



This Schedule supercedes Schedule # C691 dated 7/30/92

Anne Arundel County
OFFICE OF CENTRAL SERVICES
Records Management Division

Schedule No.
C-750

Page No.
1 of 1

RECORDS RETENTION AND DISPOSAL SCHEDULE

AGENCY Anne Arundel County

DIVISION Fac Mgmt

Item No.	Description	Retention
1	<u>GENERAL FILES</u> Original incoming and outgoing letters, memoranda and all other materials related to facilities and general correspondence.	Retain five (5) years, then destroy.
2	<u>PAYROLL/TIME AND ATTENDANCE RECORDS</u> Original time sheets of Facilities employees FLSA computer print-outs and leave accrual.	Retain three (3) years, then destroy.
3	<u>INSTALLATION FILES</u> Files contain information on renovations, repairs, etc. Also includes request for special projects, and a history of problems or concerns.	Purge annually. Then destroy.

Schedule Approved by
Records Management Officer

2/5/96
Date

Jacqueline M. Lynn
Signature

Schedule Approved by
Chief Administrative Officer

2/9/96
Date

[Signature]
Signature

Schedule Approved by
Agency, or Division Representative

1-30-96
Date

Teri L. Belcher
Signature

Schedule Approved by
State Archivist

FEB 29 1996
Date

Edward C. Pappas
Signature

1. DEPARTMENT/AGENCY Public Works		2. DIVISION Facilities & Fleet Mgmt		3. UNIT Facilities Management	
DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
4. RECORD SERIES TITLE Installation Files				5. EARLIEST YEAR / LATEST YEAR 1992 TO 1994	
6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series)					
Files contain informatioun on renovations, repairs, etc. Also includes request for special projects, and a history of problems or concerns					
7. RECORD SERIES FORMAT(S)		8. RECORD SERIES SEQUENCE		9. VOLUME	
<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) _____		<input checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		<input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel (s) <input type="checkbox"/> Computer Tape (s) <input type="checkbox"/> Other (Specify) _____ _____ Number	
				10. ANNUAL ACCUMULATION	
				<input type="checkbox"/> File Drawer (s) <input type="checkbox"/> Microfilm Reel (s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (Specify) _____ _____ Number	
11. FILE IS USED		12. FILE BECOMES INACTIVE AFTER			
<input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly		_____ Annually <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number			
13. CURRENT LOCATION(S) (Bldg., Floor, Room)		14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)			
2662 Riva Road 4th Floor HOC		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))		16. AUDIT REQUIREMENTS			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent			
17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)		18. RECOMMENDED RETENTION			
<input type="checkbox"/> Yes <input type="checkbox"/> No		Retain annually, prune material no longer needed			
19. NAME AND TITLE OF PREPARER		20. TELEPHONE NUMBER		21. DATE	
Joan Cowger Clerk IV		410-222-7975		10-01-94	

1. DEPARTMENT/AGENCY Public Works	2. DIVISION Facilities & Fleet Mgmt	3. UNIT Facilities Management
DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.		
4. RECORD SERIES TITLE Payroll Time & attendance records	5. EARLIEST YEAR / LATEST YEAR <u>1991</u> to <u>1994</u>	
6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series) Original time sheets of Facilities employees FLSA computer print-outs and leave accrual		
7. RECORD SERIES FORMAT(S) <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) _____	8. RECORD SERIES SEQUENCE <input type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____	9. VOLUME <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel (s) <input type="checkbox"/> Computer Tape (s) <input type="checkbox"/> Other (Specify) _____ _____ Number
10. ANNUAL ACCUMULATION <input type="checkbox"/> File Drawer (s) <input type="checkbox"/> Microfilm Reel (s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (Specify) _____ _____ Number		
11. FILE IS USED <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly	12. FILE BECOMES INACTIVE AFTER <u>3</u> _____ Number <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)	
13. CURRENT LOCATION(S) (Bldg., Floor, Room) Heritage Office 2662 Riva Rd 4th Flr	14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office) <input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	
15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s)) <input type="checkbox"/> Yes _____ <input checked="" type="checkbox"/> No	16. AUDIT REQUIREMENTS <input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent	
17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software) <input type="checkbox"/> Yes _____ <input type="checkbox"/> No	18. RECOMMENDED RETENTION Retain 3 years then destroy	
19. NAME AND TITLE OF PREPARER Joan Cowger Clerk IV	20. TELEPHONE NUMBER 410-222-7975	21. DATE 10-01-94

1. DEPARTMENT/AGENCY Public Works	2. DIVISION Facilities & Fleet Mgmt	3. UNIT Facilities Management
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DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE General Files	5. EARLIEST YEAR / LATEST YEAR <u>1989</u> TO <u>1994</u>
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6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series)

Original incoming and outgoing letters, memoranda and all other materials related to facilities and general correspondence

<p>7. RECORD SERIES FORMAT(S)</p> <p><input type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input checked="" type="checkbox"/> Legal Size <input type="checkbox"/> Computer Tape</p> <p><input type="checkbox"/> Bound Book <input type="checkbox"/> Floppy Disk</p> <p><input type="checkbox"/> Audio Tape <input type="checkbox"/> Video Tape</p> <p><input type="checkbox"/> Other (Specify) _____</p>	<p>8. RECORD SERIES SEQUENCE</p> <p><input checked="" type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (Specify) _____</p>	<p>9. VOLUME</p> <p><input checked="" type="checkbox"/> File Drawer(s)</p> <p><input type="checkbox"/> Microfilm Reel (s)</p> <p><input type="checkbox"/> Computer Tape (s)</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p>Number _____</p> <hr/> <p>10. ANNUAL ACCUMULATION</p> <p><input type="checkbox"/> File Drawer (s)</p> <p><input type="checkbox"/> Microfilm Reel (s)</p> <p><input type="checkbox"/> Computer Tape(s)</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p>Number _____</p>
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11. FILE IS USED	12. FILE BECOMES INACTIVE AFTER
<input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	<u>5</u> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s) Number

13. CURRENT LOCATION(S) (Bldg., Floor, Room) Heritage Office 2662 Riva Rd 4th floor	14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))	16. AUDIT REQUIREMENTS
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)	18. RECOMMENDED RETENTION
<input type="checkbox"/> Yes <input type="checkbox"/> No	Retain 5 years then destroy

19. NAME AND TITLE OF PREPARER Joan Cowger Clerk IV	20. TELEPHONE NUMBER 410-222-7975	21. DATE 10-01-94
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