

CITY OF ANNAPOLIS RECORDS RETENTION AND DISPOSAL SCHEDULE		Schedule No. <i>wy-10<sup>e</sup>i</i>
	<b>FIRE DEPARTMENT</b>	Division: <b>FIRE MARSHAL'S OFFICE</b>
Item No.	Description	Retention
1.	General Correspondence  Original incoming letters, copies of outgoing letters, memoranda, studies, reports, directives, policies, and other materials related to the administration of the agency.	Retain for three years, then destroy.
2.	<b>Background Files - Employees</b>  Background records for personnel including credit checks, licensing information, motor vehicle checks, criminal history, military history, and personal history statements.	Retain for five years after termination, then destroy.
3.	<b>Background Files - Firefighter Applications</b>  Background records of firefighter applications including credit checks, licensing information, motor vehicle checks, criminal history, military history, and personal history.	Retain for five years after termination, then destroy.
4.	<b>Burning Permit</b>  Any open flame used to burn any material within city limits must be given a burning permit.	Retain for one year, after permit expiration, then destroy.

*Edward P. Sherlock, Jr.*

Department Director

*February 27, 2000*

Date

*P. Bense*

City Clerk

*3/10/00*

Date

*Edward C. Pappas*

APR 27 2000

Schedule Approved by State Archivist

Date

CITY OF ANNAPOLIS RECORDS RETENTION AND DISPOSAL SCHEDULE		Schedule No. M-109
	<b>FIRE DEPARTMENT</b>	Division: <b>FIRE MARSHAL'S OFFICE</b>
Item No.	Description	Retention
5.	<b>Background Files - Volunteer Personnel</b>  Background records of volunteer personnel, including credit checks, licensing information, motor vehicle checks, criminal history and military history.	Retain for five years after termination, then destroy.
6.	<b>Investigation Files</b>  Investigation files, including police and fire reports, witness statements, photos, investigation reports and any other documents pertinent to the investigation.	Retain for 25 years, then destroy.
7.	<b>Complaints</b>  All complaints - about any subject - tenant about property owner - owner about a tenant - public about anything.	Retain for 10 years, then destroy.
8.	<b>Street Fire</b>  Locations of inspectable buildings by street address any and all information except plans.	Retain as individual file for the life of the building, then destroy.

