

PAULDING COUNTY BOARD OF TAX ASSESSORS

APPLICATION FOR REDACTION OF PERSONAL INFORMATION

The undersigned public employee, hereby requests the Paulding County Board of Tax Assessors ("BOA") redact from public records, any such records that reveal personal information pursuant to O.C.G.A. § 50-18-72(a)(21) and §50-18-78, I hereby certify under oath and penalty of perjury, I am a "public employee" or "Law enforcement officer" as defined in the aforementioned statutes, I am an officer, employee or former employee of: *(Check all that apply)*

- ☐ (1) The State of Georgia or its agencies, departments or commissions;
- ☐ (2) Any county or municipality or its agencies, departments or commissions;
- ☐ (3) Other political subdivision of the State of Georgia;
- ☐ (4) Teacher in a public, charter, or non-public school;
- ☐ (5) An early care and education program administered through the Department of Early Care and Learning.
- ☐ (6) The federal government or its agencies, departments, or commissions.
- ☐ (7) Law enforcement officer or official who has the power of arrest and who is responsible for enforcing the criminal laws of the federal government or the state or political subdivisions.

The following is a list of my property account(s) which are requested to redact personal information:

(For every ad valorem tax bill you receive from Paulding County, please list the parcel ID number, Account Number, or other identifying account number of each item of real or personal property.)

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

I hereby certify under oath and under penalty of perjury that I am qualified as a "public employee" pursuant to O.C.G.A. § 50-18-72(a)(21) and §50-18-78, I hereby certify under oath and penalty of perjury, I am a "public employee" or "Law enforcement officer" entitled to receive the redaction requested herein. I further agree to immediately notify the BOA of any change in my status which would disqualify me from receiving the redaction set forth herein. I acknowledge and agree that my failure to provide the BOA with all information requested in this application, or to notify the BOA of any change in my qualification status, will be grounds for the BOA to remove the redaction otherwise requested or granted herein.

Property Owner's Name: _____

Email Address: _____

Phone Number: _____

Sworn to and subscribed before me
this ____ day of _____, _____.

Property Owner's signature

NOTARY PUBLIC
My commission expires: