

AFFIDAVIT OF CONFIDENTIALITY

BEFORE ME, the undersigned authority, personally appeared on the date set forth below, who, first being duly sworn, deposes and says under penalties of perjury:

1. I am an individual covered under Sections 119.071 or 741.465, Florida Statutes.
2. I request to have exempt personal information redacted from public records maintained by the
 - ☐ Martin County Property Appraiser
 - ☐ Martin County Sheriff
 - ☐ Martin County Supervisor of Elections
 - ☐ Martin County Board of County Commissioners
3. The information listed below is to be redacted in accordance with the attached Status and Classification Form:

Requestor's Name: _____ Email Address: _____

Home Address (including city, state and zip code):

Check all the apply:

- ☐ I own property in Martin County
- ☐ My spouse owns property in Martin County (if yes and you are not a co-owner of the property, spouse needs to complete an Affidavit of Confidentiality)
- ☐ I live in Martin County, but I rent or lease

I own the real property identified by the following property address, account number(s) or parcel ID numbers (information may be located on the Property Appraiser's website www.pa.martin.fl.us or on your tax bill):

Telephone number: _____ Mobile Number: _____

Spouse's Name: _____ Mobile Number: _____

E-mail address: _____ Work Number: _____

Spouse's Place of Employment (include address): _____

Name(s) of Minor Child(ren)(adult children may submit their own affidavit): _____

Child(ren)'s Mobile Number(s): _____

Address of Child(ren) (if different from above): _____

Name and location of Child(ren)'s School/Daycare: _____

Child(ren)'s Place of Employment (including location): _____

*If more space is needed for additional children, please list and submit information on a separate page.

Personal Assets (crime victim): _____

4. I hereby verify the above information to be true and correct and that I qualify as personnel defined in Chapter 119.071 or 741.465, Florida Statutes as indicated on the attached Status and Classification Form.
5. I am familiar with the nature of an oath and with the penalties provided by the State of Florida for falsely swearing to a document.
6. I understand that by suppressing information, no data regarding my parcel will appear on the Website for any of the entities selected above.
7. I understand that should I need to have records unredacted, I should make the request.
8. I agree to indemnify and hold harmless the Martin County Property Appraiser, Martin County Sheriff, Martin County Supervisor of Elections, City of Stuart, Town of Ocean Breeze, and Martin County and the staff of each for any direct or indirect claims for damages that arise in connection with this request for confidentiality.
9. I agree to personally identify those documents of record pertaining to me upon request.
10. I acknowledge that if photographs are eligible for and requested to be maintained as exempt, comparable photos are attached to this Affidavit.
11. I acknowledge that if I am requesting information be protected by the Martin County Clerk of the Circuit Court and Comptroller, that the attached Documents to be Redacted Form must be completed and returned to that office.

NOTE:

- **If you relocate or acquire additional property or if there is any change in the information provided in this form or in your exempt status, you must submit another Affidavit for Confidentiality.**
- **If you live in another County, you will need to claim the exemption within that County.**

Signature

Printed name

STATE OF _____

COUNTY OF _____

Sworn to and subscribed to me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____, by _____, who _____ is personally known to me, or _____ produced identification in the form of _____.

[SEAL]

Notary Signature

[REGARDING THIS FORM]

If you have any questions, please contact one of the offices, using the information provided below.

Please return this Affidavit with attached Status and Classification Form to any of the offices at the addresses below or to [PRR All Exempt@martin.fl.us](mailto:PRR_All_Exempt@martin.fl.us).

Martin County Property Appraiser

Attn: Ownership

3473 SE Willoughby Blvd, Suite 101, Stuart FL 34994

confidentialrequests@pa.martin.fl.us 772-288-5608

Martin County Sheriff

Attn: Records Unit

800 SE Monterey Rd, Stuart, FL 34994

[Rec Exempt@sheriff.martin.fl.us](mailto:Rec_Exempt@sheriff.martin.fl.us) 772-220-7057

Martin County Supervisor of Elections

Attn: Debbie Dent

135 SE Martin Luther King Blvd, Stuart, FL 34994

elections@martinvotes.com 772-288-5637

Martin County Board of County Commissioners

Attn: Public Records Liaison

2401 SE Monterey Rd, Stuart, FL 34996

[Public Records@martin.fl.us](mailto:Public_Records@martin.fl.us) 772-288-5685

STATUS AND CLASSIFICATION FORM

I am an individual covered under §119.071(2)(j)1, F.S., §119.071(4), F.S., or §741.465, F.S. as (select one):

- ☐ Current/former government agency employee in the category checked below
- ☐ Spouse of a current/former government agency employee in the category checked below
- ☐ Child of a current/former government agency employee in the category checked below
- ☐ Victim of a Violent Crime* or Victim of Domestic Violence* (as outlined in §119.071(2)(j)1, F.S.)
- ☐ Participant in Address Confidentiality Program for Victims of Domestic Violence (as outlined in §741.465, F.S.)