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		CITY OF ANNAPOLIS Records Management Program		RECORDS INVENTORY PAGE _____ OF _____	
1. Department FIRE		2. Division FIRE MARSHAL		3. Unit (0 INVESTIGATION SECTION)	
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 BACKGROUNDS FILES CURRENT EMPLOYEES				5. Earliest Year/Latest Year 1976 to 1996	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series. - BACKGROUND RECORDS FOR CURRENT PERSONNEL INCLUDING CREDIT CHECKS, LICENSING INFORMATION, MOTOR VEHICLE CHECKS, CRIMINAL HISTORY, MILITARY HISTORY, AND PERSONAL HISTORY STATEMENTS.					
7. Record Series Format(s) t Letter Size • Micro Film a Legal Size • Computer Tape O Bound Book • Floppy Disk • Audio Tape • Video Tape D Other (Specify) _____		8. Record Series Sequence ^ Alphabetical Q Numerical • Chronological a Geographical Q Other (Specify) _____		9. Volume Number ^T File Drawer(s) 1 • Microfilm Reel(s) _____ a Computer Tape(s) _____ • Other (Specify) _____	
				10. Annual Accumulation Number g & i File Drawer(s) _____ • Microfilm Reel(s) _____ • Computer Tape(s) _____ a Other (Specify) _____	
11. File is Used D Daily • Weekly * ^ Monthly			12. File Becomes Inactive After INDEFINITE Number D Month(s) ^ Year(s)		
13. Current Location(s) (Bldg. Floor, Room) FIRE HEADQUARTERS INVESTIGATION			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) j B No a Yes		
15. Access Restrictions j If Yes a No (If yes, cite law(s) & regulations)			16. Audit Requirements ^ None • State • Federal • Independent		
17. Is an index system used? (If yes explain briefly and describe any hardware/software.) a Yes j No			18. Recommended Retention DESTROY INDEFINITE 5 YEARS AFTER HIRING DATE		
19. Name and Title of Preparer TIMOTHY B. McDOWELL INVESTIGATION					
20. Telephone Number 410-271-7975				21. Date 8-26-96	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		CITY OF ANNAPOLIS Records Management Program		RECORDS INVENTORY PAGE _____ OF _____	
1. Department <i>Fire</i>		2. Division <i>Fire MARSHAL</i>		3. Unit <i>INVESTIGATION SECTION</i>	
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 <i>BACKGROUND FILES          PAST EMPLOYEES</i>				5. Earliest Year/Latest Year <i>1976 to 1996</i>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <i>BACKGROUND RECORDS FOR PAST EMPLOYEES INCLUDING, CREDIT CHECKS, HOUSING INFORMATION, MOTOR VEHICLE CHECKS, CRIMINAL HISTORY, MILITARY HISTORY, AND PERSONAL HISTORY STATEMENTS.</i>					
7. Record Series Format(s) <input checked="" type="checkbox"/> X Letter Size <input type="checkbox"/> G Micro Film <input type="checkbox"/> Legal Size <input type="checkbox"/> a Computer Tape <input type="checkbox"/> O Bound Book <input type="checkbox"/> • Floppy Disk <input type="checkbox"/> • Audio Tape <input type="checkbox"/> • Video Tape <input type="checkbox"/> a Other (Specify) _____		8. Record Series Sequence <input checked="" type="checkbox"/> (^) Alphabetical <input type="checkbox"/> • Numerical <input type="checkbox"/> D Chronological <input type="checkbox"/> O Geographical <input type="checkbox"/> D Other (Specify) _____		9. Volume Number <input checked="" type="checkbox"/> File Drawers <i>1</i> <input type="checkbox"/> • Microfilm Reel(s) _____ <input type="checkbox"/> D Computer Tape(s) _____ <input type="checkbox"/> • Other (Specify) _____	
				10. Annual Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <i>1</i> <input type="checkbox"/> D Microfilm Reel(s) _____ <input type="checkbox"/> • Computer Tape(s) _____ <input type="checkbox"/> a Other (Specify) _____	
11. File is Used <input type="checkbox"/> a Daily <input type="checkbox"/> • Weekly <input checked="" type="checkbox"/> ^ Monthly			12. File Becomes Inactive After <input checked="" type="checkbox"/> AOTV <input type="checkbox"/> itz- _____ o Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg. Floor, Room) <i>FIRE HEADQUARTERS          INVESTIGATION</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) <input checked="" type="checkbox"/> J No <input type="checkbox"/> D Yes		
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> D No (If yes, cite law(s) & regulations)			16. Audit Requirements <input checked="" type="checkbox"/> None <input type="checkbox"/> a State <input type="checkbox"/> O Federal <input type="checkbox"/> • Independent		
17. Is an index system used? (If yes explain briefly and describe any hardware/software.) <input type="checkbox"/> Q Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <i>INDEFINITE          DESTROY</i>		
19. Name and Title of Preparer <i>TIMOTHY B. MITCHELL, ICUES 7XGA i-Z&gt;R</i>					
20. Telephone Number <i>H10 - ZL&gt; "5 - "W *? ^</i>				21. Date <i>8-01-96</i>	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		CITY OF ANNAPOLIS Records Management Program		RECORDS INVENTORY PAGE _____ OF _____	
1. Department FIRE		2. Division FIRE MARSHALS		3. Unit INVESTIGATION SECTION	
