



Metropolitan Nashville Police Department
Central Records Division
811 Anderson Lane, Suite 100,
Madison, TN 37115
615-862-7631

**MNPD Open Records Request Form**

This form is to be completed for copies of records or files and inspection of
Law Enforcement Personnel Records offered by the Metropolitan Nashville Police Department

Date: August 9, 2018

This form complies with TENNESSEE CODE ANNOTATED - TITLE 10, CHAPTER 7, PART 5.

Section A

Requestor Information: (Business/Citizen Information)Business Name: MuckRock NewsBusiness Address: Dept 58238, 411A Highland Ave City Somerville State MA Zip 02144Business Telephone Number: 617-299-1832Print Full Name: Carleton PurvisPersonal Home Address: See Attached City _____ State _____ Zip _____

Personal Telephone Number: _____

Email Address: 58238-81753968@requests.muckrock.comSignature of Requestor: Carleton Purvis for Carleton PurvisSend Results By: ☐ Postal Mail ☐ In Person ☒ Email**Photo copy of photo ID with address must be attached to this request.**

Note: Pursuant to T.C.A. § 10-7-503(a)(2)(B), "In the event it is not practicable for the record to be promptly available for inspection, the custodian shall, within seven (7) business days: (i) Make the information available to the requestor; (ii) Deny the request in writing or by completing a records request response form developed by the office of open records counsel. The response shall include the basis for the denial; or (iii) Furnish the requestor a completed records request response form developed by the office of open records counsel stating the time reasonably necessary to produce the record or information."

Section B

Type of Service Requested: See Attached

Complaint Number: _____

☐ Background Check☐ Accident Report☐ Arrest Report☐ Photos☐ AVL Records☐ Incident Report☐ Visa Letter☐ Mug Shot*☐ Copy of Case File☐ Computer Report☐ Adoption Letter☐ Fingerprints*☐ Personnel Records/ Disciplinary File☐ OPA File: _____

IA/OPA Number if Known

☐ Other (Please Explain in detail): _____

*Fingerprints and Mug Shots requests are completed by our Forensic Services Division located at 400 Myatt Drive, Madison, TN 37115

Section C

Subject of Request (If request is for Inspection of MNPD Personnel Files skip to Section E)Name (Last) _____ (First) _____ (Middle) See Attached

A.K.A. Names (Maiden, Other, etc.) _____

1 (Last) _____ (First) _____

2 (Last) _____ (First) _____

Date of Birth _____ Race _____ Sex _____

Social Security Number _____ Driver License Number _____

Street Address: _____ City _____ State _____ Zip _____

(NOTE: The accuracy of the information you provide is critical as all searches are conducted based on the information provided.)

Section D

Reason for Request:

See Attached

Section E

For MNPd Personnel Record Requests:

Tenn. Code Ann. § 10-7-503

(c)(1) Except as provided in § 10-7-504(g), all law enforcement **personnel** records shall be open for inspection as provided in subsection (a); however, whenever the personnel records of a law enforcement officer are inspected as provided in subsection (a), the custodian shall make a record of such inspection and provide notice, within three (3) days from the date of the inspection, to the officer whose personnel records have been inspected:

(A) That such inspection has taken place;

(B) The name, address and telephone number of the person making such inspection;

(C) For whom the inspection was made; and

(D) The date of such inspection

I request to view the following employee personnel file:

Employee Name (Print)

Assignment (If Known)

Reason for viewing file: If related to criminal or civil litigation, please give case name or other identifying information, i.e., docket #, etc.

Department Use Only:

Date Employee Notified:

Date Inspected:

Method of Notification:

Assignment Verified:

Undercover Comments:

Section F

Department Use Only:

Request Received By (Print)

Name

ENO

Date/Time

Request Processed By (Print)

Name

ENO

Date/Time

Fees Calculated By (Print)

Name

ENO

Date/Time

Total Fees: \$ _____

No. of Fingerprint Cards: _____

Results: Mail:

Faxed:

Emailed:

Date

Date

Date

Placed at counter for pick-up

Picked up

Date

Date