

MIAMI COUNTY RECORDER'S OFFICE

Jessica A. Lopez
Recorder



APPLICATION TO ESTABLISH INTERNET ACCESS TO MIAMI COUNTY RECORDER DOCUMENTS

Name of User: _____

Company Name: (if applicable) _____

Address: _____

Telephone: _____

E-Mail: _____

Password: (no special characters): _____

User Signature: _____ Date: _____

After your request has been processed, you will receive a link to download and your user ID by E-mail.
(at this time Laredo cannot be used on MAC)

Please return your completed form via e-mail to: Recorder@miamicountyohio.gov or US mail to
Recorder's Office 201 West Main Street, Troy, OH 45373

Recorder's Use:

ID: _____ Password: _____

HOME. GROWN. GREAT.

web www.miamicountyohio.gov
visit Safety Building
201 West Main St. • P.O. Box 653 • Troy, Ohio 45373
phone 937.440.6040
fax 937.440.6041
email recorder@miamicountyohio.gov