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 BACKLOG & JTD FILES FIREFIGHTER APPLICANTS				5. Earliest Year/Latest Year 1995 to 1996	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) CREDIT CHECKS, LICENSE INFORMATION, MOTOR VEHICLE CHECKS, CRIMINAL HISTORY, MILITARY HISTORY, AND PERSONAL HISTORY STATEMENT					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> Micro Film <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 type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		9. Volume Number <input 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) <u>U</u> <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 type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After <del>INDEFINITE</del> <input type="checkbox"/> Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg. Floor, Room) FIRE HEADQUARTER INVESTIGATION			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
15. Access Restrictions <input type="checkbox"/> Notes <input type="checkbox"/> No (If yes, cite law(s) & regulations)			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 5 YRS AFTER HIRING INDEFINITE IF HIRED DATE OF HIRING LIST IF NOT HIRED IN 6 MONTHS CE LISTING LIST THEN DESTROY		
19. Name and Title of Preparer TERRY McDOUGHER INVESTIGATOR					
20. Telephone Number 410-263-7975				21. Date 8-1-96	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		CITY OF ANNAPOLIS Records Management Program		RECORDS INVENTORY PAGE _____ OF _____	
1. Department <i>Fire</i>		2. Division <i>FIRE MARSHAL</i>		3. Unit <i>INVESTIGATION SECTION</i>	
<b>DEFINITION - RECORD SERIES</b> - 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 <i>BACKGROUND FILES - VOLUNTEER PERSONNEL</i>				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.) <i>BACKGROUND RECORDS FOR VOLUNTEER PERSONNEL CREDIT CHECKS, LICENSING INFORMATION, MOTOR VEHICLE CHECKS, CRIMINAL HISTORY, MILITARY HISTORY.</i>					
7. Record Series Format(s) <input type="checkbox"/> Letter Size <input type="checkbox"/> D Micro Film <input type="checkbox"/> G 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 checked="" type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		9. Volume Number <input checked="" type="checkbox"/> File Drawee(s) <i>1</i> <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) <i>1</i> <input type="checkbox"/> D Microfilm Reel(s) _____ <input type="checkbox"/> a Computer Tape(s) _____ <input type="checkbox"/> a Other (Specify) _____	
11. File is Used <input type="checkbox"/> Daily <input type="checkbox"/> Weekly * <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After <i>INDEXED</i> <sup>123</sup> <sub>3</sub> <sup>12</sup> a Month(s) <input checked="" type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg. Floor, Room) <i>FIRE HEADQUARTERS INVESTIGATION</i>			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) & regulations)			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 <i>FIVE YEARS AFTER VOLUNTEER IS ACCEPTED INTO PROGRAMS THEN DESTROY</i>		
19. Name and Title of Preparer <i>TIMOTHY McDowell INVESTIGATOR</i>					
20. Telephone Number <i>410 263-7975</i>				21. Date <i>10-1-86</i>	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		<b>CITY OF ANNAPOLIS</b> Records Management Program		<b>RECORDS INVENTORY</b>	
				PAGE _____ OF _____	
1. Department <u>FIRE</u>		2. Division <u>FIRE MARSHAL</u>		3. Unit <u>INVESTIGATION SECTION</u>	
<b>DEFINITION - RECORD SERIES</b> - 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 <u>INVESTIGATION FILES</u>				5. Earliest Year/Latest Year <u>1780</u> to <u>1990</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.) <u>WITNESS STATEMENTS, PHOTOS, INVESTIGATION REPORTS AND ANY OTHER DOCUMENTS PERTINENT TO THE INVESTIGATION</u>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Micro Film <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) <u>PHOTOS</u>		8. Record Series Sequence <input type="checkbox"/> Alphabetical <input type="checkbox"/> Numerical <input type="checkbox"/> Chronological <input type="checkbox"/> Geographical <input type="checkbox"/> Other (Specify) _____		9. Volume Number K File Drawees) <u>4</u> Q Microfilm Reel(s) _____ n Computer Tape(s) _____ D Other (Specify) <u>BOXES</u> <u>NUMEROUS</u>	
				10. Annual Accumulation Number <input checked="" type="checkbox"/> File Drawer(s) <u>1</u> <input type="checkbox"/> Microfilm Reel(s) _____ <input type="checkbox"/> Computer Tape(s) _____ <input type="checkbox"/> Other (Specify) _____	
11. File is Used <input checked="" type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly			12. File Becomes Inactive After <u>INDEFINITE</u> _____ D Month(s) <input checked="" type="checkbox"/> Year(s) Number <u>0000</u>		
13. Current Location(s) (Bldg. Floor, Room) <u>FIRE 1 (HEADQUARTERS)</u> <u>INVESTIGATIONS + STORAGE</u>			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
