



APPENDIX 3

INSPECTION REPORT FORM

Site Name:	
Steward's Name: (Individual or Group)	
Steward's E-mail:	
Inspection Date:	
Volunteer Hours:	
Phone Number:	

A. Disturbances:

(Check all disturbances that have occurred, or are still occurring, since the last inspection)

- | Vegetation/Animals | Soil Removal | Vandalism | New Trails/Cleared Lines |
|---|---------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Tree Cutting | <input type="checkbox"/> Sand | <input type="checkbox"/> Garbage | <input type="checkbox"/> All Terrain Vehicles |
| <input type="checkbox"/> Bark Stripping | <input type="checkbox"/> Gravel | <input type="checkbox"/> Signs | <input type="checkbox"/> 4-Wheel Drives |
| <input type="checkbox"/> Fire | <input type="checkbox"/> Peat | <input type="checkbox"/> Cut Fences | <input type="checkbox"/> Hiking/Equestrian |
| <input type="checkbox"/> Poaching | <input type="checkbox"/> Other | <input type="checkbox"/> Other: | <input type="checkbox"/> Cutlines/Seismic |
| <input type="checkbox"/> Other: | | | <input type="checkbox"/> Fencelines |
| | | | <input type="checkbox"/> Pipelines/Wellsites |
| | | | <input type="checkbox"/> Powerlines |
| | | | <input type="checkbox"/> Other: |

Comments on Disturbances:

(note: text box will expand as you type)

Fencing

Please describe the condition of the fence (e.g. poor, good, excellent) and outline necessary repairs (eg. tree removal, wire stapling, etc.) or where repairs were made.

Fence Line:	Description
North Boundary:	
West Boundary:	
South Boundary:	
East Boundary:	
Cross Fencing:	

Cleanup

Please indicate the cleanup required (poor, good, excellent):

(note: text box will expand as you type)

Signage

Please indicate the condition of signage (poor, good, excellent) and if it needs repair or replacement.

(note: text box will expand as you type)

E. Summary:

(Change in general site condition since last inspection):

- No Change Improved Deteriorated

Summary Comments:

(note: text box will expand as you type)

Other Comments: please include here information on changes to surrounding properties and any upcoming issues not previously mentioned.

(note: text box will expand as you type)

Date: _____

Print Name

Sign Name