checked on: _____ by: _____