



**HIGHLANDS COUNTY  
CLERK OF COURTS  
ROBERT W. GERMAINE**

**REQUEST FORM FOR INTERNET IMAGE REMOVAL**

(Pursuant to CS/HB 1679)

**Date:**

Name of Requestor:

Phone Number: (Optional)

**Address for Notification Purposes Only**

Name:

Street:

City, State, Zip

*For Blocking Official Records Images*

Instrument Number/Book and Page Number/Document Type to be removed:

**FAILURE TO PROVIDE COMPLETE AND ACCURATE INFORMATION MAY RESULT IN AN INABILITY TO PROCESS THIS REQUEST.**

DISCLAIMER: Be advised your request is not retrospective; copies of the Public Record may have been disseminated prior to your request. It is the responsibility of the requestor to notify the Office of the Clerk of the Circuit Court and of any additional documents the requestor desires exempt status.

Requestor's Signature

*For Office Use Only:*

Date Request Received: \_\_\_\_\_

Date Request Completed: \_\_\_\_\_

O R Image Removed by: \_\_\_\_\_

Recording From/SS Number 9/19/2002