

**I IDENTIFICATION**

A. Site #	27 - -	B. Site Name	
C. NHAS Site #	NH - -	D. Temp. Site #	
E. Version of form	<input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Transcribed		
F. Type of form	<input type="checkbox"/> Minimal Documentation <input type="checkbox"/> Intensive Documentation		

**II LOCATION**

A. County _____	B. City/Town _____		
C. USGS Quadrangle _____	D. Quad Date _____		
E. USGS Map Series	<input type="checkbox"/> 7.5' <input type="checkbox"/> 15' <input type="checkbox"/> 1/25,000 <input type="checkbox"/> Other		
F. UTM Zone ____	G. Easting _____	H. Northing _____	
NH State Plane, feet	Easting _____	Northing _____	
I. USGS Datum	<input type="checkbox"/> WGS 84 (preferred) <input type="checkbox"/> NAD 27 <input type="checkbox"/> NAD 83		

**III OWNERSHIP**

A. Status (Select as many as appropriate)		
<input type="checkbox"/> Private (Single)	<input type="checkbox"/> Private (Multiple)	<input type="checkbox"/> Local Government
<input type="checkbox"/> State Government	<input type="checkbox"/> Federal Government	<input type="checkbox"/> Non-Profit
<input type="checkbox"/> Unknown	<input type="checkbox"/> Other (Specify): _____	
B. Name of Owner(s) _____		
Street Address _____		
City/Town, State, Zip _____		

**IV REPORTING INFORMATION**

A. Name of Form Preparer(s) _____	
B. Institutional Affiliation/Employer _____	
C. Sponsor _____	
D. Date Surveyed _____	E. Date Form Prepared _____
F. Investigative Type (Select One)	
<input type="checkbox"/> CRM contract <input type="checkbox"/> Sponsored research <input type="checkbox"/> Private research <input type="checkbox"/> Volunteered data <input type="checkbox"/> Other (Specify) _____	
G. Investigative Techniques (Select as many as appropriate)	
<input type="checkbox"/> Oral history <input type="checkbox"/> Documentary <input type="checkbox"/> Collection analysis <input type="checkbox"/> Non-recovery survey <input type="checkbox"/> Aerial photography <input type="checkbox"/> Map interpretation <input type="checkbox"/> Mapping <input type="checkbox"/> Arbitrary surface col. <input type="checkbox"/> Controlled surface collection <input type="checkbox"/> Auger / Soil core <input type="checkbox"/> Shovel test <input type="checkbox"/> Test pit excavation <input type="checkbox"/> Heavy equipment <input type="checkbox"/> Block excavation <input type="checkbox"/> Remote sensing <input type="checkbox"/> Other (Specify) _____	
H. Bibliographic Citation _____	

**V CULTURAL TEMPORAL AFFILIATIONS**

A. Eras Represented	<input type="checkbox"/> Pre-Contact <input type="checkbox"/> Post-Contact	
B. Cultures Represented	<input type="checkbox"/> Native American Indian <input type="checkbox"/> Euro-American <input type="checkbox"/> Unknown	

**VI PRE-CONTACT ERA SITE DATA**

A. Pre-Contact Periods (Select as many as appropriate)		
<input type="checkbox"/> Paleoindian	<input type="checkbox"/> Indeterminate Archaic	<input type="checkbox"/> Early Archaic
<input type="checkbox"/> Middle Archaic	<input type="checkbox"/> Late Archaic	<input type="checkbox"/> Indeterminate Woodland
<input type="checkbox"/> Early Woodland	<input type="checkbox"/> Middle Woodland	<input type="checkbox"/> Late Woodland
<input type="checkbox"/> Late Pre-Contact	<input type="checkbox"/> Unknown Pre-Contact	
B. Basis for Assignment of Pre-Contact Periods (Select as many as appropriate)		
<input type="checkbox"/> Diagnostic artifacts	<input type="checkbox"/> Diagnostic features	<input type="checkbox"/> C14 dating
<input type="checkbox"/> Other radiometric	<input type="checkbox"/> Other (Specify):	
C. Pre-Contact Site Type(s) (Select as many as appropriate)		
<input type="checkbox"/> Open habitation (Undiff)	<input type="checkbox"/> Habitation / Village	<input type="checkbox"/> Habitation / Campsite
<input type="checkbox"/> Rockshelter / Cave	<input type="checkbox"/> Quarry	<input type="checkbox"/> Workshop
<input type="checkbox"/> Fishing station	<input type="checkbox"/> Ceremonial (Undiff)	<input type="checkbox"/> Cemetery
<input type="checkbox"/> Rock art	<input type="checkbox"/> Unknown	
<input type="checkbox"/> Other (Specify):		
D. Pre-Contact Material Present at Site		<input type="checkbox"/> Continued on continuation sheet
Artifact category / Artifact type / Quantity:		<input type="checkbox"/> Collected <input type="checkbox"/> Observed on site <input type="checkbox"/> Observed in prior collection

