## Inspection/Duplication of Records Request

Tenn. Code Ann. § 10-7-503(a)(7)(A) Revised effective 1/1/2009 Form #CT-0445

Requestor Instructions: To make a request for copies of public records, <u>complete sections 1 – 5</u>. Do not sign and date the signature line until the records are received. Return this request either in person; by mail to City of Morristown, Administration Office, P.O. Box 1499, Morristown, TN 37816-1499, or email to <u>dstamey@mymorristown.com</u> Records request must be accompanied by a government issued photo identification, which includes the requestor's address.

Note: Tenn. Code Ann. § 10-7-503(a)(7)(A) provides that unless another provision in law specifically requires a written request, a request to inspect public records may not be required to be in writing nor can a fee be assessed for inspection of records.

ame of requ	uestor:
(Print or Ty	pe; initials of requestor are required for copy requests.)
	entification provided: Dissued by government entity including requestor's address Other:
	s address and contact information:
Request for	r inspection/access copy/duplicate [previously inspected on (date) or inspection waived].
Record(s) r	requested:
a. Type of r	ecord:MinutesAnnual ReportAnnual Financial StatementsBudgetEmployee FileOther
b. Detaile	ed Description of the record(s) including relevant date(s) and subject matter:
(use back o	of for if additional space is needed or attach written request to form)
Request su	bmitted to City of Morristown, Tennessee
a	. Employee receiving request
	(Print or Type and Initial)
b.	
C.	
Costs <i>(if as</i> s a.	
b.	
	(1) per page letter or legal sized:\$ (justification required if more than \$0.15) per black and white\$ (justification required if more than \$0.50) per color;
	(2) per page other sized or other medium;\$(justification required)
C.	
	Labor at \$/hour forhour(s)Labor at \$/hour forhour(s)Labor at \$/hour forhour(s).
	Labor at \$ /hour for hour(s).
d.	Programming cost to extract information requested:
e.	Method of delivery and cost: U.S. Postal Service Other
f.	Estimate of total cost to produce request:
g.	Estimate provided to requestor: in person by U.S.P.S.
	by phone Other
ayment:	
a.	Form of payment: Cash Check Other
b.	Amount of payment:
C.	Date of payment:
d.	Actual cost (and adjustment if prepaid):
te of:a	access to records and/or delivery of copies:

Signature of Records Custodian/Date

Signature of Requestor/Date