Baldwin County Non - Disclosure Request

1601 N. Columbia Street Suite 120

Milledgeville, GA 31061

478-445-5300

Name(s) on Property:		
Property Address:		
City:	State:	Zip Code:
Phone Number: ()	Map a	and Parcel Number(s):
72(a)(21)& (b) and 50-18 owned by me removed fi	perty Address: State: Zip Code: one Number: () Map and Parcel Number(s): ye, are requesting the Non-Disclosure Status in accordance to Georgia Code 50-18-a)(21)& (b) and 50-18-78 which will have any information regarding properties need by me removed from the Qpublic.net website given my position with Date:	
Signature:		Date:
**All Non-Disclosure req	uests need to be sub	mitted with a copy of a valid departmen
badge for verification OR	letterhead with gove	ernment office(employer) with owner
requesting non-disclosur	e. **	
**A notarized letter with	the owner(s) signatu	ure(s) or by owner in person with
identification MUST be so	upplied for information	on to be released for any purpose by ON
the owner(s) of the prop	erty**	
FOR OFFICIAL USE ONLY		
Date Received:	Received by	v: