

REQUEST TO RELEASE THE EXEMPT STATUS OF HOME ADDRESS
s. 119.071(4)(d)8, F.S.

STATE OF FLORIDA
COUNTY OF WALTON

Before me, the undersigned authority, personally appeared _____
(Affiant), who swore or affirmed that:

1. Affiant is a protected party and authorized to submit this request by affidavit.
2. Affiant has conveyed real property that was my dwelling location.
3. Affiant requests the release of the exempt status for this dwelling location since the conveyance of the real property has removed the exempt status as my home address.
4. Affiant confirms that the request for release is pursuant to the conveyance of my dwelling location.
5. Affiant provides the location of the former dwelling location to be located in the Official Records at:

Book Number: _____

Page Number: _____

OR

Instrument Number: _____

OR

Clerk's File Number: _____

Signature of Affiant

STATE OF FLORIDA
COUNTY OF WALTON

Sworn to (or affirmed) and signed before me by means of physical presence or online notarization,
this ____ day of _____, 20__, by _____.

Personally Known to me or who has produced _____ as identification.

(SEAL)

Signature of Notary Public

Print, Type, or Stamp Name of Notary Public