



Revised – April 2004

Physiographic Province:

Aspect:

Drainage:

Direction:

Landform:

Site Dimensions: \_\_\_\_\_ x \_\_\_\_\_ ft

Elevation: \_\_\_\_\_ ft

Site Soils:

Adjacent Soils:

Distance: \_\_\_\_\_ ft

Nearest Water Source:

Acreage:

Slope: \_\_\_\_\_ percent

Survey Description:

Site Condition(s):

25-49% of Site Destroyed
50-74% of Site Destroyed
75-99% of Site Destroyed
Destruction of Surface and Subsurface Deposits
Intact Cultural Level
Intact Stratified Cultural Levels
Less than 25% of Site Destroyed
No Surface Deposits but With Subsurface Integrity
Site deliberately buried
Site Totally Destroyed
Surface Deposits Present And With Subsurface Integrity
Surface Deposits Present But Subsurface Not Tested
Surface Deposits Present But With No Subsurface Integrity
Unknown Portion of Site Destroyed
Subsurface Integrity
Surface Features
Surface Deposits
Site Condition Unknown

Survey Strategy:  Historic Map Projection  Informant  Observation  
 Surface Testing  Subsurface Testing

USGS Quadrangle:

Current Land Use:

Date of Use: \_\_\_\_\_ Example: \_\_\_\_\_

Land Uses: \_\_\_\_\_

Comments:

### **SPECIMENS AND FIELD NOTES INFORMATION**

Specimens Obtained:  Yes  No

Depository:

Assemblage Description:

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Specimens Reported: \_\_\_\_ Yes \_\_\_\_ No  
Owner Name:  
Assemblage Description:

Owner Address:

Field Notes: \_\_\_\_ Yes \_\_\_\_ No

Depository:

**BIBLIOGRAPHIC INFORMATION**

Reference Numbers: \_\_\_\_\_ Report(s): \_\_\_\_ Yes \_\_\_\_ No Depository:

Reference for Report:

Additional Comments:

**GRAPHIC MEDIA DOCUMENTATION**

Photo Media	Depository	Photo Date

**CRM EVENT INFORMATION**

Date            Event ID            Event Type            CRM Person (First)            CRM Person (Last)

Date	Event ID	Event Type	CRM Person (First)	CRM Person (Last)

Additional Comments (Including address of CRM firm):

**INDIVIDUAL/ORG AGENCY MAILING INFORMATION**

Category: Informant    Occupant    Owner    Owner of Specimens    Property Mgr.    Tenant

Honorific: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ - \_\_\_\_\_ Country: \_\_\_\_\_

Phone 1/Extension: \_\_\_\_\_ Phone 2/Extension: \_\_\_\_\_

Surveyor's Notes: