LOCAL GOVERNMENT LETTERHEAD	
REQUEST FOR REMOVAL OF PERSONALLY IDENTIFIABLE INFORMAT FROM ALL ONLINE, PUBLICLY ACCESSIBLE PROPERTY RECORDS	
In accordance with O.C.G.A. § 50-18-78, I hereby request that my Personally Identifiable removed, redacted, or otherwise concealed from all property records that are publicly acc any [NAME OF LOCAL GOV'T] website.	
By checking this box, I certify that I am a Law Enforcement Officer, defined by law as a sheriff, police officer, peace officer, officer or member of the Department of Public S officer/official with power of arrest and responsibility for enforcing the criminal laws government, the State of Georgia, or any of the State's municipalities, counties, or subdivisions. I understand that my status as a Law Enforcement Officer may be verified the verification process, I certify that the following information is correct:	afety, or other of the federal other political
My Employing Agency My Rank/Position My Badge/Employing My Employing Agency My Rank/Position My Badge/Employing	yee ID No.
By checking this box, I represent that I am married, that this request also applies to Personally Identifiable Information, and that my spouse's full name [*] is:	• •
 By checking this box, I acknowledge: That the Personally Identifiable Information covered by this request is limited to my (and, if applicable, my spouse's) residential address and telephone number(s). That my (and, if applicable, my spouse's) Personally Identifiable Information may become publicly accessible again on property records maintained by the [NAME OF LOCAL GOV'T] if there is a change in ownership, mortgage, or deed to the property and that, in such case, I must complete and submit a new request for removal of said information. That this request applies only to property records maintained by the [NAME OF LOCAL GOV'T], that my (and, if applicable, my spouse's) Personally Identifiable Information may also be contained in property records that are publicly accessible through websites maintained by other municipalities and/or counties, and that I must contact each such municipality or county to obtain and complete its form to request removal of such information. Optional: Set forth below is a list of addresses and/or Parcel ID numbers from which I am requesting to have my (and, if applicable, my spouse's) Personal Identifiable Information removed:	
Print Full Name [*] : Date:	
Signature:	reated.