**Must provide official verification that an applicable crime has occurred; information becomes public 5 years after request is made*

Check the appropriate item below:

- | | |
|--|--------------------------|
| <input type="checkbox"/> Law Enforcement (Current or former, sworn or civilian employee) | §119.071(4)(d)2.a., F.S. |
| <input type="checkbox"/> Correctional & Correctional Probation Officers (Current or former) | §119.071(4)(d)2.a., F.S. |
| <input type="checkbox"/> Dept. of Children and Family Services Investigative Personnel (Current or former) | §119.071(4)(d)2.a., F.S. |
| <input type="checkbox"/> Dept. of Health Investigators who support the investigation of child abuse or Neglect (Current or former) | §119.071(4)(d)2.a., F.S. |
| <input type="checkbox"/> Department of Revenue or Local Government Child Support Collection/ Enforcement Personnel (Current or former) | §119.071(4)(d)2.a., F.S. |
| <input type="checkbox"/> Florida Department of Financial Services Investigative Personnel (Current or former) | §119.071(4)(d)2.b., F.S. |
| <input type="checkbox"/> Office of Financial Regulation's Bureau of Financial Investigations nonsworn personnel (Current or former) | §119.071(4)(d)2.c., F.S. |
| <input type="checkbox"/> Firefighters (Active certification required in compliance with §633.408 F.S.) | §119.071(4)(d)2.d., F.S. |
| <input type="checkbox"/> Justice or Judge- Circuit/County/Appeals (Current or former) | §119.071(4)(d)2.e., F.S. |
| <input type="checkbox"/> State Attorney, Asst. State Attorney, Statewide Prosecutor, Asst. Statewide Prosecutor (Current or former) | §119.071(4)(d)2.f., F.S. |
| <input type="checkbox"/> General or Special Magistrates, child support enforcement hearing officer, judge of compensation claims, or judge of the Division of Administrative Hearings (Current only) | §119.071(4)(d)2.g., F.S. |
| <input type="checkbox"/> Human Resource, Labor or Employee Relations, director, manager, asst. director, or asst. manager of local government agency or water management district (Current or former) | §119.071(4)(d)2.h., F.S. |
| <input type="checkbox"/> U.S. Attorney/U.S. Magistrate/U.S. District Judge (Current or former) | §119.071(5)(i), F.S. |
| <input type="checkbox"/> Code Enforcement Officer (Current or former) | §119.071(4)(d)2.i., F.S. |
| <input type="checkbox"/> Guardian Ad Litem (Current or former) | §119.071(4)(d)2.j., F.S. |
| <input type="checkbox"/> Juvenile Officer or Juvenile Supervisor (Current or former) | §119.071(4)(d)2.k., F.S. |
| <input type="checkbox"/> Public Defender or Asst. Public Defender (Current or former) | §119.071(4)(d)2.l., F.S. |
| <input type="checkbox"/> Department of Business and Professional Regulations Investigator (Current or former) | §119.071(4)(d)2.m., F.S. |
| <input type="checkbox"/> County Tax Collector (Current only) | §119.071(4)(d)2.n., F.S. |
| <input type="checkbox"/> Department of Health Investigators or Inspectors whose duties do not involve the investigation of child abuse or neglect (Current or former) | §119.071(4)(d)2.o., F.S. |
| <input type="checkbox"/> Impaired Practitioner Consultants who are retained by an agency whose duties result in a determination of a person's skill and safety to practice licensed profession. (Current or former) | §119.071(4)(d)2.p., F.S. |
| <input type="checkbox"/> Emergency Medical Technicians or Paramedics (Certified under Chapter 401) (Current and former) | §119.071(4)(d)2.q., F.S. |
| <input type="checkbox"/> Employees in an agency's Office of Inspector General or Internal Audit Department whose duties include auditing or investigating potential criminal or disciplinary activities. (Current or former) | §119.071(4)(d)2.r., F.S. |
| <input type="checkbox"/> Addiction treatment facility directors, managers, supervisors, nurses, and clinical employees. (Current or former) | §119.071(4)(d)2.s., F.S. |
| <input type="checkbox"/> Directors, managers, supervisors, and clinical employees of a child advocacy center that meets the standards of s. 39.3035(2) & (3) and the members of a child protection team as described in s. 39.303. (Current or former) | §119.071(4)(d)2.t., F.S. |
| <input type="checkbox"/> Staff and domestic violence advocates (defined in s. 90.5036(1)(b)) of domestic violence centers certified by the Department of Children and Families under Chapter 39 (Current or Former) | §119.071(4)(d)2.u., F.S. |