



UTM Coords:

Zone	North	East

Loran:

Restricted UTM Data? : Yes No

Physiographic Province:

Aspect:

Drainage:

Direction:

Landform:

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

Elevation:

Site Soils:

Adjacent Soils:

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

Nearest Water Source:

Acreeage:

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

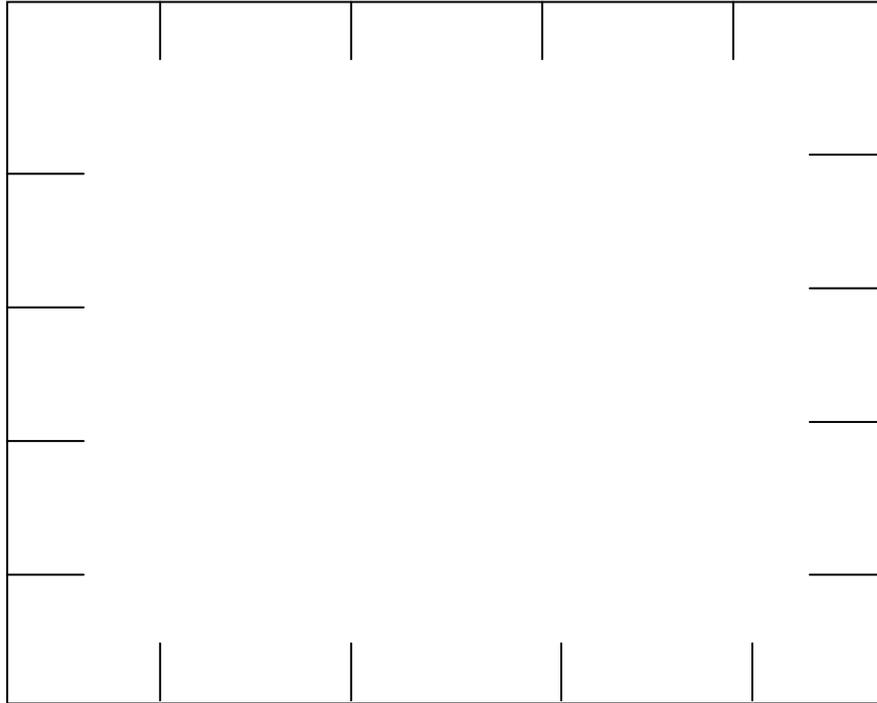
Survey Strategy: \_\_\_ Historic Map Projection \_\_\_ Informant \_\_\_ Observation  
\_\_\_ Surface Testing \_\_\_ Subsurface Testing

USGS Quadrangle:

Current Land Use:

Date of Use: \_\_\_\_\_ Example: \_\_\_\_\_  
Land Uses: \_\_\_\_\_  
Comments: \_\_\_\_\_

\*\*\* Attach photocopy of appropriate section of USGS 7.5 minute series topographical map showing site boundaries



Scale: \_\_\_\_\_

**SPECIMENS**

Specimens Obtained: \_\_\_\_ Yes \_\_\_\_ No  
Assemblage Description:

Depository:

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

Owner Address:

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

Depository:

Photographic Documentation: \_\_\_\_ Yes \_\_\_\_ No Depository:

**BIBLIOGRAPHIC DOCUMENTATION:**

Depository for Bibliographic Information: \_\_\_\_\_

Reference Numbers: \_\_\_\_\_

Bibliographic Source: \_\_\_\_\_

Organization: \_\_\_\_\_

Additional Comments:

**GRAPHIC MEDIA DOCUMENTATION:**

Control ID Photo Date	Photo Media	Depository	Frame (s)	

Report(s): \_\_\_ Yes \_\_\_ No

Depository:

**CRM EVENT INFORMATION**

Date	Event ID Remarks	Event Type	CRMPerson (First)	CRMPerson (Last)	

**INDIVIDUAL/ORG AGENCY MAILING INFORMATION**

Owner Category:                      Owner                      Occupant                      Tenant                      Informant                      Property Mgr.

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

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

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

\_\_\_\_\_

City: \_\_\_\_\_ State: VA \_\_\_\_\_  
ZIP CODE: \_\_\_\_\_ Country: \_\_\_\_\_

Phone 1/Extension: \_\_\_\_\_ Phone 2/Extension: \_\_\_\_\_  
SURVEYOR'S NOTES:

Surveyed By: \_\_\_\_\_ Affiliation: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_

Form Completed By: \_\_\_\_\_ Affiliation: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_

For VDHR Staff Only	
Virginia Register Status:	
National Register Status:	
Easement Status:	
VDHR Library Reference Number (s) :	
VDHR Number Assigned By:	Date:
Date Entered By:	Date:
Revisions/Updates By:	Date: