

RECORDS DISPOSITION AUTHORIZATION

Connecticut Towns, Municipalities, and Boards of Education

Form RC-075 (Revised 01/2010)



STATE OF CONNECTICUT

Connecticut State Library

Office of the Public Records Administrator

231 Capitol Avenue, Hartford, CT 06106

www.cslib.org/publicrecords

INSTRUCTIONS:

1. Use this form to obtain approval for disposition (destruction or transfer) of public records pursuant to CGS §7-109.
2. If this form is used for educational records, please ensure that the Superintendent of Schools reviews and signs the form.
3. If necessary, use additional forms. Each form must be signed. Please fill-out the form completely and legibly and submit to the above-listed address **at least 20 days prior** to the proposed date of disposition.
4. **Volume of Records:** Letter-size drawer = 1.54 cubic ft. / Legal-size drawer = 2.0 cubic ft. / Record carton (standard banker's box) = 1.0 cubic ft
5. After receiving approval, the original signed form must be retained in the Office of the Town Clerk. The originator of this form (custodian of the record) may keep a duplicate copy. Records that cannot be destroyed have been so noted.

LOCAL GOVERNMENT ENTITY:				DATE:	
CUSTODIAN OF RECORDS:				PHONE:	
ADDRESS (form will be returned to this address):					
I hereby certify that the records listed below have met the retention requirements established by the Office of the Public Records Administrator in the form of approved records retention schedules. No records listed, in our opinion, pertain to any pending case, claim, or action.					
GOVERNMENT AUTHORIZATION	CUSTODIAN OF RECORD (type or print):		SIGNATURE (Custodian of Record):		DATE:
	HEAD OF MUNICIPALITY (type or print):		SIGNATURE (Head of Municipality):		DATE:
EDUCATION AUTHORIZATION	SUPERINTENDENT OF SCHOOLS (type or print):		SIGNATURE (Superintendent of Schools):		DATE:
SCHEDULE & SERIES # <small>(e.g., M1-080)</small>	RECORDS SERIES TITLE	INCLUSIVE DATES OF RECORDS		VOLUME OF RECORDS <small>(indicate cubic ft.)</small>	PROPOSED DATE OF DISPOSITION
		FROM	THRU		
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
PUBLIC RECORDS AUTHORIZATION	APPROVED (Public Records Administrator):				DATE:
	APPROVED (State Archivist):				DATE:
PUBLIC RECORDS NOTES:					