15. Access Restrictions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If yes, cite law(s) & regulations)			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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			18. Recommended Retention <u>25 YEARS</u> <u>INDEFINITE</u>		
19. Name and Title of Preparer <u>TIMOTHY McDOUGLE, INVESTIGATOR</u>					
20. Telephone Number <u>410 263-7975</u>				21. Date <u>10-1-96</u>	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		<b>CITY OF ANNAPOLIS</b> Records Management Program		<b>RECORDS INVENTORY</b> PAGE _____ OF _____	
1. Department <b>FIRE</b>		2. Division <b>FIRE MARSHAL'S</b> <b>f/lfc V fe + J V r o n / I N V E S T</b>		3. Unit <b>PRE INVESTIGATION</b> <b>FIRE INSPECTION.</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.					
4. Record Series Title <b>COMPLAINT FILE</b>				5. Earliest Year/Latest Year <b>1987 to 1996</b>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series, <i>ft J^ Ctm+pUH rJ^S r- ft</i> <b>ABOUT ANY SUBJECT - TENANT ABOUT PROPERTY OWNER - OWNER ABOUT TENANT - PUBLIC ABOUT ANYTHING</b>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size    a Micro Film <input checked="" type="checkbox"/> Legal Size    • Computer Tape <input type="checkbox"/> Bound Book    • Floppy Disk <input type="checkbox"/> Audio Tape    a Video Tape <input type="checkbox"/> Other (Specify) _____		8. Record Series Sequence • Alphabetical a Numerical • Chronological • Geographical a Other (Specify) <b>A-Z</b> <b>SPECIFIC ORDER</b>		9. Volume Number • File Drawer(s) <b>2</b> • Microfilm Reel(s) _____ n Computer Tape(s) _____ a Other (Specify) _____	
				10. Annual Accumulation <b>PER YEAR</b> Number <input checked="" type="checkbox"/> File Drawer(s) <b>2</b> D Microfilm Reel(s) _____ D Computer Tape(s) _____ D Other (Specify) _____	
11. File is Used a Daily    • Weekly <input checked="" type="checkbox"/> • Monthly			12. File Becomes Inactive After    Ot /0 (<1MO CO /O _____ a Month(s)    • Year(s) Number		
13. Current Location(s) (Bldg. Floor, Room) <b>FOREST DR. FIRE ROOM</b>			14. Is Record Series Duplicated Elsewhere? (If yes, specify office) <input type="checkbox"/> No    • Yes		
15. Access Restrictions    a Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) & regulations)			16. Audit Requirements <input checked="" type="checkbox"/> None    • State    a Federal    • Independent		
17. Is an index system used? (If yes explain briefly and describe any hardware/software.) a Yes <input checked="" type="checkbox"/> No			18. Recommended Retention <b>THIS IS THE AREA DIRECTION IS BEING REVIEWED. CONCLUSION REQUESTED! DESTROY AFTER COMPLAINT IS RESOLVED</b>		
19. Name and Title of Preparer <b>Q^JS)IXsf&lt;E&gt; LEE ELLIS / BAYDALLIO &lt;K&gt; CHIEF SOLYEL</b>					
20/Telephone Number <b>(410) 263-2925 FAX (410) 268-1846</b>				21. Date <b>07/30/96.</b>	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		<b>CITY OF ANNAPOLIS</b> Records Management Program		<b>RECORDS INVENTORY</b> PAGE _____ OF _____	
1. Department <b>FIRE</b>		2. Division <b>FIRE MARSHAL</b>		3. Unit <b>PREVENTION</b>	
<b>DEFINITION - RECORD SERIES</b> - 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 <b>BURNING PERMIT</b>				5. Earliest Year/Latest Year <b>1975 - to 1998</b>	
6. Record Series Description (Briefly describe the types of information/documents/forms found in the series. Include the purpose or function of the series.) <b>NY Q P (E^O £-UU* \ ^ CLS ED TO BURN ANY Pitstiffil, U) WITHIN CITY LIMITS MUST BE GIVEN BURNING PERMIT</b>					
7. Record Series Format(s) <input checked="" type="checkbox"/> Letter Size <input type="checkbox"/> Micro Film <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 checked="" type="checkbox"/> Alphabetical <input 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) _____	
				10. Annual Accumulation <b>100</b> <input type="checkbox"/> File Drawees) <b>1</b> <input type="checkbox"/> Microfilm Reel(s) _____ <input type="checkbox"/> Computer Tape(s) _____ <input type="checkbox"/> Other (Specify) _____	
11. File is Used <b>ON AN AS NEEDED BASIS</b> <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input checked="" type="checkbox"/> Monthly			12. File Becomes Inactive After <b>?</b> _____ <input type="checkbox"/> Month(s) <input type="checkbox"/> Year(s)		
13. Current Location(s) (Bldg. Floor, Room) <b>FOREST DC £/£ ROOM</b>			14. Is Record Series Duplicated Elsewhere? (If yes, specify-office) <input checked="" type="checkbox"/> No <b>YES CITY BOOK E: ? Pr</b>		
15. Access Restrictions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, cite law(s) & regulations)			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 checked="" type="checkbox"/> Yes <b>no</b>			18. Recommended Retention <b>FOR DURATION OF PERMIT EFFECTIVE DATE TO EXPIRATION DATE! 1 YEAR AFTER PERMIT EXPIRATION!</b>		
19. Name and Title of Preparer <b>GEORGE LEE ELLIS / BATTALION CHIEF</b>					
20. Telephone Number <b>(410) 263-777r&amp;w1&lt;HO268/846</b>				Date <b>07/31/96</b>	

