

Location of Site (please provide as much detail as possible) and/or attach a map or drawing of site's location:

County: _____ GPS Coordinates: _____

Legal Description: _____
QUARTER/HALF SECTIONS SECTION TOWNSHIP RANGE

Description of Site Location:

Artifacts Observed (please attach any photos or drawings of artifacts observed, preferably w/ scale reference):

- | | | |
|--|--|--|
| <input type="checkbox"/> Chipped Stone Tool(s) | <input type="checkbox"/> Worked Shell | <input type="checkbox"/> Daub |
| <input type="checkbox"/> Chipped Stone Debris | <input type="checkbox"/> Worked Bone | <input type="checkbox"/> Historic (glass, metal, crockery, etc.) |
| <input type="checkbox"/> Ground Stone Tool(s) | <input type="checkbox"/> Native American Pottery | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Natural Stone Tool(s) | <input type="checkbox"/> Animal Bone | <input type="checkbox"/> Isolated Item _____ |
| <input type="checkbox"/> Fire-Cracked Rock | <input type="checkbox"/> Burned Earth | <input type="checkbox"/> Human Bone |

! IF HUMAN REMAINS ARE ENCOUNTERED, CONTACT LOCAL ENFORCEMENT AND THE HISTORY NEBRASKA STATE ARCHEOLOGY OFFICE @ (402) 471-3270 FOR COMPLIANCE WITH NEBRASKA LAW (Stat. 12-1201 through 12-1212). ALL HUMAN BURIALS ARE PROTECTED UNDER STATE LAW REGARDLESS OF LAND OWNERSHIP

Features Observed (if any):

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Mound(s) | <input type="checkbox"/> Trash Dump(s) | <input type="checkbox"/> Rock Art | <input type="checkbox"/> Building Foundations |
| <input type="checkbox"/> Depression(s) | <input type="checkbox"/> Stain(s) | <input type="checkbox"/> Rock Outlines/Concentrations | <input type="checkbox"/> Historic Standing/Collapsed Buildings, Structures or Objects |
| <input type="checkbox"/> Other: _____ | | | |

Land Use at Site Location (i.e. agricultural field, pasture, woodlands, etc.):

Ground Surface Visibility: poor fair good excellent

Additional Comments:

Landowner Name: _____ Phone or Email: _____

Site Observed by: _____ Date: _____

Form Completed by: _____ Date: _____