



SECRETARY OF STATE

ARIZONA STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS

A DIVISION OF THE ARIZONA SECRETARY OF STATE



IMAGING REQUEST FORM
NON-PERMANENT TEN YEARS OR MORE

REQUEST FOR DOCUMENT IMAGING OF PUBLIC RECORDS

AS OF 10/1/2023 THE ARIZONA ARCHIVES AND RECORDS MANAGEMENT WILL ONLY REQUIRE IMAGING FORMS FILLED OUT FOR ITEMS WITH A RETENTION TIME OF TEN YEARS OR MORE

Pursuant to ARS §41-151.16 A, every state, county, or local agency may implement a program for the imaging of records in its custody to a film or digital medium, and classify, catalogue, and index such records for convenient reference or reproduction to the public.

On approval from the director, non-permanent documents may be destroyed after imaging. Per ARS §41-151.15 a. All permanent records are not to be destroyed. The original paper or microfilm record shall be kept for permanent retention by the Applicant or transferred to the State Archives.

The agency or public body [here after referred to as "Applicant"] requests authorization from the Arizona State Library, Archives and Public Records [here after referred to as "LAPR"], in accordance with ARS §41-151.16, to digitize records described on the attached list and agrees to comply with the following conditions and standards:

Please Note that this imaging request will expire after five years and must be re-submitted if the imaging of these documents is ongoing.

Form with fields: Applicant, Records Officer Name, SUBMISSION DATE, Expiration Date

REFER TO THE MINIMUM STANDARDS FOR DIGITAL IMAGING OR SCANNING OF TEXTUAL DOCUMENTS BEFORE COMPLETING THIS FORM. CHECK ALL OF THE CATEGORIES THAT APPLY IN PART 1 AND INITIAL ALL BOXES IN PART 2 OF THIS FORM.



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PART 1: REQUEST FOR APPROVAL

I certify that the items to be imaged are non-permanent with a retention of more than ten years. Records Officer _____
Initials:

1. The format of the official records will be: Paper Digital Microfilm/Microfiche
 2. These digital records can become the official copy and if so, must be kept by the Applicant—and made available to the public—for the period specified on a LAPR-approved records schedule.
 3. The imaged originals may be destroyed after quality of scans are verified.
 4. The Applicant will suspend scheduled destruction of any imaged record subject to any litigation, audit, or investigation.
 5. The Applicant may destroy non-official/use copies of the imaged records before the approved retention period.
 6. The imaging system must have the ability to completely purge/destroy/expunge obsolete records (images).
 7. The imaging project will be performed by: Staff Vendor (Name):
 8. The imaging equipment to be used is:
 9. The imaging software/platform is: Custom/In-house Proprietary (Name):
 10. Is the system open architecture? Yes No
 11. Records will be scanned into the following file format(s):
 TIFF PDF PDF/A
 12. Records will be scanned at the following minimum scan resolution:
 300 dpi 24-bit color 400 dpi Bitonal 600 dpi grayscale 600 dpi 24-bit Color
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ARCHIVES AND RECORDS MANAGEMENT

1901 West Madison Street • Phoenix, Arizona 85009

(602) 926-3720 • records@azlibrary.gov • http://www.azlibrary.gov/arm



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PART 2: GENERAL REQUIREMENTS FOR ALL OPTIONS LISTED ABOVE

The Applicant has read the <i>Minimum Standards for Digital Imaging or Scanning Textual Documents</i> and recognizes that the scanned records covered by this request meet or exceed the minimum standards.	Records Officer initials: _____
Due to costs and long-term commitment of information technology resources, the Applicant certifies they have discussed this scanning project with the CIO/CTO/ IT director, or equivalent, within your agency.	Records Officer initials: _____
The Applicant certifies that the benefits of digitizing these records justifies the costs and is ready to demonstrate that to any concerned party.	Records Officer initials: _____
The Applicant certifies that the images will use the most current versions of scanned output for the file format and that the images will conform to the minimum standards.	Records Officer initials: _____
The Applicant certifies that the digital images will be appropriately indexed for retrieval and retention period based on key data elements in the records (date, name of parties to the records, and other information specific to the particular records series).	Records Officer initials: _____
The Applicant will institute a quality control process that includes inspecting at least 20% of all records to ensure that all information on the scanned version is legible.	Records Officer initials: _____
The Applicant certifies that a migration/exit plan has been developed and will be followed for all records approved under this request.	Records Officer initials: _____
The Applicant has attached the list of record series to be imaged.	Records Officer initials: _____
<i>For State Agencies Only:</i> The Applicant understands that for large or long-term imaging projects, based on cost, they may be required to submit a Project Investment Justification (PIJ) to the Arizona Department of Administration/Arizona Strategic Enterprise Technology (ASET).	Records Officer initials: _____

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PART 3: RECORDS SERIES TO BE IMAGED

- 1. List the Record Series number(s) and title(s) associated with this imaging request using the exact record series name(s) found in the retention schedule database.
2. Enter the retention time of each series
3. Enter the number of documents to be imaged during this project.

Table with 4 columns: Records Series Number, Records Series Title, Retention Time, Estimated Number of Images

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PART 4: AUTHORIZATION

REQUESTOR:

Agency or Political Subdivision:			
Name (Print):	Records Officer or Designee (type or print):		
Signature:			Date:
Phone:	Email:		

ACTION AUTHORIZED

As authorized under ARS §41-151.16, the Arizona State Library, Archives and Public Records authorizes the Applicant to reproduce these records using electronic media following these procedures for a period of five years. Failure to comply with these procedures is a violation of ARS §41-151.16.

AUTHORIZED BY:

Records Analyst (or designee)

Date Approved

Administrator (or designee)

Date Approved

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