

## STATE OF FLORIDA LEE COUNTY PROPERTY APPRAISER

MATTHEW H. CALDWELL



P.O. Box 1546 Fort Myers, Florida 33902-1546 **Telephone:** (239) 533-6100 **Website:** www.leepa.org

## AUTHORIZATION TO RELEASE CONFIDENTIAL TAXPAYER INFORMATION

The undersigned, on behalf of	("Taxpayer"),
expressly authorizes the Lee County Prop	erty Appraiser to permit
	, to receive, inspect and copy all of Taxpayer's
records in the possession of the Lee Coun	ty Property Appraiser, including information deemed
confidential by Florida Statutes. Taxpay	yer acknowledges and understands Florida Statutes
make certain taxpayer information confidence	ential for the benefit of Taxpayer and will hold
-	Property Appraiser from any and all claims due to the
	ation pursuant to this authorization. The undersigned
	of Taxpayer to sign this authorization and intends for
the Lee County Property Appraiser to rely	upon this representation.
Name of Taxpayer:	
Address of Taxpayer:	
Telephone number of Taxpayer:	
Account number(s):	
Taxpayer's Signature	Taxpayer's Printed Name
Title	Date (Valid for 1 year after date signed)
The foregoing instrument was acknowled	ged before me this day of, 20,
by, who	o holds the office of (title),
who is $\square$ Personally Known to me OR	☐ Produced Identification.
Type of identification Produced:	
Signature of Notary Public	Printed Name or Stamp of Notary Public
State of: County of:	
My Commission Expires:	