
MEMORANDUM

TO: Kelly Cooper; Assembly President
Kenai Peninsula Borough Assembly Members

THRU: Johni Blankenship, Borough Clerk (JB)

FROM: Michele Turner, Deputy Clerk/Records Manager (MT)

DATE: January 7, 2020

RE: Resolution 2020-005: Authorizing a Quarterly Update to the Borough Records Retention Schedule (Cooper at the Request of the Borough Clerk)

Attached are additional retention schedule revision requests for your consideration.

Thank you.

KPB RECORDS RETENTION SCHEDULE REVISION REQUEST

Is request for a New Record Series Number? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> NO (If no, provide record series number you wish to revise)	Record Series Number: <p style="text-align: center; font-size: 1.2em;">ADP-04</p>
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Years Retained: <input type="checkbox"/> Office <input type="checkbox"/> Record Center <input checked="" type="checkbox"/> Total	Media: <input type="checkbox"/> (A) Audio Tapes <input type="checkbox"/> (P) Paper <input type="checkbox"/> (V) Video Tapes <input type="checkbox"/> (F) Film <input type="checkbox"/> (M) Microfiche <input checked="" type="checkbox"/> (E) Electronic
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Department of Record: <p style="text-align: center; font-size: 1.2em;">Information Technology</p>	Record Title: <p style="text-align: center; font-size: 1.2em;">Security Recordings</p>
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Description:
Consists of surveillance video and digital recordings created to monitor activities occurring both within and outside of borough facilities.


C = Approximately 30 days, unless a legal or evidentiary value has been determined; subject to subpoena or other court order; or it has been determined that the recordings capture information related to criminal activity, some type of accident or security risk. These identified segments must be moved to long-term storage and retained until the legal action is completed.

Requested by: Michele Turner, Records Manager Date: 12/17/19

DEPARTMENT DIRECTOR/MANAGER USE ONLY

<input checked="" type="checkbox"/> Approved (Departmental needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Director/Manager Name: <p style="text-align: center; font-size: 1.2em;">Ben Hanson</p> <p style="text-align: center; font-size: 0.8em;">(Print Name)</p>
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Comments:

Signature:  Date: 1/6/2020

BOROUGH ATTORNEY USE ONLY

<input checked="" type="checkbox"/> Approved (Legal needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Borough Attorney: <p style="text-align: center; font-size: 1.2em;">Sean Kelley, Deputy Borough Attorney</p> <p style="text-align: center; font-size: 0.8em;">(Print Name)</p>
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Comments:

Signature:  Date: 1/7/2020

RECORDS MANAGEMENT USE ONLY

<input type="checkbox"/> Resolution Number <input type="checkbox"/> Date Approved by Assembly	<input type="checkbox"/> Records Management Software Updated <input type="checkbox"/> Revised Retention Schedule Distributed
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Comments: Amend schedule to include this record type. Used SOA General Admin Schedule 100.3 as retention model.	Records Manager: <p style="text-align: center; font-size: 1.2em;">Michele Turner</p> <p style="text-align: center; font-size: 0.8em;">(Print Name)</p>
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Signature: _____ Date: _____

KPB RECORDS RETENTION SCHEDULE REVISION REQUEST

Is request for a New Record Series Number? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> NO (If no, provide record series number you wish to revise)	Record Series Number: <p style="text-align: center; margin-left: 100px;">PLN-24</p>
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Years Retained: <input checked="" type="checkbox"/> Office <input type="checkbox"/> PERM Record Center <input type="checkbox"/> PERM Total	Media: <input type="checkbox"/> (A) Audio Tapes <input checked="" type="checkbox"/> (P) Paper <input type="checkbox"/> (V) Video Tapes <input type="checkbox"/> (F) Film <input type="checkbox"/> (M) Microfiche <input checked="" type="checkbox"/> (E) Electronic
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Department of Record: <p style="text-align: center; margin-left: 100px;">Planning Department</p>	Record Title: <p style="text-align: center; margin-left: 100px;">Code Compliance Files</p>
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Description:

Records documenting compliance with code requirements such as roads, conditional use permits, and land management. May include copies of applications for authorization to perform work, requests for preliminary determinations, complaints, notices of violations, enforcement notices, warning notices, plans/maps, stipulated agreements, correspondence and memoranda.

C = when administrative need has been met.

Requested by: Michele Turner, Records Manager Date: 12/17/19

DEPARTMENT DIRECTOR/MANAGER USE ONLY

<input checked="" type="checkbox"/> Approved (Departmental needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Director/Manager Name: <p style="text-align: center; margin-left: 100px;">Max Best</p> <p style="text-align: center; margin-left: 100px;"><small>(Print Name)</small></p>
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Comments:

Signature: *Max Best* Date: 1-6-2020

BOROUGH ATTORNEY USE ONLY

<input checked="" type="checkbox"/> Approved (Legal needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Borough Attorney: <p style="text-align: center; margin-left: 100px;"><u>Sean Kelley, Deputy Borough Attorney</u></p> <p style="text-align: center; margin-left: 100px;"><small>(Print Name)</small></p>
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Comments:

Signature: *SJK* Date: 1/7/2020

RECORDS MANAGEMENT USE ONLY

Resolution Number _____ Date Approved by Assembly _____	Records Management Software Updated _____ Revised Retention Schedule Distributed _____
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Comments: Adds a new series to the schedule to address code compliance matters.	Records Manager: <p style="text-align: center; margin-left: 100px;">Michele Turner</p> <p style="text-align: center; margin-left: 100px;"><small>(Print Name)</small></p>
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Signature: _____ Date: _____

KPB RECORDS RETENTION SCHEDULE REVISION REQUEST

Is request for a New Record Series Number? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> NO (if no, provide record series number you wish to revise)	Record Series Number: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;">RSK-16</div>
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Years Retained: <input checked="" type="checkbox"/> C+2 Office <input type="checkbox"/> 5 Record Center <input type="checkbox"/> 7 Total	Media: <input checked="" type="checkbox"/> (A) Audio Tapes <input type="checkbox"/> (P) Paper <input type="checkbox"/> (V) Video Tapes <input type="checkbox"/> (F) Film <input type="checkbox"/> (M) Microfiche <input type="checkbox"/> (E) Electronic
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Department of Record: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;">Risk Management</div>	Record Title: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;">PROPERTY CLAIMS</div>
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Description:
Property claims submitted to the Risk Management Department which may include investigation reports, quotes, invoices, photos and related correspondence between departments and contractors.

C = Until claim is settled and all legal aspects are resolved.

Requested by: Michele Turner, Records Manager Date: 01/07/2020

DEPARTMENT DIRECTOR/MANAGER USE ONLY

<input checked="" type="checkbox"/> Approved (Departmental needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Director/Manager Name: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;">Sovala Kisenia</div> <small style="text-align: center;">(Print Name)</small>
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Comments:

Signature: Date: 1-7-20

BOROUGH ATTORNEY USE ONLY

<input checked="" type="checkbox"/> Approved (Legal needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Borough Attorney: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;"><u>Sean Kelley, Deputy Borough Attorney</u></div> <small style="text-align: center;">(Print Name)</small>
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Comments:

Signature: Date: 1/7/2020

RECORDS MANAGEMENT USE ONLY

<input type="checkbox"/> Resolution Number <input type="checkbox"/> Date Approved by Assembly	<input type="checkbox"/> Records Management Software Updated <input type="checkbox"/> Revised Retention Schedule Distributed
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Comments: Create a new record series to capture property claims.	Records Manager: <div style="text-align: center; border-bottom: 1px solid black; width: 150px; margin: 0 auto;">Michele Turner</div> <small style="text-align: center;">(Print Name)</small>
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Signature: _____ Date: _____