<b>Instructions</b> - Prepare a separate form for each new or revised record series.		<b>CITY OF ANNAPOLIS</b> Records Management Program		<b>RECORDS INVENTORY</b>	
				PAGE _____ OF _____	
<b>1. Department</b> FIRE		<b>2. Division</b> FIRE MARSHAL'S		<b>3. Unit</b> PREVENTION.	
<b>DEFINITION - RECORD SERIES</b> - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.					
<b>4. Record Series Title</b> STREET RICE				<b>5. Earliest Year/Latest Year</b> 1967 to 1996	
<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.) INSPECTABLE BUILDINGS BY STREET ADDRESS - ANY AND ALL INFORMATION EXCEPT PLANS. DEFINITION OF INDERINATE? OR INACTIVE?					
<b>7. Record Series Format(s)</b> <ul style="list-style-type: none"> <li>Letter Size</li> <li>Legal Size</li> <li>Bound Book</li> <li>Audio Tape</li> <li>Other (Specify)</li> </ul>		<b>8. Record Series Sequence</b> <input checked="" type="checkbox"/> Alphabetical <input checked="" type="checkbox"/> Numerical <ul style="list-style-type: none"> <li>Chronological</li> <li>Geographical</li> <li>Other (Specify)</li> </ul>		<b>9. Volume</b> 9 FILE CABINETS Number <ul style="list-style-type: none"> <li>File Drawees) 36</li> <li>Microfilm Reel(s)</li> <li>Computer Tape(s)</li> <li>Other (Specify)</li> </ul>	
				<b>10. Annual Accumulation</b> Number <ul style="list-style-type: none"> <li>File Drawees) 1</li> <li>Microfilm Reel(s)</li> <li>Computer Tape(s)</li> <li>Other (Specify)</li> </ul>	
MOVE INTO take a look at AA Co. approved schedule		<b>12. File Becomes Inactive After</b> 6051EU U) WHEN ENGLISHED. _____ n Month(s) <input type="checkbox"/> Year(s) ?			
		<b>14. Is Record Series Duplicated Elsewhere?</b> (If yes, specify office) <input checked="" type="checkbox"/> No • Yes			
		<b>16. Audit Requirements</b> <input checked="" type="checkbox"/> None <input type="checkbox"/> State • Federal • Independent			
<b>17. Is an index system used?</b> (If yes explain briefly and describe an hardware/software.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>18. Recommended Retention</b> THIS OFFICE IS COMPLETELY OUT OF FILE STORAGE SPACE BUT MOST BLDGS REMAIN FOR A LONG TIME! LESS FILES OR MORE SPACE!			
<b>19. Name and Title of Preparer</b> GEORGE LEE ELIS / BATTALION CHIEF.					
<b>20. Telephone Number</b> (410) 2-2995 I fa O ? j & 8-1FPk MI*				<b>21. Date</b> 07/30/96.	