

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

Schedule No. C-843

Page 1 of 2

Agency HOWARD COUNTY GOVERNMENT Division/Unit TECH/COMM SVCS - CABLE
 ADMIN OFFICE

Item No.	Description	Retention
<u>ADMINISTRATIVE FILES:</u>		
1	GENERAL CORRESPONDENCE: All correspondence incoming and outgoing from the public.	Three Years, then destroy.
2	CABLE ADVISORY COMMITTEE: All correspondence incoming and outgoing.	Permanently on CD. Forward to MSA.
3	COMCAST CORRESPONDENCE: All correspondence incoming and outgoing.	Hold for the length of the franchise agreement. Approx. YEAR 2010, then destroy.
4	FCC - FEDERAL COMMUNICATIONS COMMISSION: All correspondence incoming and outgoing.	Six Years, then destroy.
5	MID-ATLANTIC/ONEPOINT COMMUNICATIONS: All correspondence incoming and outgoing.	Hold for the length of the franchise agreement. Approx. YEAR 2003, then destroy.
6	HOWARD COMMUNITY COLLEGE: All correspondence incoming and outgoing between the Cable Administrator's Office and Howard Community College.	Six Years, then destroy.

Schedule Approved by Department, Agency, or Division Representative.

Date 8/19/98

Signature *Jack Foley*

Typed Name Jack Foley

Title Cable Administrator

Schedule Authorized by State Archivist

Date SEP 24 1998

Signature *Edward C. Papenfuss*

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Page 2 of 2

Agency HOWARD COUNTY GOVERNMENT Division/Unit TECH/COMM SVCS - CABLE
ADMIN OFFICE

Item No.	Description	Retention
	<u>ADMINISTRATIVE FILES:</u>	
7	HOWARD COUNTY GOVERNMENT AGENCIES: All correspondence between government agencies and the Cable Administrator's Office is kept in these files. These files include memorandums, letters, forms, etc.	Three Years, then destroy.
8	HOWARD COUNTY PUBLIC SCHOOLS: All correspondence between the Howard County Public School System and the Cable Administrator's Office.	Six Years, then destroy.
9	OPERATING BUDGET: FY Budget Forms (Minor P.O.'s, Partials, etc.) including budget use.	Three Years, then destroy.
10	PUBLIC ACCESS: Grant applications, approval letters and general correspondence, budget forms, (P.O.'s, Partials) indicating disbursements. Also, PUBLIC ACCESS HISTORY FILES: These Public Access History files date back to approximately 1980.	Retain Ten Years if Grants Were Approved, then destroy. Retain Three Years if Grants Were Denied, then destroy. PERMANENTLY on CD. Forward to MSA.
11	CONTRACTS & AGREEMENTS	PERMANENTLY on CD. Forward to MSA.
12	TRANSITORY FILES: Correspondence - General: All correspondence incoming and outgoing from the public.	One Year, then destroy.

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

Schedule No. C-843

Page 1 of 1

Agency HOWARD COUNTY GOVERNMENT Division/Unit Cable Administration Office

Item No.	Description	Retention
	<p>All electronic media records will created and stored using a system that is in compliance with Comar 14.18.04. Permanent records will be transferred to MSA on CD stored as "Tif" files with retrieval software also embedded on the CD.</p>	

Schedule Approved by Department, Agency, or Division Representative.

Date 9/9/98

Signature *Phyllis L. Pritchett*

Typed Name Phyllis L. Pritchett

Title Records Management Officer

Schedule Authorized by State Archivist

Date SEP 24 1998

Signature *Edward C. Pappas*

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)	DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794	AGENCY RECORDS INVENTORY PAGE <u>1</u> OF <u>5</u>
Department/Agency TCS/CABLE ADMINISTRATOR	2. Division	3. Unit
DEFINITION - RECORD 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 CABLE ADVISORY COMMITTEE	5. Earliest Year/Latest Year <u>1990</u> to <u>1998</u>	
6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series. A file folder of Cable Advisory Committee information contains: 1) all correspondence incoming and outgoing 2) meeting notes 3) meeting agendas 4) minutes		
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 type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume half of a <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) _____ <input type="checkbox"/> Computer Tape(s) Number <input type="checkbox"/> Other (specify) 10. Annual Accumulation <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) _____ <input type="checkbox"/> Computer Tape(s) Number <input type="checkbox"/> Other (specify)
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly	12. File Becomes Inactive After _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s) Number	
13. Current Location(s) (Bldg., Floor, Room) Carroll Building - 1st Floor 3450 Court House Drive, Ellicott City, MD 21043	14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))	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 checked="" type="checkbox"/> No	18. Recommended Retention Retain for future reference.	
Name and Title of Preparer Nancy Griffin Administrative Aide	20. Telephone Number (410) 313-3318	21. Date 8/19/98

