

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, complete sections 1 – 5. 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 dstamey@mymorristown.com 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.

1. Name of requestor:

(Print or Type; Initials of requestor are required for copy requests.)

2. Form of Identification provided:

Photo ID issued by government entity including requestor's address. Other: _____

3. Requestor's address and contact information:

4. Request for inspection/access copy/duplicate [previously inspected on _____ (date) or inspection waived].

5. Record(s) requested:

a. Type of record: Minutes Annual Report Annual Financial Statements Budget Employee File Other _____.

b. Detailed Description of the record(s) including relevant date(s) and subject matter:

(use back of for if additional space is needed or attach written request to form)

6. Request submitted to City of Morristown, Tennessee

a. Employee receiving request

(Print or Type and Initial)

b. Date and time request received: _____

c. Response: Same day Other

7. Costs (if assessed):

a. Number of pages to be copied: _____ Estimated

b. Cost

(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. Estimate of labor costs to produce the copy (for time exceeding 1 hour): _____

Labor at \$ _____ /hour for _____ hour(s).

Labor at \$ _____ /hour for _____ hour(s).

Labor at \$ _____ /hour for _____ hour(s).

d. Programming cost to extract information requested: _____

e. Method of delivery and cost: _____

Estimated On-site pick-up 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

8. Payment:

a. Form of payment: Cash Check Other _____

b. Amount of payment: _____

c. Date of payment: _____

d. Actual cost (and adjustment if prepaid): _____

9. Date of: access to records _____ and/or delivery of copies: _____

Signature of Records Custodian/Date

Signature of Requestor/Date