Field Observer Form for Quick Shoreline Assessment

1.	Shoreline Area Name:		Division Zone		Date: (dd/montl		nth/year)	Time:	
Segment ID or location description:					Tidal Conditions (e.g.: high, falling)				
GPS Coordinates (if available)					Surveyed by:FootBoat				
Team I.D. Name: for:					VehicleAircraft Name: for:				
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2. Any shoreline impact observed? (circle) 3. If "Yes", provided approximate length & width of impact. Length 4. Was oil observed in the nearby water? (circle) Yes No If 2 and 4 are "No", STOP HERE.									
5. Impacted Shore Types & Materials				OIL COVER ESTIMATION CHART					
			Check	SF	ORADIC	PATCHY 11-50%	B	ROKEN 51-90%	CONTINUOUS 91-100%
			boxes below for all shore- types and materials present	1%	10%	20% 30%	40% 60%	70% 80%	91%
	sh/swamp								
	al flat								
Rip	rap nd or shell be	arh							
Clay bluff									
Dur									
Bul	khead, mann	nade structures							
	oris (trash, dr								
Oth	er vegetatior								
6. Oil ConditionFresh OilMousseTarballsTarpattiesTarmatsTarAs (Check all oil types present) (<10cm) (10-50cm) (>50cm)							Asphalt		
7. Oiled Wildlife Check any observed impacted wildlife birds fishinvertebrates (crabs, etc.)								other?	
8. Access Restrictions:									
9. Cleanup Recommendations & Other Comments (make flagging notes here):									