

DEPARTMENT OF GENERAL SERVICES  
 RECORDS MANAGEMENT DIVISION  
**RECORDS RETENTION AND DISPOSAL SCHEDULE**

Schedule No. 2362

Supersedes 2154

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<b>Agency</b> Maryland Environmental Service	<b>Division/Unit</b> TES/Env Monitoring
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Item No.	Description	Retention
1	EMR - ORIGINAL LAB DATA SHEETS	Retain digital image 10 yrs then destroy. Periods shall automatically be extended during the course of litigation or when requested by the department.
2	EMR - COMPLIANCE RELATED DOCUMENTS <b>File contains all operating records, discharge monitoring reports, data reports, permits, and various compliance reports.</b>	Retain digital image 10 yrs, then destroy. Periods shall automatically be extended during the course of litigation or when requested by the department.

Schedule Approved by Department, Agency, or Division Representative.  
 Date February 17, 2005

Signature Judy A. Hughes  
 Typed Name Judy A. Hughes  
 Title Administrative Officer III

Schedule Authorized by State Archivist

Date SEP 15 2005

Signature Edward C. Papenfuss Jr

<b>INSTRUCTIONS</b> – TYPE OR PRINT A SEPARATE FORM FOR EACH NEW REVISED RECORD SERIES. FORWARD WITH RECORDS RETENTION SCHEDULE (DGS 550-1)		<b>DEPARTMENT OF GENERAL SERVICES</b> RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 – JESSUP, MARYLAND 20794		AGENCY RECORDS INVENTORY Page <u>1</u> Of <u>2</u>	
<b>1. DEPARTMENT/AGENCY</b> Maryland Environmental Service		<b>2. DIVISION</b> Technical and Environmental Services		<b>3. UNIT</b> Environmental Monitoring and Reporting	
<b>DEFINITION – Record Series – A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</b>					
<b>4. RECORD SERIES TITLE</b> EMR – original laboratory data sheets				<b>5. EARLIEST YEAR / LATEST YEAR</b> <u>1995</u> TO <u>2005</u>	
<b>6. RECORD SERIES DESCRIPTION</b> (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series) Files contain monthly laboratory data sheets.					
<b>7. RECORD SERIES FORMAT(S)</b> <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input type="checkbox"/> Other (Specify) _____		<b>8. RECORD SERIES SEQUENCE</b> <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		<b>9. VOLUME</b> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (Specify) _____ Laserfiche (SQL server) Number _____ Document are saved as images	
<b>11. FILE IS USED</b> <input checked="" type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly		<b>12. FILE BECOMES INACTIVE AFTER</b> <u>3</u> _____ <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s) Number			
<b>13. CURRENT LOCATIONS(S)</b> (Bldg., Floor, Room) Laserfiche (SQL server)		<b>14. IS RECORD SERIES DUPLICATED ELSEWHERE?</b> (If yes, specify agency or office) <input checked="" type="checkbox"/> Yes      Hard copies are saved at _____ <input type="checkbox"/> No facilities			
<b>15. ACCESS RESTRICTIONS</b> (If yes, cite law(s) & regulations(s)) <input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No		<b>16. AUDIT REQUIREMENTS</b> <input type="checkbox"/> None <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
<b>17. IS AN INDEX SYSTEM USED?</b> (If yes, explain briefly and describe any hardware/software) <input checked="" type="checkbox"/> Yes      LF FMS _____ <input type="checkbox"/> No Laserfiche file management system		<b>18. RECOMMENDED RETENTION</b> Retain documents for 10 years. Periods shall be automatically extended during the course of litigation or when requested by the department.			
<b>19. NAME AND TITLE PREPARER</b> Rex Lloyd, Chief of EMR Division		<b>20. TELEPHONE NUMBER</b> 410-729-8363		<b>21. DATE</b> 02/14/05	

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<b>1. DEPARTMENT/AGENCY</b> Maryland Environmental Service		<b>2. DIVISION</b> Technical and Environmental Services		<b>3. UNIT</b> Environmental Monitoring and Reporting	
<b>DEFINITION - Record Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</b>					
<b>4. RECORD SERIES TITLE</b> EMR - Compliance related documents				<b>5. EARLIEST YEAR / LATEST YEAR</b> <u>1977</u> TO <u>2005</u>	
<b>6. RECORD SERIES DESCRIPTION</b> (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series) Files contain all operating records, discharge monitoring reports, data reports, permits, and various compliance reports.					
<b>7. RECORD SERIES FORMAT(S)</b> <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm <input type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape <input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk <input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape <input checked="" type="checkbox"/> Other (Specify) <u>Digital image</u> LF		<b>8. RECORD SERIES SEQUENCE</b> <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		<b>9. VOLUME</b> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (Specify) _____ Laserfiche (SQL server) _____ Number Document are saved as images	
		<b>10. ANNUAL ACCUMULATION</b> <input type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input checked="" type="checkbox"/> Other (Specify) _____ _____ Number			
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<b>19. NAME AND TITLE PREPARER</b> Rex Lloyd, Chief of EMR Division		<b>20. TELEPHONE NUMBER</b> 410-729-8363		<b>21. DATE</b> 02/14/05	