



TARA S. GREEN, CLAY COUNTY CLERK OF COURT AND COMPTROLLER

825 N Orange Ave, PO Box 698, Green Cove Springs, FL 32043 / (904) 269-6302 / info@clayclerk.com / clayclerk.com

**Request to the Clerk of the Circuit Court & Comptroller, Clay County,
Florida, to Release Redacted Information on Recorded Documents for
Purposes of Conducting a Title Search**

The requester is:

<input type="checkbox"/> Title Insurer <input type="checkbox"/> Title Insurance Agent <input type="checkbox"/> Title Insurance Agency	Requestor's Florida Company Code or License Number: _____ ____ Requestor attests that requestor is authorized to transact (Initial) business in Florida.
<input type="checkbox"/> Attorney	Requestor's Florida Bar Number: _____ ____ Requestor attests that requestor has an agency agreement with (Initial) a title insurer, directly or through his or her law firm.

Identify the Property that is the subject of the search: _____

Describe the lawful purpose for the search: _____

Document Title: _____

Official Records Book: _____ Page: _____ Instrument number: _____

The requestor's photo ID must be presented or a copy provided with this request.

By signing below, I certify that I am authorized to access the referenced exempt information pursuant to Fla. Stat. § 28.2221(6)(a) for an authorized purpose of conducting a title search, as defined in Fla. Stat. § 627.7711(4), of the Official Records, as described in Fla. Stat. § 28.222(2), and I acknowledge that making a false attestation will subject me to the penalty of perjury under Fla. Stat. § 837.012. I hereby request that the clerk release a copy of the unredacted referenced document to me.

Signature

Date

Printed name

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, _____ by: _____

_____ Personally known to me, or _____ produced _____ as identification.

Notary Public or Deputy Clerk

Print, type, or stamp name of Notary or Deputy Clerk

The above affidavit will be mailed to each affected party and will be recorded in the Official Records of the county, along with a certificate of mailing, per Fla. Stat. § 28.2221. The requestor must pay the statutory service charge of \$ _____ prior to the document being released.