

Nevada Site Stewardship Program

MONITORING REPORT

(PLEASE PRINT)

Site Name: _____ Site Number (Trinomial): _____ Date of Visit: _____

Monitoring Party Names	Driver	Mileage	Hours*	Cost Incurred
	<input type="checkbox"/>			

*Hours: Total volunteer time including preparation for site visit, travel time, time at site, and time doing paperwork

Agency: _____ District Office/Field Office/Area/Park: _____

Site Condition:

Impact Level: _____

| 0 = No change | 1 = Minor | 2 = Site disturbed | 3 = Site damaged | 4 = Looters/vandals at site |
(Please describe impact for levels 1-4 in comments and fill in nature of impact/damage)

Nature of Impact/Damage: (Check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Looting | <input type="checkbox"/> Digging | <input type="checkbox"/> Collectors Pile |
| <input type="checkbox"/> Trash/Dumping | <input type="checkbox"/> Graffiti | <input type="checkbox"/> Paint Ball Damage |
| <input type="checkbox"/> Bullet Holes | <input type="checkbox"/> Fencing/Gate Damage | <input type="checkbox"/> Sign Down/Damage |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Campfire | <input type="checkbox"/> Vehicle Tracks/Parking |
| <input type="checkbox"/> Trails | <input type="checkbox"/> Cattle Grazing | <input type="checkbox"/> Artifact/Fossil Removed |
| <input type="checkbox"/> Artifact/Fossil Damage | <input type="checkbox"/> Rock Art Damage | <input type="checkbox"/> Structural Collapse |
| <input type="checkbox"/> Wildfires | <input type="checkbox"/> Animal Activity | <input type="checkbox"/> Rock Art Exfoliation |
| <input type="checkbox"/> Rock Falls | <input type="checkbox"/> Erosion | |
| <input type="checkbox"/> Other: _____ | | |

Comments and Concerns:

Photography: Impact Photo(s) Attached Baseline Photo(s) Attached

Please include photos of impacts with a photographic log. Also remember to submit yearly baseline photos.

Please use one form per site per day. Email to SHPOStewardship@shpo.nv.gov. Thank you!