

PROJECT IDENTIFICATION FORM

AMASDA Project No: _____ (to be assigned by ARAS Registrar)

Project Name: _____

Report Available: yes ____ no ____ Submitted to ARAS: yes ____ no ____

Year of Project: _____

Archeologist(s): _____

Investigating Entity: _____

Sponsor/Client: _____

Purpose of Project: Compliance _____, Research _____, Rescue _____

Type of Project: Judgmental Survey ____, Intensive/Systematic Survey ____, Field Survey with Site Testing ____,

Site(s) Testing Only ____, Extensive Excavation____, Mitigation ____, Remote sensing _____,

Nautical Excavation____, Desktop Review _____, Collections Review _____

County(s): _____

USGS 7.5' Map Name(s) within Project Area: _____

(attach 7.5" USGS map(s) with project boundary outlined and submit GIS shapefiles with report if possible)

Project Size: Total Hectares _____ No. Hectares Surveyed _____

If linear or segmented project area, use Total length in Kilometers _____

and Total width of right-of-way in Meters _____

Archeological Sites Investigated/Recorded During This Project:

Total Number of Sites Recorded/Investigated: _____

Number of Crew Persons: _____ Number of Field Days: _____

If collections review: approximate number of lab days: _____

Project Area Ground Cover: (check appropriate categories below)

Wooded _____, Pasture _____, Plowed/disc'd _____, Planted field _____,
Recently harvested field _____, Rice field _____, Secondary undergrowth vegetation _____,
Urban built environmental _____, Not reported/unknown _____

Restrains: (check appropriate categories below)

No major restraints _____, Flooding _____, Extreme slope _____,
Secondary vegetation/undergrowth _____, Hazardous materials _____

Subsurface Testing: (check appropriate categories below)

No subsurface testing _____, Shovel Tests _____, Auger Tests _____, Core Tests _____,
Maximum Test Interval (in meters) _____, Screened _____, Unscreened _____

Controlled Excavation Units

Size of Unit _____ meters x _____ meters, No. of units _____
_____ meters x _____ meters, No. of units _____
_____ meters x _____ meters, No. of units _____

Feature Unit Excavation Only: _____ No. of Features Excavated: _____

Backhoe Trench(es): _____ No. of Trenches _____ Maximum Depth _____ (in meters)

Remote Sensing

Name Type: _____ Total Sq. meters Surveyed _____

Human Remains Reported: Yes _____ No _____

Human Remains Collected: Yes _____ No _____

If yes, include brief explanation:

Historic Cemetery: Yes _____ No _____

Prehistoric Burials: Yes _____ No _____