

CITY OF CHATTANOOGA
Tennessee Open Records Act Request

Date Requested

Name of Person Requesting Information

Contact Phone Number

Email Address

Company Name

Street Address

City, State Zip

Proof of Residency to be provided - Check Below

TN Driver's License

Voter's Registration

I, the undersigned, as a resident of the State of Tennessee, request under the Tennessee Public Records Act to obtain access to and permission to copy the following records described below:

I agree to reimburse the City of Chattanooga the cost of providing/copying this information at \$1.00 per page copied or applicable fees agreed to in advance.

I understand that State of Tennessee residence must be verified before any documents will be researched and/or processed.

Signature/Name

Date

Rev. 3/08