**VII POST-CONTACT ERA SITE DATA**

A. Post-Contact Period of Occupation			<input type="checkbox"/> Indeterminate
B. Beginning date		<input type="checkbox"/> Exact	<input type="checkbox"/> Estimated
Ending date		<input type="checkbox"/> Exact	<input type="checkbox"/> Estimated
C. Basis for Assignment of Post-Contact Dates			
<input type="checkbox"/> Diagnostic artifacts	<input type="checkbox"/> Diagnostic features	<input type="checkbox"/> Architectural	
<input type="checkbox"/> Oral tradition	<input type="checkbox"/> Map interpretation	<input type="checkbox"/> Documentary	
<input type="checkbox"/> Other (Specify):			
D. Post-Contact Site Type (select as many as appropriate)			
<input type="checkbox"/> Residential	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Commercial	
<input type="checkbox"/> Crafts production	<input type="checkbox"/> Industrial	<input type="checkbox"/> Cemetery	
<input type="checkbox"/> Education	<input type="checkbox"/> Governmental	<input type="checkbox"/> Religious	
<input type="checkbox"/> Transportation	<input type="checkbox"/> Recreational	<input type="checkbox"/> Military	
<input type="checkbox"/> Social	<input type="checkbox"/> Health care	<input type="checkbox"/> Shipwreck	
<input type="checkbox"/> Other (Specify):			
E. Post-Contact Material Present at Site			<input type="checkbox"/> Continued on continuation sheet
Artifact category / Artifact type / Quantity:			<input type="checkbox"/> Collected <input type="checkbox"/> Observed on site <input type="checkbox"/> Observed in prior collection

**VIII PHYSICAL DESCRIPTION**

A.	Current Conditions (Select as many as appropriate)		
	<input type="checkbox"/> Exposed bedrock	<input type="checkbox"/> Agricultural field	<input type="checkbox"/> Other open area
	<input type="checkbox"/> Scrub vegetation	<input type="checkbox"/> Forested	<input type="checkbox"/> Urbanized
	<input type="checkbox"/> Suburbanized	<input type="checkbox"/> Industrial / commercial	<input type="checkbox"/> Submerged
	<input type="checkbox"/> Unknown / unrecorded	<input type="checkbox"/> Other (Specify):	
B.	Vegetation at time of survey (type and % ground cover)		
C.	Predominant Aspects of Disturbance (Select as many as appropriate)		
	<input type="checkbox"/> None apparent	<input type="checkbox"/> Agricultural field	<input type="checkbox"/> Construction
	<input type="checkbox"/> Transportation	<input type="checkbox"/> Mining / quarrying	<input type="checkbox"/> Erosion
	<input type="checkbox"/> Vandalism	<input type="checkbox"/> Archaeological excavation	<input type="checkbox"/> Timbering
	<input type="checkbox"/> Unknown / unrecorded	<input type="checkbox"/> Other (Specify):	
D.	Site Size (Square meters)		
E.	Site Elevation (Feet AMSL at center point)		
F.	Major Drainage System	<input type="checkbox"/> Connecticut	<input type="checkbox"/> Merrimack
	<input type="checkbox"/> Androscoggin	<input type="checkbox"/> Coastal	<input type="checkbox"/> Saco
G.	Minor Drainage System (Principal tributary to Major Drainage, if appropriate)		
H.	Closest Source of Fresh Water (Select only one)		
	<input type="checkbox"/> Permanent stream	<input type="checkbox"/> Ephemeral stream	<input type="checkbox"/> Spring
	<input type="checkbox"/> Swamp bog	<input type="checkbox"/> Lake / pond	<input type="checkbox"/> Slough / oxbow lake
	<input type="checkbox"/> Artificial pond	<input type="checkbox"/> Artificial ditch / canal	<input type="checkbox"/> Unknown / unrecorded
		<input type="checkbox"/> Other (Specify):	
I.	Vertical Distance above Closest Water (meters)		
J.	Horizontal Distance from Closest Water (meters)		
K.	Down Slope Direction (Select only one)		
	<input type="checkbox"/> N <input type="checkbox"/> NE <input type="checkbox"/> E <input type="checkbox"/> SE <input type="checkbox"/> S <input type="checkbox"/> SW <input type="checkbox"/> W <input type="checkbox"/> NW <input type="checkbox"/> All <input type="checkbox"/> Flat <input type="checkbox"/> Unknown / unrecorded		
L.	Soil Association		
M.	Soil Series / Phase & Complex		
N.	Soils Reference		

