



DEPARTMENT OF
INTELLECTUAL AND
DEVELOPMENTAL DISABILITIES

**BACKGROUND & FINGERPRINT REIMBURSEMENT
INSTRUCTIONS**

AGENCY

Fill in agency that is requesting the reimbursement.

AGENCY #

This is a 4 digit number that is assigned by DIDD that can be found on the ACR if previous reimbursements have been processed.

SITE #

This is the agency's ancillary site code (X code).

REGION Please use either: E = East, M = Middle, or W = West

(If submitting reimbursement requests for more than one region, please use a separate reimbursement form for each region.)

INVOICE MONTH/DAY/YEAR

This should be the invoice date that the checks were completed (needs to correspond to attached documentation.)

DESCRIPTION

List the type of check performed – C = Criminal **OR** F = Fingerprint.

EMPLOYEE INITIALS

Include **all three** initials of the employee on whom the check was performed.

PRIVATE INVESTIGATOR/TBI

This is the agency that performed the check, i.e. private background agency. Fingerprint checks will still be done by the TBI, but you will have to submit documentation for reimbursement.

INVESTIGATOR TENNESSEE LICENSE #

The private investigator or investigator agency must be licensed in the State of Tennessee for the claim to qualify for reimbursement. The valid license number can be found at <http://verify.tn.gov/>.

PI AGENCY RATE CHARGED

This is the amount that you were charged per background check. DIDD will only reimburse up to \$50 for criminal background **or** \$48 for fingerprint.

TOTAL REIMBURSABLE AMOUNT DUE

This should be the total amount requested for each employee to be reimbursed by DIDD.

AUTHORIZED BY

This must be the **printed** name of the preparer.

TOTAL REIMBURSEMENT REQUEST

Enter the total for the entire form.

PHONE NUMBER

This is the number at which DIDD may contact the preparer of the form.

EMAIL

This is the email address at which DIDD may contact the preparer of the form.

DATE SUBMITTED

This is the date that the form was prepared.

You may submit your billing electronically to
DIDD_Business.Services@tn.gov

or

You may mail your billing to the address below:
DIDD
Business Services
400 Deaderick Street, 9th Floor
Nashville, TN 37243