



Public Records Request Form A  
 Individual Request  
 City of Cookeville Police Department  
 10 E. Broad Street, PO Box 849  
 Cookeville, TN 38503  
 931-520-5326



The Tennessee Public Records Act (TPRA) grants Tennessee citizens the right to access open public records that exist at the time of the request. The TPRA does not require records custodians to compile information or create or recreate records that do not exist.

To: Administrative Services Division Commander, 10 E. Broad Street, PO Box 849, Cookeville, TN 38503

**From:** \_\_\_\_\_  
 Requestor's Name Phone  
 \_\_\_\_\_  
 Street Address, City, Zip Code E-mail Address

Is the requestor a Tennessee citizen? Yes No  
 Is the requestor a victim in the record requested? Yes No

**Request:** Inspection (The TPRA does not permit fees or require a written request for inspection only.)

Copy/Duplicate

If costs for copies are assessed, the requestor has a right to receive an estimate. Do you wish to waive your right to an estimate and agree to pay copying and duplication costs in an amount not to exceed \$ \_\_\_\_\_? If so, initial here: KH.

**Delivery preference:** On-Site Pick-Up Electronic USPS First-Class Mail Other: \_\_\_\_\_

**Records Requested:**

Provide a detailed description of the record(s) requested, including: (1) type of record; (2) timeframe or dates for the records sought; and (3) subject matter or key words related to the records. Under the TPRA, record requests must be sufficiently detailed to enable a governmental entity to identify the specific records sought. As such, your record request must provide enough detail to enable the records custodian responding to the request to identify the specific records you are seeking.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I acknowledge that response to my request may take up to seven business days. Initial here: KH.

[Signature] \_\_\_\_\_ 8-5-20 \_\_\_\_\_  
 Signature of Requestor Date Signature of Receiving Employee Date Received

## ***Directions for Completing the Public Records Request Form A***

**From:** *The name of the person making the request.*

**Phone:** *Phone number through which the requestor can be contacted.*

**Street Address:** *Address including city of residence and ZIP code of the requestor where records can be sent.*

**E-mail Address:** *E-mail address through which the requestor can be contacted or records sent.*

**Citizenship:** *Proof provided of Tennessee residency (picture identification issued by the state, etc.)*

**Victim Status:** *Each victim of the record requested is provided a minimally redacted paper copy of the record without charge.*

**Request:**

*Inspection of a properly redacted public record may be made without charge in the presence of a record custodian at the time and place scheduled by the record custodian or departmental PRRC. The requestor making an inspection of a paper record may capture images of the record with their own device without charge.*

*If the requestor wants the record custodian to provide paper copies of a record, the requestor can indicate the maximum amount they are willing to pay for simple requests without an itemized list of applicable fees. If the requestor does not provide a maximum charge amount, the request cannot be completed until an itemized fee summary is approved by the departmental PRRC. Likewise, an itemized fee summary approved by the departmental PRRC will be required for requests requiring significant research and redaction and requests for video/audio recordings before the request is completed.*

**Delivery Preference:** *The requestor must indicate their preferred method of receiving the record requested.*

**Records Requested:** *The requestor must provide as much descriptive information as possible about the record in question to facilitate fulfilling the request.*

**Acknowledgement of Seven Day Notification Period:** *The requestor must initial their acknowledgement of the seven-day limit to respond to the request as specified in the TPRA.*

**Requestor Signature and Date:** *The requestor must sign their request and provide the date the request was made to a record custodian.*

**Employee Signature and Date:** *The employee receiving the request must sign the form and provide the date the request was received.*