

NAME OF AGENCY

2900 Apalachee Parkway Tallahassee, Florida 32399-0500 www.flhsmv.gov

ANNUAL CERTIFICATION STATEMENT

In accordance with Section VI., Part D, of the Memorandum of Ur Highway Safety and Motor Vehicles (Providing Agency) and City of City	
(Requesting Party) hereby Affirms that the Requesting Party has e to protect the personal data from unauthorized access, distribution,	valuated and have adequate controls in place, use and modification or disclosure and is in
full compliance as required in the contractual agreement	(contract number).
Signature	
Printed Name	
CHIEF OF POLICE	
<u> </u>	
NORTH PORT POLICE DEPARTMENT	