Rev. 12/07/2009

NATURAL RESOURCES CONSERVATION SERVICE (NRCS) - TENNESSEE
CULTURAL RESOURCES UNDERTAKING REVIEW WORKSHEET

[SUBMIT ONLY ONE (1) WORKSHEET PER EMAIL WITH A SUBJECT OF COUNTY NAME AND FARM NUMBER, I.E., DYER CO. F3523]

DATE: _____ **PLANNER NAME:** _____

Phone/E-mail: _____ **SUBMITTED BY:** _____

Check if undertaking requires a permit: ☐ TDEC ☐ TVA ☐ USACOE
Check if undertaking is on State, Federal, or Local property: ☐ State ☐ Federal ☐ Private

1. CLIENT'S NAME:_____ Farm #:_____ Tract #: _____ Field #: _____

2. Lat. /Long. (Use Degrees/Minutes/Seconds): _____° _____' _____" _____° _____' _____"
County: _____ Topo Quad Name: _____

3. UNDERTAKING PRACTICES:

Code:	**Name:**	**Program:**	**How Many:**	**Area of Potential Effect (APE):**	
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____
_____	_____	NONE	_____	Acres _____	Linear Feet _____

Description of Proposed Ground Disturbance:

Has the **APE** ever been plowed? ☐ No ☐ Yes If Yes, how? _____

_____

4. DURING FIELD VISIT, WERE ANY OF THE FOLLOWING PRESENT WITHIN **APE** (check all that apply)?

☐ Standing Structures
☐ Foundation Remains (Brick or Stone)
☐ Dug Well
☐ Earthen Mounds
☐ Cemeteries
☐ Other Man-made Features over 50 Years Old
☐ Pottery Shards
☐ Flint Flakes
☐ Arrowheads
☐ Springs
☐ Sinkholes
☐ Caves
☐ Checked with Landowner concerning Known Resources

EXPLAIN ANY OF THE ABOVE CHECKS:

5. **ATTACH** a Topographic Quadrangle Map section **SHOWING** *the farm and its surroundings* **AND** the **LOCATION** of <u>each practice</u> **PLUS** any additional location information and **DIGITAL PHOTOGRAPHS** of the **APE**.

☐ Tennessee Division of Archaeology site files checked. Date: _____
☐ Adverse impact to potentially eligible site unlikely. Date Evaluated: _____
☐ Adverse impact possible; returned to NRCS State Office for archaeological investigation.

RECOMMENDATION BASED ON FIELD INVESTIGATION IS: _____
☐ **PROCEED (ADVERSE IMPACT UNLIKELY)** ☐ **MITIGATE (ADVERSE IMPACT LIKELY)**

_____ _____
(REVIEWING ARCHAEOLOGIST'S SIGNATURE) Date