



Tennessee Bureau of Investigation



PUBLIC RECORDS INSPECTION REQUEST

TBI Policy 7-1-004 requires that any person who wishes to inspect public records in the custody of the Tennessee Bureau of Investigation complete this disclosure form. This form must be filled out before access to the secure areas of the TBI Headquarters Building will be granted. Persons allowed entrance for the purpose of inspecting public records shall be accompanied by a TBI employee at all times while within the building.

NAME OF INSPECTING INDIVIDUAL:		
ADDRESS OF INSPECTING INDIVIDUAL:		
TELEPHONE	DATE OF BIRTH	DRIVER'S LICENSE #
() -	/ /	State Issued
PROFESSIONAL AFFILIATION, IF ANY:		
NAME/ADDRESS OF PERSON ON WHOSE BEHALF INSPECTION IS MADE, IF OTHER THAN INSPECTING INDIVIDUAL:		
RECORDS SOUGHT:		
I, _____, hereby certify that the above information is true and correct to the best of my knowledge.		
_____ Signature of Inspecting Person	_____ Date	

TBI PERSONNEL SECTION USE ONLY

TBI employee is: Commissioned Non-commissioned

Employee notified of inspection:

Date: _____ Time: _____ Personnel Director: _____



Tennessee Bureau of Investigation



INVOICE

NUMBER OF COPIES _____ X \$.15 = \$ _____
(@ \$.15 PER COPY): # of copies

LABOR BY TBI PERSONNEL _____ = \$ _____
of hours

Total Cost = \$ _____

(This shall serve as an invoice and receipt for the fees charged pursuant to TBI Policy 7-2-002.)