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CITY OF NEW YORK

DEPARTMENT OF RECORDS AND INFORMATION SERVICES MUNICIPAL RECORDS MANAGEMENT DIVISION

APPLICATION FOR AUTOMATIC DELETION OF RECORDS

То:		
Commissioner, Department of Records and Information Services		
FROM AGENCY:		DATE:
NAME OF PRIMARY CONTACT REGARDING THIS APPLICATION:		TITLE:
EMAIL:	PHONE No.:	

PERMISSION IS REQUIRED TO COMMENCE THE AUTOMATIC DELETION OF RECORDS DESCRIBED IN THIS APPLICATION. THIS APPLICATION COVERS ONLY THE DESCRIBED PROCESS TO AUTOMATICALLY DELETE RECORDS CREATED <u>AFTER</u> THE APPROVAL OF THIS APPLICATION. DISPOSAL OF PREEXISTING RECORDS MUST BE APPROVED BY A SEPARATE APPLICATION FOR RECORDS DISPOSAL. NO RECORDS MAY BE DELETED OR DISPOSED OF UNTIL THE REQUESTING AGENCY HEAD, CORPORATION COUNSEL, AND DEPARTMENT OF RECORDS AND INFORMATION SERVICES COMMISSIONER HAVE SIGNED AND DATED THIS APPLICATION.

Description of Records Subject To Automatic Deletion

Record Title	Number:	Name:	Specify any existing record series applicable to the records that will be subject to automatic deletion
Description of the records to be automatically deleted			E.g., "Location data from vehicle GPS" or "audio recordings of telephone calls received"
How are the records generated or created?			E.g., "automatically uploaded by device or "requests entered by members of the public on [specific website]"
Name and location of the data system(s) on which the records will reside, including any agencies or third-parties with responsibility or ownership.			E.g., "Database on DoITT hosted server", "Cloud Service hosted by [company name] pursuant to contract number: XYZ123"
Primary use of these records, including business units, agencies, and outside entities that regularly request access.			E.g., "litigation support, requested by Law Department", "auditing by Comptroller", "process management by [specific business unit]"

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	Date Range of Records	
Earliest date of the described records.		E.g., when did or will the data system begin collecting records that will be automatically deleted?
Are there plans to purge records that predate approval of automatic deletion? If so, describe the criteria and process to be used to ensure necessary records are preserved until disposal is approved.		This application is only applicable to prospective deletion of records; a separate disposal application must be submitted prior to deleting any preexisting records.
	Reason for Automatic Deletion	
Why is automatic deletion appropriate or necessary for these records?		E.g., "Required by law" with cite to applicable statute or regulation;
		"Storage space constraints", describing the amount of data generated per month or year, and the cost of storage;
		"Records no longer relevant or needed after specified time", including basis for that assertion
	Process for Automatic Deletion	
What criteria will be used to flag records for automatic deletion?		E.g., "All records created more than [n] months ago", "records that have not been accessed in [n] months"
How often will the automatic deletion process occur?		E.g., "Once a day/week/month"
What is the minimum time a record will exist before being flagged for automatic		The minimum number of months a record will exist prior to deletion;
deletion?		THIS NUMBER IS USED TO CALCULATE THE DATE WHEN AUTOMATIC DELETION CAN COMMENCE

Proposed date for automatic deletion to

begin

No automatic deletion can occur prior to the date approved on this application.

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Process For Identifying And P	reserving Necessary Records Prior	To Automatic Deletion
NO PROCESS FOR AUTOMATIC DELETION WILL BE APPE PRESERVATION OF RECORDS NECESSARY TO THE BUSII PROCESS DESCRIBED, AND TO NOTIFY BOTH DORIS AND ANY CHANGE OF CONTACT INFORMATION FOR SUBMITT	NESS OF THE CITY. IT IS THE REQUESTIN ALL REGULAR USERS OF THE RECORDS	NG AGENCY'S RESPONSIBILTY TO MAINTAIN THE OF ANY CHANGES TO THE PROCESS, INCLUDING
Name of Business Unit responsible for identifying and preserving necessary records from automatic deletion.		Who will field requests for such records and take action to ensure that requested records are not automatically deleted?
Describe process by which records will be identified and preserved.		Include how the responsible Business Unit will receive requests for preservation, and what steps they will take to ensure that those requests result in preservation of necessary records, including any third parties that will be involved in carrying out the preservation request. Please be as detailed as possible.
Comr	nencement of Automatic Deletion	
Has autodeletion already begun? If so, when did it begin. If not, when will the agency be ready to commence automatic deletion?		Also note any changes to the auto deletion protocol that have been made since it began.
Specify the date range of the described records that are no longer available.		E.g., the date range from when the records were first created until either the present or when automatic deletion was paused.
Describe any measures previously taken to preserve necessary records from deletion.		Include processes to copy necessary records to requesting parties.
TO BE COMPLETED	BY THE HEAD OF THE REQUESTI	NG AGENCY
Permission is hereby requested to establish the date approved by the Commissioner of the Depa		
SIGNATURE OF AGENCY HEAD	TITLE:	DATE:

		REVIEW BY MUNICIPAL ARCHIVIST	
This a	applicati	ion for automatic deletion should be <u>APPROVED</u> because:	
	The re	ecords described above are Non-Archival ; or	
	The re	ecords described above are <u>Archival</u> ; and,	
		The requesting agency has agreed to <u>transfer an exact copy of all such records to the</u> automatic deletion on the agency's data systems, using the process described below; or	e Municipal Archives prior to
		The requesting agency has agreed to <u>transfer an exact copy of a sample of such reco</u> <u>Archives</u> prior to automatic deletion on the agency's data systems, using the process de	
		on for automatic deletion should be <u>DENIED</u> because the described records are <u>Archival</u> a ensure their proper preservation.	nd no process has been
uesting I purpos		will establish and maintain the following process to ensure that the described reco	rds are preserved for
 <u> </u>		TO BE COMPLETED BY THE MUNICIPAL ARCHIVIST	
•		ves has reviewed this application for automatic deletion of records and recom rvation process described above.	imends that it be approved
 		PAL ARCHIVIST:	DATE:

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CERTIFICATIONS

TO BE COMPLETED BY THE CORPORATION COUNSEL			
I APPROVE THE AUTOMATIC DELETION OF RECORDS PURSUANT TO THE PROCESS AND CONDITIONS DESCRIBED ON			
THIS APPLICATION.			
SIGNATURE:	DATE OF APPROVAL:		
PRINTED NAME:	TITLE:		
ERIC EICHENHOLTZ	MANAGING ATTORNEY		
EMAIL ADDRESS:	PHONE No.:		
eeicenh@law.nyc.gov	(212) 356-2200		

TO BE COMPLETED BY THE DEPARTMENT OF RECORDS AND INFORMATION SERVICES		
The records identified in this application are properly identified and will be eligible for automatic disposal in the manner described		
beginning on or after, provided the process described for preserving	necessary records is maintained and carried	
out and no subsequent preservation notice for the described records has been issued by the Law Department or other authorized		
agency.		
SIGNATURE:	DATE OF APPROVAL:	
PRINTED NAME:	TITLE:	
PAULINE A. TOOLE	COMMISSIONER	
EMAIL ADDRESS:	PHONE No.:	
ptoole@records.nyc.gov	(212) 788-8607	