DIGITAL IMAGING SYSTEM DOCUMENTATION FORM To be sent to the Marion County Clerks Office.

NEW SYSTEM

System Documentation		
NAME:	Department:	
DATE:	Phone number	
Narrative description of imaging system:		
This is documentation that comes with the system, by manufacturer.		
Date of Install:		

Using the Oregon Administrative Rules **Chapter 166** Retention Schedule list of **original** records being stored:

Header label to be used: TIFF: JPEG: Other:

Describe how access to digital images of records will be maintained if the life expectancy of the system is less than the retention of the records it stores:

EXISTING SYSTEM		
STSTEM	Annual inspections:	
	Name of inspector:	
	Date of Inspection:	
	Visual examination of housing:	Good: Bad:
		Remedy:
	Retrieval & or Play back :	Good: Bad:
		Remedy:
	Public records with a scheduled retention period of less than 100 years:	Disks copied every 10 years until retentions period has been satisfied.
	Public records with a scheduled retention period of more than 100 years:	Disks copied every 10 years until retentions period has been satisfied. Plus original records retained in hard copy or on microfilm for the entire
		scheduled retention