

# Tennessee Open Records Request

*\*Please show Photo ID issued by governmental entity including customers' address (example: driver's license).  
List form of identification provided:*

(PLEASE PRINT ON THIS FORM)

**\*Today's Date:** \_\_\_\_\_

*Customer Information*

**\*Full Name:** \_\_\_\_\_

*(First and Last Name)*

**\*Mailing Address:** \_\_\_\_\_

*(No P.O. Box)*

**\*City, State, Zip Code:** \_\_\_\_\_

**\*Email Address (\*):** \_\_\_\_\_

**\*Telephone or Cell Number:** \_\_\_\_\_

**\*Driver License Number and State:** \_\_\_\_\_

**\*Date of Birth:** \_\_\_\_\_

**\*Type of Record(s) Requested:** \_\_\_\_\_

*(Incident Report, Arrest Report, Inspection Report, Documents from the City of Red Bank)*

**\*If requesting an accident report, are you one of the following:** \_\_\_\_\_

*(Driver, Passenger, Insurer, Legal Representative)*

**\*I agree that I will abide by the following language:**

*It is a Class A misdemeanor for any person to knowingly use the report or information contained in the report for solicitation that is prohibited by a standard of conduct or practice of any profession licensed by the state. X* \_\_\_\_\_

**\*Report Number or Tracking Number(s):** \_\_\_\_\_

*(Example – Tracking Number #16-012345)*

**\*Report Date:** \_\_\_\_\_

**\*Location:** \_\_\_\_\_

*(Business or Street Name)*

**\*Victim(s) Name & Date of Birth:** \_\_\_\_\_

**\*Suspect(s) Name & Date of Birth:** \_\_\_\_\_

**\*Property Address:** \_\_\_\_\_

*(For Inspection Reports Only)*

**\*Preferred Method to Receive Records:** \_\_\_\_\_

*\*\*\*Charges for producing copies of Public Records are .15¢ (black and white copies) and .50¢ (color copies) per page. CD copies are \$3.00 per disk.*