



**Suzanne W. Lowder**  
**Stanly County Register of Deeds**

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Phone: 704-984-3640 Fax: 704-986-3849  
www.stanlyrod.net

201 S. SECOND STREET  
ALBEMARLE NC 28001

**Public Records Redaction Request**

G.S. 132-1.10 (f)  
(Effective December 1, 2005)

I \_\_\_\_\_ (name of requestor), on \_\_\_\_\_  
(month, day, year), hereby request that the Register of Deeds of Stanly County, NC remove  
the following information from the Register of Deeds website:

CHECK ALL ITEMS THAT APPLY	PERSONAL INFORMATION TO BE REDACTED
<input type="checkbox"/> SOCIAL SECURITY NUMBER	<input type="checkbox"/> CHECKING ACCOUNT NUMBER
<input type="checkbox"/> EMPLOYER TAX IDENTIFICATION NUMBER	<input type="checkbox"/> SAVINGS ACCOUNT NUMBER
<input type="checkbox"/> DRIVER'S LICENSE NUMBER	<input type="checkbox"/> CREDIT CARD NUMBER
<input type="checkbox"/> STATE IDENTIFICATION NUMBER	<input type="checkbox"/> DEBIT CARD
<input type="checkbox"/> PASSPORT NUMBER	<input type="checkbox"/> PERSONAL IDENTIFICATION (PIN) CODE
<input type="checkbox"/> PASSWORD	

**Requestor must specify the exact location in the document where the information is contained:**

DOCUMENT TYPE: \_\_\_\_\_  
BOOK #: \_\_\_\_\_  
PAGE #: \_\_\_\_\_

SIGNED BY REQUESTOR: \_\_\_\_\_  
PRINTED NAME OF REQUESTOR: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_

**\*Any person who requests a redaction without proper authority to do so shall be guilty of an infraction,  
punishable by a fine not to exceed \$500 for each violation.**

**All forms may be submitted to the Register of Deeds by mail, fax or in person. If you have any questions,  
please call our office, 704-986-3640 or visit, www.stanlyrod.net**