

**REQUEST FOR REMOVAL OF HOME ADDRESS/HOME OWNERSHIP FROM PUBLIC ACCESS
PURSUANT TO K.S.A. 2012 Supp. 45-221 (a)(51) and (52)**

NAME: _____
(Please Print Legibly)

POSITION: _____

TO ATCHISON COUNTY: I request the removal from public access of your records which identify my home address or home ownership.

I acknowledge and understand that if my home address or home ownership changes after the date of this request, it is my responsibility to resubmit this request in writing to the custodian of such public records. I understand I surrender access to view or pay taxes for my property online. I understand that information about property records has been public up to this time, and Atchison County is not responsible for public information that has been made available in the past. I understand that information about my family or spouse that may jointly own property and/or reside at my residence is not protected and is publicly available in some sites. I understand that signing this release means that I cannot vote at my polling place and that I must vote as a secured voter at the County Clerk's office. I understand that the removal of my address and/or property records may cloud the title on my property and make it more difficult to refinance and/or sell, improve, insure or appraise. I understand that removal of my address and/or property records may impact routine background checks and financial history searches, which would possibly impact my credit rating and other financial transactions. I understand that I may not be notified of changes in my area or neighborhood related to property planning and zoning changes or property ownership notification process and procedures. I understand that this removal does not relate to governmental records of other governmental entities and I need to notify other governmental entities to remove my home address or ownership from their records.

I CERTIFY THAT I AM A:

____ Law Enforcement Officer as defined by K.S.A. 2011 Supp. 21-5111, and amendments thereto

____ Parole Officer

____ Probation Officer

____ Court Services Officer

____ Community Correctional Services Officer

____ Federal Judge

____ Justice of the Supreme Court

____ Judge of the Court of Appeals

____ District Court Judge

____ District Magistrate Judge

____ U.S. Attorney or Assistant U.S. Attorney for the District of Kansas

____ Attorney General or Assistant Attorney General for Kansas

____ District Attorney or Assistant District Attorney

____ County Attorney or Assistant County Attorney

SIGNATURE OF REQUESTOR

DATE

HOME ADDRESS/CITY/ZIP

DAYTIME PHONE NUMBER

CHAPTER 147
Substitute for HOUSE BILL No. 2427

(51) Records of a public agency which identify the home address or home ownership of a law enforcement officer as defined in K.S.A. 2011 Supp. 21-5111, and amendments thereto, parole officer, probation officer, court services officer or community correctional services officer. The agency head of such law enforcement office, parole office, probation office, court services office or community correctional services office or such individual officer shall file with the custodian of such record a request to have such officer's identifying information removed from public access. Within seven days of receipt of such requests, the public agency shall remove such officer's identifying information from such public access.

(52) Records of a public agency which identify the home address or home ownership of a federal judge, a justice of the supreme court, a judge of the court of appeals, a district judge, a district magistrate judge, the United States attorney for the district of Kansas, an assistant United States attorney, the attorney general, an assistant attorney general, a district attorney or county attorney or an assistant district attorney or assistant county attorney. Such person or such person's employer shall file with the custodian of such record a request to have such person's identifying information removed from public access. Within seven days of receipt of such requests the public agency shall remove such person's identifying information from such public access.

OFFICE USE ONLY					
	Date	Initials		Date	Initials
ADMIN	_____	_____	GIS	_____	_____
APPRAISER	_____	_____	IT	_____	_____
CLERK	_____	_____	P & Z	_____	_____
DEEDS	_____	_____	TREASURER	_____	_____
D.COURT	_____	_____	VEHICLE REG	_____	_____
NOTES					

