

IN THE COUNTY/CIRCUIT COURT OF THE NINETEENTH JUDICIAL
CIRCUIT IN AND FOR INDIAN RIVER COUNTY, FLORIDA

Plaintiff/ Petitioner/State
v.

CASE NO: _____
DIVISION: _____

Defendant/ Respondent

**REQUEST TO BE EXCUSED FROM E-MAIL SERVICE FOR PARTY
NOT REPRESENTED BY ATTORNEY [FORM 2.601]**

_____ requests to be excused pursuant to Fla. R. Gen. Prac. &
Jud. Admin. 2.516(b)(1)(D) from the requirements of e- mail service because I am not represented by an
attorney and:

- ☐ I do not have an e-mail account.
☐ I do not have regular access to the internet.

By choosing not to receive documents by e-mail service, I understand that I will receive all copies of
notices, orders, judgments, motions, pleadings, or other written communications by delivery or mail at
the following address:

_____.

I understand that I must keep the clerk's office and the opposing party or parties notified of my current
mailing address.

Pursuant to section 92.525, Florida Statutes, under penalties of perjury, I declare that I have read the
foregoing request and that the facts stated in it are true.

CERTIFICATE OF SERVICE: I certify that a copy has been furnished by ☐e-mail, ☐delivery, ☐mail
[choose one] on _____, to:

(insert name(s) and address(es))

Dated: _____ Signature: _____

Phone _____ Print Name: _____

CLERK'S DETERMINATION. Based on the information provided in this request, I have determined that
the applicant is ☐ excused or ☐ not excused from the e-mail service requirements of Fla. R. Gen. Prac. &
Jud. Admin. 2.516(b)(1)(C).

Dated: _____ Signature of Clerk: _____

A PERSON WHO IS NOT EXCUSED MAY SEEK REVIEW BY A JUDGE BY REQUESTING A HEARING TIME.

Sign here if you want the Judge to review the clerk's determination that you are not excused from the e-
mail service requirements. You do not waive or give up any right to judicial review of the clerk's
determination by not signing this part of the form:

Dated: _____ Signature: _____

Print Name: _____