Complete ONE FORM for each group or set of records (also known as a record series) created or received by a program or unit. All records and data, regardless of format, should be inventoried by the records custodian. Please be as detailed as possible.

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| **SECTION 1: GENERAL INFORMATION** |
| 1. Department/Division:  | 2. Branch/Section:       |
| 3. Name and Title of Person Preparing this Form:      Date:       E-mail:       Phone:        | 4. Name of Department Records Officer:       |
| 5. Common title of group or set of records (series)/include form numbers:       |
| 6. Are the records created by? [ ]  above agency [ ]  another agency (specify)       |
| 7. Records are: [ ]  originals [ ]  duplicates. Originals are located at:       |
| 8. What information do these records contain? Do they contain personally identifiable information?       | 9. For what purpose were these records created?      |
| 10. Are these records (including related business systems) considered critical/essential to your mission?  | [ ]  Yes[ ]  No | If yes, are these records listed in your Continuity of Operation Plan (COOP)? [ ]  Yes [ ]  No [ ]  Don’t know |

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| 11. What is the activity level on these records? | [ ]   | Active (Accessed frequently: daily or weekly)/ Volume:       |
| [ ]  | Semi-Active (Accessed as needed: monthly or less often)/ Volume:       |
| [ ]  | Inactive (Rarely accessed, requested or needed)/Volume:       |
| 12. Users of these records are: | [ ]  Staff | [ ]  Other state agencies | [ ]  Federal government | [ ]  Public  |
| 13. When are records closed out and become inactive? *Example: biannually, annually, monthly, quarterly or daily.*      |

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| 14. Inclusive dates for series:From:       To:       | 15. Format(s) -- *Check all that apply*[ ]  Paper; [ ]  Microfilm; [ ]  Databases/Systems; [ ]  PDF/Word/Etc.; [ ]  Other, please describe:       | 16. Present Volume (Paper and Electronic)      Cubic Feet (Boxes) and  Date range:      Volume chart to determine cubic feet: Letter/Legal size file drawer = 1.5/2.0 cubic feet Letter/Legal 36” long shelf unit = 2.4/3.0 cubic feet      MB or       GB (Electronic) and Date range:       |
| 17. Annual Accumulation       Cubic Feet (Boxes)      MB or       GB (Electronic) | 18. Records Arrangement[ ]  Alphabetical [ ]  Geographical [ ]  Chronological [ ]  NumericalBy:       |
| 19. Physical location(s) of records (Building, City). If series includes electronic records, please indicate whether or not Information and Communications Services Division (ICSD) hosts your agency’s records.       |
| 20. Are there other public agencies that create similar or related records? Can the same information be found elsewhere? If yes, please explain:       |

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| **SECTION 2: COMPLIANCE AND LEGAL REQUIREMENTS** |
| Are the records in this series subject to: |
| 1. Legal or regulatory requirements? | [ ]  Yes[ ]  No | If yes, cite the law(s):      List the requirements:       |
| 2. Specific retention requirements established by law or administrative need? | [ ]  Yes[ ]  No | If yes, how long should the records be kept and why:       |
| 3. Audit or other independent review? | [ ]  Yes [ ]  No | If yes, by whom:      When are the audits conducted?       |
| 4. Exemptions to public use and inspection under State or Federal law? | [ ]  Yes [ ]  No | If yes, please cite law(s):       How are records protected from unauthorized access or disclosure?       |
| 5. External concern or dispute resolution (now or in the foreseeable future)? | [ ]  Yes [ ]  No | If yes, please explain:       |
| 6. Current litigation, examination for discovery or an active public records request? | [ ]  Yes [ ]  No | If yes, please explain:       |
| **SECTION 3: RETENTION RECOMMENDATIONS** |
| Based on record use, I prefer inactive files to be: |
| [ ]  Destroyed when no longer useful.[ ]  Kept in office permanently. | [ ]  Kept in office for       years, then: [ ]  Transferred to storage and destroy after       years. [ ]  Transferred to Archives for permanent retention. [ ]  Destroyed in-house. |

Instructions:

**SECTION 1: GENERAL INFORMATION**

1 and 2. Identify the department, division, and branch/section of the records custodian whose records are being inventoried.

3 and 4. Identify the name, title and phone number of the records custodian, the employee best informed about the purpose of the records series. Identify the Name of Program/Unit Records Officer or Liaison.

5. Identify the records by a specific and descriptive records series title (e.g., Partnership Annual Statements). Do not use vague terms such as “Reports” or “Miscellaneous.” State the inclusive dates (earliest and latest dates) of the records series. If the records are still being created, write “Present” as the end date.

6. Identify creator of the records.

7. Are these originals or duplicates? If the records are duplicates, who maintains the originals?

8. Describe file contents: Identify the information maintained. If specific forms are involved, state the form names and numbers. As an example, a loan application file series may contain the original loan application, copies of income statements, and the report of the loan officer. Do the files contain personally identifiable information? Please list types (examples: social security numbers, medical records, financial records).

9. Purpose of the records series; who refers to the records: Why are these records maintained? As an example, for a client case file, the purpose may be to document the client’s eligibility to receive program benefits. Agency personnel and federal auditors may use the records.

10. Determine if the records are critical or essential to your mission.

11. Identify the activity level on these records. Check all that apply and list volume in cubic feet or MB or GB if electronic.

12. Identify users of these records. Check all that apply.

13. Determine when the file is closed and considered inactive. List the event the triggers closure/inactivity such as: final payment of loan; settlement of case.

14. List date range for the entire series.

15. Identify formats of this record series. Check all that apply.

16. Estimate record volume in cubic feet: State volume in office and in any storage areas. Identify the beginning and ending dates of the records.

17. Identify the annual accumulation of the records series in cubic feet and/or MB/GB for electronic records.

18. Identify the file arrangement of the records series and list category. Examples: [x] Alphabetical by: Surname.

 [x] Geographically by: Street name.

19. Identify physical location of the records. Include all formats of this record series. Examples: paper records in Kekauluohi Building, 364 S. King Street and private storage at \_\_\_\_\_\_\_\_\_\_\_\_. Electronic records in server hosted by ICSD in Kalanimoku Building.

20. Identify similar or related records and whether the information in this record series can be found elsewhere.

**SECTION 2: COMPLIANCE AND LEGAL REQUIREMENTS**

1. Laws, regulations, about use and/or retention of files: Cite applicable State and Federal laws and rules. If there are no legal requirements, write “none.”

2.

3. Are these records subject to regular Federal and / or State fiscal audits? If yes, when were they most recently audited?

4. Are the records exempted from disclosure? Cite laws and describe how your office protects the records from unauthorized access or disclosure.

5. Identify external concerns or dispute resolutions affecting these records.

6. Identify current litigation or examination for discovery or an active public records request.

**SECTION 3: RETENTION RECOMMENDATIONS**

As the record custodian, what is your recommended retention period? Please provide justification to support the recommendation.