

REQUEST FOR UN-REDACTED COPY

Application

(See Utah Code Annotated 17-21-12.5, effective 3 May 2023)

Protected Owner(s) Printed Name: (Las	st)	(First)		
Parcel #:	Phone #:	ne #:		
Mailing Address:	City:	State:	Zip:	
I have authorized this personto access my redacted documents.	Cc	ompany Name		
I certify to the Office of Morgan County access to an un-redacted copy of the rec			in UCA 17-21-12.5(5) (a) for	
I agree to the terms and conditions as or State of Utah that all the foregoing is tru	•		ary under the laws of the	
Requester's Signature	done this _	day of	, in the year 20	
NOTARY SIGNATURE AND SEAL	My Commissi	•		
This portion will be filled out by the Mo	organ County Recorder's C	Office:		
Document No, in book as a (Document Title):		ages(s) which	ch document is identified	
As the requester, I certify that I am unde	er UCA 17-21-12.5(5) (a):			
(i)The individual whose per [or]	rsonal information was re	dacted on the original	ly recorded instrument;	
(ii)If the instrument is a true	st deed, a beneficiary of th	he trust deed; [or]		
(iii)Acting on behalf of a title subdivision of the state; [or]	e company that has a valid	d business license issue	ed by the state or a political	
	An attorney that has a valid license from the Utah State Bar			