Field Code

NDCRS HISTORICAL ARCHEOLOGICAL SITE FORM PAGE 2—Descriptive Section

SITS#32

| 1. | Access: | | |
|----|---|--------------------------|--------------|
| 2. | Site Description (include features): | | |
| | | | |
| | | | |
| 0 | | | |
| 3. | Description of Cultural Material (quantify & identify artif | acts, norteatures): | |
| | | | |
| | # of Artifacts | # of Artifacts Collected | |
| 4. | Artifact Repository: | | |
| | Recorded By (First Name & Last Name) | Date Recorded | (mm/dd/year) |

NDCRS HISTORICAL ARCHEOLOGICAL SITE FORM PAGE 3—Descriptive Section

| Field Code | SITS# 32 |
|-------------|----------|
| i ieiu coue | 0110π JŁ |

5. Description of Subsurface Testing:

| Field | Conditions: |
|-------------------------|-------------|
|-------------------------|-------------|

Wet Dry Windy Rainy

Snowy Overcast Sunny Twilight

7. Technique(s) Used to Estimate Site Area:

Transit Tape Measure Paced Visual Estimate

GPS Other (Explain)

8. Rationale for Site Boundary Determination:

Surface Cultural Materials Features Topography

Continuous Stratigraphic Exposure Systematic Subsurface Probing

Subsurface Testing Other (Explain)

- 9. Current Use of Site:
- 10. Landowner Contact Information:
- 11. Vegetation:
- 12. Vegetation Cover (% of visible ground):
- 13. Snow Cover (% of ground obscured by snow/ice):
- 14. Person-Hours Spent at Site:
- 15. Project & Principal Investigator:

Recorded By Date Recorded

(First Name & Last Name) (mm/dd/year)

Instructions to complete this form: (1) Download; (2) Save A Copy; (3) Submit a paper copy of the form to the SHSND and a PDF version of the form and corresponding GIS shapefiles to the FTP site of the SHSND.

Field Code

NDCRS HISTORICAL ARCHEOLOGICAL SITE FORM PAGE 4—Descriptive Section

SITS#32

| | Recorded By Day (First Name & Last Name) | ate Recorded | (mm/dd/year) |
|-----|--|--------------|--------------|
| 21. | . References Cited/Comments: | | |
| 20. | 9. Statement of Significance: | | |
| 19. |). Statement of Integrity: | | |
| 18. | s. Description of Collection(s) Observed & Contact Information | n: | |
| 17. | Contracting firm or Agency completing the form: | | |
| 16. | i. Report Title & Author(s): | | |