



NEW YORK STATE PREHISTORIC ARCHAEOLOGICAL SITE INVENTORY FORM
NYS OFFICE OF PARKS, RECREATION & HISTORIC PRESERVATION
(518) 237-8643

For Office Use Only--Site Identifier

Project Identifier _____ Date _____

Your Name _____ Phone () _____
Address _____

Organization (if any)

1. SITE IDENTIFIER(S)

2. COUNTY _____ One of the following: CITY
TOWNSHIP
INCORPORATED VILLAGE
UNINCORPORATED VILLAGE OR HAMLET

3. PRESENT OWNER

Address _____

4. SITE DESCRIPTION (check all appropriate categories):

Site

Stray Find Cave/Rockshelter Workshop
 Pictograph Quarry Mound
 Burial Shell Midden Village
 Surface Evidence Camp Material in plow zone
 Material below plow zone Buried evidence Intact Occupation floor
 Single component Evidence of features Stratified
 Multicomponent

Location

Under cultivation Never cultivated Previously cultivated
 Pastureland Woodland Floodplain
 Upland Sustaining erosion

Soil Drainage: excellent good fair poor

Slope: flat gentle moderate steep

Distance to nearest water from site (approx.)

Elevation: _____

5. SITE INVESTIGATION (append additional sheets, if necessary):

Surface--date(s)

Site map (Submit with form)
 Collection

Subsurface--date(s)

Testing: shovel coring other _____ unit size
no. of units _____ (Submit plan of units with form)

Excavation: unit size _____ no. of units

Investigator _____

Manuscript or published report(s) (reference fully):

Present repository of materials

6. COMPONENT(S) (cultural affiliation/dates):

7. LIST OF MATERIAL REMAINS (be specific as possible in identifying object and material):

If historic materials are evident, check here and fill out historic site form

8. MAP REFERENCES

USGS 7.5 Minute Series Quad. Name

UTM Coordinates

9. Photography