KPB RECORDS RETENTION SCHEDULE REVISION REQUEST

Is request for a New Record Series Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO (If no, provide record series number you wish to revise)	Record Series Number: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;">RSK-05</div>
Years Retained: <input type="checkbox"/> C+5 Office <input type="checkbox"/> 35 Record Center <input type="checkbox"/> 40 Total	Media: <input type="checkbox"/> (A) Audio Tapes <input checked="" type="checkbox"/> (P) Paper <input type="checkbox"/> (V) Video Tapes <input type="checkbox"/> (F) Film <input type="checkbox"/> (M) Microfiche <input type="checkbox"/> (E) Electronic
Department of Record: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;">Risk Management</div>	Record Title: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;">WORKERS' COMPENSATION CLAIMS</div>
Description: May include time loss, no time loss, permanent total disability, and fatality [CASES]claims. Reports of injury, medical reports, correspondence, release agreements, vocational rehabilitation reports/decisions. Second Injury Fund reimbursements. C = Until [CASE]claim is inactive and all legal aspects are resolved.	
Requested by: <u>Michele Turner, Records Manager</u> Date: <u>01/07/2020</u>	
DEPARTMENT DIRECTOR/MANAGER USE ONLY	
<input checked="" type="checkbox"/> Approved (Departmental needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Director/Manager Name: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;">Sovala Kisena</div> <small style="text-align: center;">(Print Name)</small>
Comments:	
Signature: <u></u> Date: <u>1.7.20</u>	
BOROUGH ATTORNEY USE ONLY	
<input checked="" type="checkbox"/> Approved (Legal needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Borough Attorney: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;"><u>Sean Kelley, Deputy Borough Attorney</u></div> <small style="text-align: center;">(Print Name)</small>
Comments:	
Signature: <u></u> Date: <u>1/7/2020</u>	
RECORDS MANAGEMENT USE ONLY	
<input type="checkbox"/> Resolution Number <input type="checkbox"/> Date Approved by Assembly	<input type="checkbox"/> Records Management Software Updated <input type="checkbox"/> Revised Retention Schedule Distributed
Comments: Update Description and Retention Condition (C =).	Records Manager: <div style="text-align: center; border-bottom: 1px solid black; padding: 2px;">Michele Turner</div> <small style="text-align: center;">(Print Name)</small>
Signature: _____ Date: _____	

KPB RECORDS RETENTION SCHEDULE REVISION REQUEST

Is request for a New Record Series Number? Yes _____ <input checked="" type="checkbox"/> NO (If no, provide record series number you wish to revise)	Record Series Number: <p style="text-align: center; margin-left: 100px;"><u>RSK-02</u></p>
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Years Retained: C+2 Office _____ 5 Record Center _____ 7 Total _____	Media: _____ (A) Audio Tapes <input checked="" type="checkbox"/> (P) Paper _____ (V) Video Tapes _____ (F) Film _____ (M) Microfiche _____ (E) Electronic
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Department of Record: <p style="text-align: center; margin-left: 100px;"><u>Risk Management</u></p>	Record Title: <p style="text-align: center; margin-left: 100px;"><u>[RISK MANAGEMENT] LIABILITY CLAIMS</u> <u>[FILES]</u></p>
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Description: (No Changes.)

C = Until claim is settled and all legal aspects are resolved.

Requested by: Michele Turner, Records Manager Date: 01/07/2020

DEPARTMENT DIRECTOR/MANAGER USE ONLY

<input checked="" type="checkbox"/> Approved (Departmental needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Director/Manager Name: <p style="text-align: center; margin-left: 100px;"><u>Sovala Kisena</u> <small>(Print Name)</small></p>
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Comments:

Signature: Date: 1-7-20

BOROUGH ATTORNEY USE ONLY

<input checked="" type="checkbox"/> Approved (Legal needs are met) <input type="checkbox"/> Denied <input type="checkbox"/> Insufficient Retention <input type="checkbox"/> Excessive Retention	Borough Attorney: <p style="text-align: center; margin-left: 100px;"><u>Sean Kelley, Deputy Borough Attorney</u> <small>(Print Name)</small></p>
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Comments:

Signature: Date: 1/7/2020

RECORDS MANAGEMENT USE ONLY

_____ Resolution Number _____ Date Approved by Assembly	_____ Records Management Software Updated _____ Revised Retention Schedule Distributed
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Comments: Update Record Title and Retention Condition (C =).	Records Manager: <p style="text-align: center; margin-left: 100px;"><u>Michele Turner</u> <small>(Print Name)</small></p>
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Signature: _____ Date: _____