



ILLINOIS CULTURAL RESOURCES REVIEW FORM APRIL 2003

To be completed for all "Undertakings". Attach copy of quadrangle map with APE marked and send to Cultural Resources Specialist. Make a copy for your files.

Field Office: _____ County: _____

Evaluator: _____ Evaluation Date: _____

Area of Potential Effect (APE)

Owner/Operator: _____ County: _____

USGS Quadrangle: _____

Township # : _____ Range # : _____ Section # : _____ 1/4 Section: _____

Tract # : _____ Ground Cover: _____ Construction Date: _____

Name of Practice: _____ Acres in APE: _____

Funding Program: CPP SSRP IDNR CRP EQIP WRP WHIP EWP

Other: _____

Cultural Resources Review **Yes No**

A. Is owner/operator aware of any historic structural remains, or artifacts within the APE? Describe: _____

B. Did the archaeological site files show the presence of cultural resources? (CRS will fill in)..If yes, list sites: _____

C. Did you find any buildings shown in the old county atlases or platbooks within the APE? What year did the building first appear? _____

D. Are there any buildings over 50 years old within the APE? Describe: _____

Project Site Inspection

APE was walked and visually searched for artifacts.

Date: _____ Examined by: _____ % Ground Visibility: _____

Was anything found? (if yes, fill out New Site Report Form) **Yes** **NO**

Describe: _____