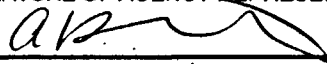


REQUEST FOR RECORDS DISPOSITION AUTHORITY		LEAVE BLANK (NARA use only)	
To: NATIONAL ARCHIVES & RECORDS ADMINISTRATION 8601 ADELPHI ROAD, COLLEGE PARK, MD 20740-6001		JOB NUMBER <i>N1-513-07-1</i>	
1. FROM (Agency or establishment) Indian Health Service		Date Received <i>11/30/06</i>	
2. MAJOR SUB DIVISION Office of Environmental Health & Engineering		NOTIFICATION TO AGENCY	
3. MINOR SUBDIVISION Division of Sanitation Facilities Construction		In accordance with the provisions of 44 U.S.C 3303a, the disposition request, including amendments is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.	
4. NAME OF PERSON WITH WHOM TO CONFER Thomas Todacheeny	5. TELEPHONE 301 -443- 8030	DATE <i>7/24/07</i>	ARCHIVIST OF THE UNITED STATES <i>Alla Wemote</i>
6. AGENCY CERTIFICATION I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached <u>1</u> page(s) are not needed now for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, <input checked="" type="checkbox"/> is not required <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested.			
DATE <i>11/28/06</i>	SIGNATURE OF AGENCY REPRESENTATIVE 		TITLE <i>Director, Office of Resources Mgmt</i>
7. ITEM NO.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
	See attached sheets *Privacy Act Protected*		

SA 8/16/07 copies sent to Agency, NWMW, NWMW, NWMW, NR

SCHEDULE 3. PROFESSIONAL SERVICES

SECTION 11 ENVIRONMENTAL HEALTH

ITEM NO.	TITLE AND DESCRIPTION OF RECORDS	DISPOSITION AUTHORITY
11-11	<p>SANITATION FACILITIES CONSTRUCTION (SFC) INDIVIDUAL APPLICANT FILES. This record series contains all professional and administrative material necessary to document individual sanitation facilities provided by the IHS and/or requested by the individual. It contains documentation regarding the individuals' eligibility for sanitation facilities under P.L. 86-121. It contains, in written and graphic form, documents related to sanitation services provided or requested.</p> <p>a. Sanitation services provided. All related correspondence and documents.</p> <p>b. Sanitation services not provided (e.g., ineligible).</p>	<p>Transfer to the FRC when administrative value ends, or after 10 years of inactivity, whichever is sooner. Destroy 20 years after retirement to the FRC.</p> <p>Transfer to the FRC when administrative value ends, or after 10 years of inactivity, whichever is sooner. Destroy 20 years after retirement to the FRC.</p>

REQUEST FOR RECORDS DISPOSITION AUTHORITY		LEAVE BLANK (NARA use only)	
To: NATIONAL ARCHIVES & RECORDS ADMINISTRATION 8601 ADELPHI ROAD, COLLEGE PARK, MD 20740-6001		JOB NUMBER	
1. FROM (Agency or establishment)		Date Received	
2. MAJOR SUB DIVISION		NOTIFICATION TO AGENCY	
3. MINOR SUBDIVISION		In accordance with the provisions of 44 U.S.C 3303a, the disposition request, including amendments is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10.	
4. NAME OF PERSON WITH WHOM TO CONFER	5. TELEPHONE	DATE	ARCHIVIST OF THE UNITED STATES
James Ludington	301 -443-1046		
6. AGENCY CERTIFICATION I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal on the attached _____ page(s) are not needed now for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies,			
<input type="checkbox"/> is not required <input type="checkbox"/> is attached; or <input type="checkbox"/> has been requested.			
DATE	SIGNATURE OF AGENCY REPRESENTATIVE	TITLE	
7. ITEM NO.	8. DESCRIPTION OF ITEM AND PROPOSED DISPOSITION	9. GRS OR SUPERSEDED JOB CITATION	10. ACTION TAKEN (NARA USE ONLY)
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