



Transfer Slip Procedures

1.0 Purpose

The purpose of these procedures is to explain how to fill out the Records Transfer Slip.

2.0 Overview of the Form

The Transfer Slip form is used:

- As a delivery slip to provide the moving contractors and the Department of Infrastructure with pick-up and delivery information
- To identify the purpose of a transfer
- To identify contacts for the transfer while the transfer is being processed
- To identify the destination records centre for the transfer

A Transfer Slip is required for each set of boxes that is being transferred to any of the five GNWT Records Centres.

3.0 Filling Out the Form

3.1 Getting Started

- a. Launch *MS Word*.
- b. Open the template form.
- c. *Save As* a new file with a new file name.
- d. Enter the information as outlined in the procedures below.

3.2 Contents of the Form

Fill out the white spaces in the form. Leave the shaded spaces blank. All information is required unless otherwise noted.

- a. **Department:** Enter the name of the department that owns the records.
- b. **Division/Section:** Enter the name of the division that owns the records.
- c. **Reference Number (Optional):** Some departments use their own reference numbers to track the transfer in addition to the DIIMS Transfer ID. If your department is using its own transfer reference number, enter it here.
- d. **Contact:** Enter the name of the person who has the boxes. The moving contractor can contact this person when they pick up the boxes.



- e. **Contact Phone #:** Enter the complete phone number of the person who has the boxes. Provide the seven-digit phone number as well as the extension.
- f. **DIIMS Transfer ID:** Enter the DIIMS Transfer ID. The department's records coordinator assigns this code to each transfer when he or she reviews it. The Department of Infrastructure uses this number to keep track of each group of boxes sent to the records centre. The Records Coordinator will add the DIIMS Transfer ID to the form or provide it to you.
- g. **Alternate Contact:** Enter the name of a person the moving contractor can contact when they go to pick up the boxes if the main contact is unavailable.
- h. **Alternate Contact Phone #:** Enter the complete phone number of the alternate contact. Provide the seven-digit phone number as well as the extension.
- i. **Date:** Enter the date that the records coordinator approved the transfer and sent it to the Department of Infrastructure's Corporate Records Management unit. This helps the records centres prioritize the boxes that are being picked up.
- j. **Records Coordinator Name:** Enter the name of the Department's Records Coordinator. This indicates that the Records Coordinator has reviewed and approved the transfer.
- k. **Records Coordinator Phone #:** Enter the Records Coordinator's complete phone number. Provide the seven-digit phone number as well as the extension.
- l. **Number of Boxes:** Enter the total number of boxes to be transferred.
- m. **Building:** Enter the name of the building, the street address, or the building mail code where the boxes are located.
- n. **Floor:** Enter the floor on which boxes are located.
- o. **Area (Optional):** Enter the area or part of the floor in which the boxes are located. For example, if the boxes are located in the Corporate Services area, enter Corporate Services. This will help direct the movers to the correct boxes, particularly in large office buildings that have multiple programs or divisions on one floor.
- p. **Box Type:** Click on the check box to select the correct option. Indicate if the boxes are standard records boxes, cheque boxes, or map tubes. This helps the movers plan



their deliveries and identify the correct boxes. It also helps the Records Centres confirm that they received the correct boxes.

- q. **Records Centre:** Click on the check box to select the records centre that will receive the boxes. This helps the Department of Infrastructure process the transfer request correctly.
- r. **Reason for Transfer:** Click on the check box to select the correct option. Indicate the reason for transferring the boxes to the records centre. This helps the Department of Infrastructure process the request and helps ensure that the boxes are received into the correct location within the records centre.

Choose from the following options:

Reason for Transfer	Description
Storage (Semi-Active)	The boxes are being shipped to the records centre for semi-active storage.
Destruction (D)	The boxes are ready to be destroyed immediately upon receipt in the records centre, according to ARCS, ORCS, or a One-Time Records Schedule.
Archival Selection (AS/D)	The boxes are ready to be transferred to the NWT Archives immediately upon receipt in the records centre, according to ARCS, ORCS, or a One-Time Records Schedule.
Transitory Destruction	The boxes are ready to be destroyed immediately upon receipt in the records centre, according to the Transitory Records Schedule, RDA 1997-02.
Returned Boxes	The boxes are being returned to the records centre for semi-active storage after being retrieved.
Other	There may be rare cases where the boxes are being sent to the records centre for a reason other than the ones listed above. Provide the reason for the transfer.

- s. **Notes and Instructions:** This is an optional space for writing extra instructions to help with pick-up of the boxes. For example, if the boxes are located in a basement but the movers have to go to the third floor to find someone to let them into the basement, write those instructions here.
- t. **Records Management and Warehouse Use Only:** Leave this section blank. Department of Infrastructure staff will complete it after the transfer has been approved.



4.0 Sample Form

Below is an example of a completed form.



RECORDS TRANSFER SLIP

Requested By:	Department Infrastructure		Division/Section Corporate Information Management	Reference No.
	Contact Gabby North		Phone No. 123-4567 ext. 88888	DIIMS TransferID INF30_2017-11-30
	Alternate Contact Shay Wolf		Phone No. 123-4567 ext. 99999	Date (d/m/y) 30/11/2017
Approved By Dept. Records Coordinator:	Name Ashley Woods		Phone No. 123-4567 ext. 11111	# of Boxes 4
Location of Boxes:	Building Nova Plaza		Floor 2 nd Floor	Area Corporate Information Management
	Box Type <input checked="" type="checkbox"/> Records Box <input type="checkbox"/> Cheque Box <input type="checkbox"/> Map/Plan Tube	Records Center <input checked="" type="checkbox"/> Yellowknife <input type="checkbox"/> Inuvik <input type="checkbox"/> Hay River <input type="checkbox"/> Fort Simpson <input type="checkbox"/> Fort Smith	Reason for Transfer <input checked="" type="checkbox"/> Storage (Semi-Active) <input type="checkbox"/> Transitory Destruction <input type="checkbox"/> Destruction (D) <input type="checkbox"/> Returned Boxes <input type="checkbox"/> Archival Selection (AS/D) <input type="checkbox"/> Other: <u>Give reason</u>	
Notes and Instructions:				
RECORDS MANAGEMENT USE ONLY:				
Transfer From:	Building	Floor	Box Numbers	Disposition No.
Transfer To:	Building	Floor	Authorization	Date

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