**IX SPECIAL STATUS LAND USE**

A.	Special Use Categories (Select as many as appropriate)		
	<input type="checkbox"/> None	<input type="checkbox"/> Wilderness Area	<input type="checkbox"/> Wildlife Preserve
	<input type="checkbox"/> Nature Preserve	<input type="checkbox"/> Public Park	<input type="checkbox"/> Scenic River
	<input type="checkbox"/> Military Land	<input type="checkbox"/> Archaeological Preserve	<input type="checkbox"/> State Forest
	<input type="checkbox"/> Federal Forest	<input type="checkbox"/> Historic District	<input type="checkbox"/> Current Use (Historic)
	<input type="checkbox"/> Current Use (Other)	<input type="checkbox"/> Other (Specify):	

**X APPLICABLE HISTORIC CONTEXT(S)**

A.	Principal Context
B.	Secondary Context
C.	Secondary Context
D.	Secondary Context

**XI MAPS & PHOTOGRAPHS**

- A. Attach a USGS topographic map (or non photo-reduced copy) of the site area with the site location clearly marked.
- B. Attach sketch map or copy of project map (include north arrow, scale, site boundaries and total area surveyed).
- C. Attach photographs of site (if available). Digital Photographs are acceptable. All photographs must be clear, crisp and focused.

**XII SITE DESCRIPTION**

- A. Narrative description of site setting, nature of finds, distribution of the archaeological materials, with reference to other sites in the vicinity, and directions on how to get to the site (use continuation sheet if necessary).

**XIII RESEARCH POTENTIAL, OTHER VALUES & RECOMMENDATIONS** (Complete for minimal documentation forms)

A. Narrative description of the research which may be proposed for the site, any additional aspects of the site which may make it important such as presence of unusual ecological factors, and recommendations for additional research, especially if the site is endangered (use continuation sheet if necessary).

**XIV ASSESSMENT OF SIGNIFICANCE** (complete for intensive level forms)

A. Narrative discussion of the significance of the site and its research potential (use continuation sheet if necessary).

**XV SURVEYOR'S EVALUATION**

NR listed: <input type="checkbox"/> individual <input type="checkbox"/> within a district  Integrity: <input type="checkbox"/> yes <input type="checkbox"/> no	NR Criteria: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D	NR eligible: <input type="checkbox"/> individually <input type="checkbox"/> within district <input type="checkbox"/> not eligible <input type="checkbox"/> more information needed
<b><u>36 CFR 61 SURVEYOR</u></b>		<b>DATE</b>
<b><u>OTHER SURVEYOR</u></b>		<b>DATE</b>

**SHPO USE ONLY:**

Reviewed for Determination of Eligibility (date) ____ / ____ / ____		
Entered in database ____ / ____ / ____	Plotted ____ / ____ / ____	By _____