## **DEQ Records Management**

**Destruction Authorization** 

To be completed before records are destroyed

**Destruction Date** 

Prog Box # if relevant	Schedule/Series # from current retention schedule	Contents including time frame	Series Title from current retention schedule	Volume of records	Retention from current schedule	Record Officer Approval	Shredding Required
	2008 - 2009 (147)	Clackamas VIR (9/18/16 - 9/30/16)	Vehicle Inspection Reports	2 Boxes	3 yrs		
	2008 - 2009 (147)	Gresham VIR (9/1/16 - 9/30/16)	Vehicle Inspection Reports	2 Boxes	3 yrs		
	2008 - 2009 (147)	Medford VIR (9/1/16 - 9/30/16)	Vehicle Inspection Reports	1 Box	3 yrs		
	2008 - 2009 (147)	Northeast VIR (9/1/16 - 9/30/16)	Vehicle Inspection Reports	1 Box	3 yrs		
	2008 - 2009 (147)	Scappoose VIR (8/5/16 - 8/27/16)	Vehicle Inspection Reports	1 Box	3 yrs		
	2008 - 2009 (147)	Sherwood VIR (9/1/16 - 9/30/16)	Vehicle Inspection Reports	1 Box	3 yrs		
	2008 - 2009 (147)	Sunset VIR (9/6/19 - 9/30/16)	Vehicle Inspection Reports	2 Boxes	3 yrs		
	2008 - 2009 (147)	Tech Center VIR (September 2016)	Vehicle Inspection Reports	1 Box	3 yrs		
Name of staff requesting destruction Program/Division				-	Date		_
Program Manager authorization signature				<del>-</del>	Date		<del>-</del>
Records Officer authorization signature				-	Date		-

I certify that the above-referenced records were destroyed in accordance with ORS 192.105.

Duplicate copies should be destroyed before the official copy but must be destroyed when the official copy is destroyed.

This signed document is the official record and will be retained permanently by the Records Officer

Records Coordinator signature