<p>Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)</p>	<p>DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794</p>	<p>AGENCY RECORDS INVENTORY</p> <p style="text-align: right;">PAGE <u>2</u> OF <u>5</u></p>
<p>Department/Agency TCS/CABLE ADMINISTRATOR</p>	<p>2. Division</p>	<p>3. Unit</p>
<p>DEFINITION - RECORD SERIES - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.</p>		
<p>4. Record Series Title PUBLIC ACCESS GRANTS - HISTORY FILES</p>	<p>5. Earliest Year/Latest Year _____ to _____</p>	
<p>6. Record Series Description (Briefly describe the types of informationn/documents/forms found in the series. Include the purpose or function of the series.)</p> <p>A file folder of public access grants contains:</p> <p>1) applications 2) letters 3) disbursement forms</p>		
<p>7. Record Series Format(s)</p> <p><input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Microfilm</p> <p><input 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 type="checkbox"/> Alphabetical</p> <p><input type="checkbox"/> Numerical</p> <p><input checked="" type="checkbox"/> Chronological</p> <p><input type="checkbox"/> Geographical</p> <p><input type="checkbox"/> Other (specify) _____</p>	<p>9. Volume</p> <p>_____</p> <p>Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>
<p>10. Annual Accumulation</p> <p>_____</p> <p>Number</p> <p><input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)</p>		
<p>11. File is Used</p> <p><input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly</p> <p>History files - not referred to on regular basis.</p>	<p>12. File Becomes Inactive After</p> <p>_____</p> <p>Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)</p>	
<p>13. Current Location(s) (Bldg., Floor, Room)</p> <p>Carroll Building - 1st Floor 3450 Court House Drive, Ellicott City, MD 21043</p>	<p>14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))</p>	<p>16. Audit Requirements</p> <p><input checked="" type="checkbox"/> None <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Independent</p>	
<p>17. Is an Index System Used? (If yes, explain briefly and describe any hardware/software)</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>18. Recommended Retention</p> <p>Retain for future reference.</p>	
<p>Name and Title of Preparer Nancy Griffin Administrative Aide</p>	<p>20. Telephone Number (410) 313-3318</p>	<p>21. Date 8/19/98</p>

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)	DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794	AGENCY RECORDS INVENTORY PAGE <u>3</u> OF <u>5</u>
Department/Agency TCS/CABLE ADMINISTRATOR	2. Division	3. Unit
DEFINITION - RECORD 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 CONTRACTS & AGREEMENTS - COMCAST CABLEVISION		5. Earliest Year/Latest Year _____ to _____
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) A file folder of COMCAST Cablevision information contains: 1) franchise agreement between the company and Howard County 2) all correspondence incoming and outgoing		
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 type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume part of a _____ Number _____ <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) 10. Annual Accumulation part of a _____ Number _____ <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)
11. File is Used <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly	12. File Becomes Inactive After _____ Number _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)	
13. Current Location(s) (Bldg., Floor, Room) Carroll Building - 1st Floor 3450 Court House Drive, Ellicott City, MD 21043	14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))	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 checked="" type="checkbox"/> No	18. Recommended Retention	
Name and Title of Preparer Nancy Griffin Administrative Aide	20. Telephone Number (410) 313-3318	21. Date 8/19/98

Instructions - Type or Print a separate form for each new or revised record series, forward with Record Retention Schedule (DGS 550-1)	DEPARTMENT OF GENERAL SERVICES RECORDS MANAGEMENT DIVISION 7275 WATERLOO ROAD P.O. BOX 275 JESSUP, MARYLAND 20794	AGENCY RECORDS INVENTORY PAGE <u>4</u> OF <u>5</u>
Department/Agency TCS/CABLE ADMINISTRATOR	2. Division	3. Unit
DEFINITION - RECORD 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 CONTRACTS & AGREEMENTS - MID-ATLANTIC/ONE POINT COMMUNICATIONS	5. Earliest Year/Latest Year _____ to _____	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. A file folder of MID-ATLANTIC/ONE POINT COMMUNICATIONS information contains: 1) franchise agreement between the company and Howard County 2) all correspondence incoming and outgoing		
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 type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume _____ Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) 10. Annual Accumulation _____ Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)
11. File is Used <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly	12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)	
13. Current Location(s) (Bldg., Floor, Room) Carroll Building - 1st Floor 3450 Court House Drive, Ellicott City, MD 21043	14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))	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 checked="" type="checkbox"/> No	18. Recommended Retention	
Name and Title of Preparer Nancy Griffin Administrative Aide	20. Telephone Number (410) 313-3318	21. Date 8/19/98

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Department/Agency TCS/CABLE ADMINISTRATOR	2. Division	3. Unit
DEFINITION - RECORD 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 CONTRACTS & AGREEMENTS - DONELAN, CLEARY, WOOD & MASER		5. Earliest Year/Latest Year _____ to _____
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) A file folder of Donelan, Cleary, Wood & Maser information contains: 1) contracts and agreements between the firm and Cable Admin office. 2) all correspondence incoming and outgoing regarding legal opinions, etc.		
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 type="checkbox"/> Numerical <input checked="" type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (specify) _____	9. Volume part of a _____ Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify) 10. Annual Accumulation part of a _____ Number <input checked="" type="checkbox"/> File Drawer(s) <input type="checkbox"/> Microfilm Reel(s) <input type="checkbox"/> Computer Tape(s) <input type="checkbox"/> Other (specify)
11. File is Used <input type="checkbox"/> Daily <input checked="" type="checkbox"/> Weekly <input type="checkbox"/> Monthly	12. File Becomes Inactive After _____ Number <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)	
13. Current Location(s) (Bldg., Floor, Room) Carroll Building - 1st Floor 3450 Court House Drive, Ellicott City, MD 21043	14. Is Record Series Duplicated Elsewhere? (If yes, specify agency or office) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, cite Law(s) & Regulation(s))	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 checked="" type="checkbox"/> No	18. Recommended Retention Retain for future reference.	
Name and Title of Preparer Nancy Griffin Administrative Aide	20. Telephone Number (410) 313-3318	21. Date 8/19/98