Pursuant to Section 119.071(4)(d)3., Florida Statutes, I hereby request all information specified in Section 119.071(4)(d)2., and pertaining to me, found in the Utilities Commission, City of New Smyrna Beach’s Official Records be maintained as exempt. In making this request, I attest that I am an individual listed in Section 119.071(4)(d)3. entitled to make such request. Specifically, I am a:

- Sworn or Civilian law enforcement personnel [§119.071(4)(d)2.a.] Names of spouses/children exempt
- Investigator with the Department of Children and Families [§119.071(4)(d)2.a.]
- Investigation support personnel with the Department of Health [§119.071(4)(d)2.a.]
- Revenue collection and enforcement or child support enforcement personnel of Department of Revenue or local governments [§119.071(4)(d)2.a.]
- Firefighter certified in compliance with s. 633.408 [§119.071(4)(d)2.b.] Only currently certified are eligible
- Judge or Justice [§119.071(4)(d)2.c.]
- State attorney, assistant state attorney, statewide prosecutor, or assistant statewide prosecutor [§119.071(4)(d)2.d.] Names of spouses/children are exempt.
- General magistrate, special magistrate, judge of compensation claims, administrative law judge of the Division of Administrative Hearings, or child support hearing officer [§119.071(4)(d)2.e.] Only current are eligible
- Human resource, labor relation, or employee relations director, assistant director, manager, or assistant manager of any local government agency or water management district whose duties include hiring and firing employees, labor contract negotiation, administration, or other personnel-related duties [§119.071(4)(d)2.f]
- Code enforcement officer [§119.071(4)(d)2.g.]
- Guardian ad litem as defined in s. 39.820 [§119.071(4)(d)2.h.]
- Juvenile probation officer, juvenile probation supervisor, detention superintendent, assistant detention superintendent, juvenile justice detention officer I or II, juvenile justice detention officer supervisor, juvenile justice residential officer, juvenile residential officer supervisor I or II, juvenile justice counselor, juvenile justice counselor supervisor, human services counselor administrator, senior human services counselor administrator, rehabilitation therapist, or social services counselor of the Department of Juvenile Justice [§119.071(4)(d)2.i.]
- Public defender, assistant public defender, criminal conflict or civil regional counsel, or assistant criminal conflict or civil regional counsel [§119.071(4)(d)2.j.]
- Investigator or inspector of the Department of Business and Professional Regulation [§119.071(4)(d)2.k.]
- County tax collector [§119.071(4)(d)2.l.] Only current are eligible
Personnel of the Department of Health whose duties include, or result in, the determination or adjudication of eligibility for social security disability benefits, the investigation or prosecution of complaints filed against health care practitioners, or the inspection of health care practitioners or health care facilities licensed by the Department of Health [§119.071(4)(d)2.m.]

United States attorney or assistant United States attorney, judge of the United States Courts of Appeal, United States district judge, or United States magistrate [§119.071(5)(i)1.]

United States Armed Forces service-member who served after September 11, 2001. [§119.071(5)(k)1]

Name: __________________________________________________

Service Address: ____________________________________________________________________

Account Number: __________________________

Contact Telephone Number: ______________________________

The information provided on this request for exemption is itself to be exempt. The information may only be used by the Utilities Commission in order to process my request for exemption or may be released upon entry of an order from a court of competent jurisdiction.

I agree to indemnify and hold harmless the Utilities Commission and its employees for actions or damages that may be the direct or indirect result of my request for exemption and the fulfillment or lack of fulfillment of that request.

Signature: ____________________________________________

Date: ____________________________________________