AGENCY SUPPLEMENTAL REQUEST FORM

- This form should not be used to request online access to electronic court records. To view records electronically, please complete the Registered User Agreement to View Records Online.
- This form should only be completed by an agency head requesting to update gatekeeper and/or agency information.
- The agency head completing this form should be the same person who completed the Agency Registration Agreement to View Records Online. If the agency head has changed, please complete a new Agency Registration Agreement.
- Please allow at least two business days for processing your completed agreements after they have been submitted back to us.

AGENCY SUPPLEMENTAL REQUEST FORM VOLUSIA COUNTY CLERK OF COURT

This Request is for 1. □ Updating Agency's Contact Information:
*Agency/Company Name:
*Agency Head Name:
*Agency Head Title:
*Agency Head E-mail Address:
*Agency Address:
*City/State/Zip:
*Agency Head Phone: *Required if updating contact information
*Required if updating contact information
2. Appointing an additional Agency Gatekeeper:
*Gatekeeper Name:
*Gatekeeper E-mail Address:
*Gatekeeper Address:
*City/State/Zip:
*Gatekeeper Phone: *Required if appointing new gatekeeper
*Required if appointing new gatekeeper
3. □ Removing an Agency Gatekeeper:
*Gatekeeper Name: *Required if removing an existing gatekeeper
requires in removing an existing gatericoper

The undersigned affirms the contact and other information on this Agency Supplemental Request Form is correct and upon submission to the Clerk is incorporated in the original Agency Registration Agreement to View Records Online Agreement.

Date:				
Age	ency Head	d Signatur	re	

Completed form can be emailed to:

webagreements@clerk.org
or mailed to:
Clerk of Court- Information Technology
PO BOX 6043
DeLand, FL 32721-6043