NYC
Department of Records
& Information Services

Digitization Pre-Implementation Checklist

Category	Task	Comments	For DORIS Use Only
Retention	Please check ONE: ☐The records to be converted are currently on the agency retention schedule. ☐ The records to be converted will be added to the agency retention schedule.		**Retention confirmed:** ☐YES ☐NO
Indexing	☐ The agency has created a list of required metadata for each category of records. **(Please provide a list of metadata indices)**		**Indexing received /reviewed:** ☐YES ☐NO
Confidential Information	☐ These records contain personally identifiable information (PII) or other confidential information. **(Please describe)**		
File Naming Conventions	☐ The agency has created file naming conventions for each record series. **(Please provide a list of file naming conventions)**		**File Naming Conventions received/reviewed:** ☐YES ☐NO
Imaging	Please check ONE: The conversion will be done by: ☐ Internal: Centralized Scanning ☐ Internal: Decentralized Scanning ☐ Third Party Vendor	**If applicable, include the name of the vendor:**	
Conversion Format	The records will be converted to one or more of the following formats: **(Please check all that apply)**	☐ PDF ☐ DNG ☐ PDF/A ☐ PNG ☐ TIFF ☐ GIF ☐ JPEG ☐ (Other)	

Records Information	The agency provided DORIS with the following at least 30 days before the commencement of the project: ☐ A list of records to be converted; ☐ The format(s) being used; ☐ Documentation of the reliability and capability of the process to produce trustworthy records as evidenced by the completion off a successful POC or other process).		**Received by DORIS:** ☐YES ☐NO **Expected Implementation Date:**
Quality Assurance	☐ The agency has identified a quality control process for image accuracy and Optical Character Recognition (OCR) quality. **(Please attach description of the process).**		**Quality Assurance Process reviewed/approved:** ☐YES ☐NO
Disaster Recovery	☐ The agency will maintain a backup solution for digitized content. **(Please attach solution with disaster recovery details)**	**Location of duplicate copies:**	
Storage Information	☐ The agency has confirmed storage requirements with MIS/OTI.		
Agency-level Policies & Procedures	☐ The agency has developed agency-wide digitization policies and procedures.		**Policies & procedures received/reviewed:** ☐YES ☐NO

Submitted by:

Agency Name:	Agency Code/FISA #:
Senior Level Executive (SLE) Name:	
Senior Level Executive (SLE) Title:	
Senior Level Executive (SLE) Signature:	
Date of Submission:	

Records Management Officer (RMO) Name:	
Records Management Officer (RMO) Title:	
Records Management Officer (RMO) Email:	
Records Management Officer (RMO) Phone:	

Certification (to be completed by DORIS)

This pre-implementation checklist has been received and reviewed by the Department of Records and Information Services.

Records Management: ☐ The agency **may** proceed with implementing the conversion process. ☐ The agency **may not** proceed with the conversion process and must schedule a meeting with DORIS to discuss remediating the checklist.	Reviewed by: Signature: Name: Title: Date:
Municipal Archives: ☐ The records to be digitized have been reviewed and the following have been determined to have archival value. Hard copy should be transferred to the Municipal Archives when the project is complete. ☐ Digital copies should be transferred to the Municipal Archives. ☐ These records should not be digitized. Please contact the Municipal Archives. ☐ The records to be digitized have been reviewed and do not need to be transferred.	Reviewed by: Signature: Name: Title: Date:

Form last updated November 2025