

# GATEKEEPER MANAGEMENT REQUEST FORM OKALOOSA COUNTY CLERK OF COURT

Date: \_\_\_\_\_ Agency/Firm/Company Name: \_\_\_\_\_

Full Name of Person making Request: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

- |   |                |                 |                           |
|---|----------------|-----------------|---------------------------|
| 1 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 2 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 3 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 4 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 5 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 6 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |
| 7 | Edit<br>Remove | Name:<br>Email: | Login:<br>Effective Date: |

Additional Instructions :

Case Information to be Provided :

Comments:

Security Breach Report

For security breaches call 850-651-7200, ext. 3308 in addition to emailing this form to [onlineaccess@okaloosaclerk.com](mailto:onlineaccess@okaloosaclerk.com)

Gatekeeper Management Request Form