

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

## TURNER 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 TURNER **COUNTY**. The personally identifiable information of such law enforcement officer shall be removed within 30 days of the date this form is received by TURNER **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 # \_\_\_\_\_  
(VERIFICATION REQUIRED – SEE BELOW)

**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