

**30-7 POLICY RELATING TO TENNESSEE OPEN RECORDS ACT TCA 10-7-503 (a)**

**SECTION I** Procedures regarding access and inspection of public records: To provide for the maintenance, preservation, and protection of public records.

- A. Consistent with the Public Records Act of the State of Tennessee, personnel of Monroe County shall provide full access and assistance in a timely and efficient manner to persons who request access to open public records.
- B. Employees of Monroe County shall protect the integrity and organization of public records with respect to the manner in which such records are inspected and copied. All inspections or copying of records shall be performed by, or under the supervision of, employees of Monroe County.
- C. Employees of Monroe County shall prevent excessive disruptions of essential functions and duties and shall seek to provide access to records at the earliest possible time.
- D. Requests for inspection or copying of records shall be made in writing on a form provided by Monroe County. Such form shall be completed by the person requesting the record, and Monroe County employees may request reasonable identification of any person requesting a record.
- E. Hours for making request for inspection or copying records shall be the regular office hours of County Departments.
- F. Removal of records from the Finance Department or other office locations shall not be permitted.
- G. Reproduction of records shall not be undertaken, when in the judgement of personnel of the County, such reproduction would cause damage to the record(s).

**SECTION II** Fees for Inspection and Copying of Public Records:

- A. The administration of Monroe County may establish reasonable fees to cover the cost of retrieving, supervising, access and inspection, and reproduction, of records. Such fees may include the actual cost of reproduction, personnel costs related to time spent retrieving and accessing records, and personnel costs related to time spent supervising inspection or reproduction of records.
- B. All fees for purposed identified in Section II A above shall be due at the time such costs are incurred.
- C. No fees shall be assessed against officers or employees of Monroe County who make requests which are reasonably necessary to the performance of their official duties.
- D. No reproduction fee shall be assessed when an employee of Monroe County determines that the cost of charging and handling the fee exceeds the cost of providing a copy without charge.

The charge for an Open Records Request is \$12.50 per hour after the first hour plus \$0.15 per page copied.

I understand that the above fee will be levied on all Open Record Requests.

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Printed Name

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Date

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Signature



### INSPECTION/DUPLICATION OF RECORDS REQUEST

**Requestor Instructions:** To make a request for copies of public records fill in sections 1-5, and sign and date section 9 at the time the request is made. Requestors who are retrieving the requested records from the office of the records custodian in person should not sign and date section 11 until the records are received. Requestors who are having the records emailed or mailed to him/her are not required to sign and date section 11 of the form.

**Custodian Instructions:** For requests to inspect, the records custodian is to fill in sections 1-6,8, and sign and date section 10 at the time the request is made. Section 12 should not be signed and dated until the requestor inspects the records. For requests for copies or duplicates, the records custodian is to fill in sections 6-8 and sign and date section 10 at the time the request is made. Section 12 should not be signed and dated until the records are retrieved by or delivered to the requestor.

**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.

(FRONT)

1. Name of requestor: \_\_\_\_\_  
(Print or Type; Initials of requestor are required for copy requests)

2. (If required) Form of identification provided:  
 Photo ID issued by governmental 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:  
\_\_\_\_\_  
\_\_\_\_\_

6. Request submitted to: \_\_\_\_\_  
(Name of Governmental Entity, Office or Agency)

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)

Costs continued:

- 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. \_\_\_\_\_  
 Signature of Requestor \_\_\_\_\_  
 Date Records Requested

10. \_\_\_\_\_  
 Signature of Records Custodian \_\_\_\_\_  
 Date of Receipt of Request

Delivery/Retrieval of Records

11. \_\_\_\_\_  
 Signature of Requestor \_\_\_\_\_  
 Date Records Retrieved

12. \_\_\_\_\_  
 Signature of Records Custodian \_\_\_\_\_  
 Date Records Retrieved/Delivered  
 Or  
 \_\_\_\_\_  
 Date Records Inspected by the Requestor