



DOUGLAS COUNTY BOARD OF ASSESSORS

Location:

6200 Fairburn Road
Douglasville, GA 30134

APPRAISAL DEPARTMENT

Telephone: (770) 920-7228

Mailing Address:

8700 Hospital Drive
Douglasville, GA 30134

LAW ENFORCEMENT OFFICER REQUEST FOR REMOVAL OF PERSONALLY IDENTIFIABLE INFORMATION FROM WEBSITE PROPERTY RECORDS

DOUGLAS COUNTY

As authorized by state law (O.C.G.A. § 50 -18-78), a law enforcement officer may request that a local government remove the personally identifiable information of such law enforcement officer from all property records that are publicly available on any internet website of a local government. This request form applies to property records maintained on any internet website of Douglas County. The personally identifiable information of such law enforcement officer shall be removed within 30 days of the date this form is received by Douglas County..

"Personally identifiable information" means the residential address and/or phone number of the law enforcement officer and his/her spouse, if applicable.

Printed Name of Law Enforcement Officer"

Printed Name(s) as Property Owner(s) of Record: _____

Physical Residential Address: _____

Map/Parcel Number of Above Address (*if known*): _____

Phone _____ Contact Email _____

Current Law Enforcement Agency Employer and Location _____

Title/Rank _____ Badge # _____

Additional Residential Properties requested to be removed: (must also meet state law requirements)

<u>Owner of Record</u>	<u>Physical Location Address</u>	<u>Map-Parcel #</u>	<u>Approved</u>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

NOTE: VERIFICATION OF EMPLOYMENT BY THE LAW ENFORCEMENT AGENCY IS REQUIRED.

Accepted Methods: Verification on Letterhead from Agency Director/Head; Supervisor

By signing this request form, I certify that, to the best of my knowledge, all of the information contained herein is true and correct.

Signature of Law Enforcement Officer

Date