



SC Department of Archives & History

REPORT ON RECORDS DAMAGED BY DISASTER

(ARM-20)

<p>Return to SCDAH via:</p> <p>Mail: South Carolina Department of Archives Records Management Division 8301 Parklane Rd Columbia, SC 29223-4905</p> <p>Email: rm@scdah.sc.gov <i>OR</i> Assigned Records Analyst</p> <p>Phone: 803-896-6128</p>	<p>THIS FORM SHOULD BE USED TO DETAIL THE DAMAGE OR DESTRUCTION OF A RECORD BY A NATURAL OR INCIDENTAL DISASTER. COMPLETE ONE FORM PER RECORD SERIES. AN ARM-11 SHOULD ACCOMPANY THIS FORM FOR ANY DESTROYED RECORDS. AGENCY MUST RETAIN A COPY OF THIS FORM UNTIL THE FULL RETENTION IS MET FOR THE DESTROYED RECORDS.</p>
<p>RECORD GROUP NUMBER:</p>	

Part I: Agency Information

1. Agency Name:	
2. Name of Contact:	3. Contact Position:
4. Telephone Number:	5. Contact Email:
6. Contact Signature:	7. Date of form completion:

Part II: Disaster and Record Status

8. Date of Disaster:	9. Location in office affected:
10. Record Series Number:	11. Record Series Title:
12. Retention Period:	13. Inclusive Dates Damaged or Destroyed:
14. Record Value: <input type="checkbox"/> Administrative <input type="checkbox"/> Legal <input type="checkbox"/> Fiscal <input type="checkbox"/> Historical <input type="checkbox"/> Other:	
15. Are these records vital?: <input type="checkbox"/> Yes <input type="checkbox"/> No	16. Are these records active or inactive?: <input type="checkbox"/> Active <input type="checkbox"/> Inactive
17. Record Format(s) (Please check all that apply): <input type="checkbox"/> Paper <input type="checkbox"/> Audio/Visual <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other:	
18. Total Volume Damaged: Cu. Ft. or MB	19. Records Condition: <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Molded <input type="checkbox"/> Dirty <input type="checkbox"/> Torn <input type="checkbox"/> Other:
20. Description of damage and/or disaster:	

Part III: State Archives Acknowledgement

<p><i>This certifies that the State Archives has been made aware of the damage or destruction of the above records, and have been consulted in further handling of any remaining records. The State Archives representative below also confirms that they have reviewed the attached Report on Records Destroyed (ARM-11) for accuracy.</i></p>		
21. Name of Records Management Division Representative:	22. Signature:	23: Date