

## MONITORING INSPECTION REPORT FORM

SITE:	DATE:	
MONITOR'S NAME:	APPROX. TIME SPENT IN FIELD:	(hours
-	serve is in good condition	
with no signine	cant problems check this box.	
Was the parking area in good condition alo locks)? Was the vegetation trimmed around Comments/Action Taken/ What did you do abou		uding
Were the trails in good condition? Any blow downs, obstructions, erosi Action Taken/ What did you do about it?		
What are the conditions of the board wood; replacement necessary) Action Taken/ What did you do about it?	dwalks or bridges (if any)? (Loose boards/nails; rott	ing
Were there any signs of (check any that Vandalism Unauthorized vehicle activity Unauthorized Hunting Unauthorized	are appropriate):  Fire Safety Hazards Biking/Horseback Ridir  Litter Damaged Vegetation	
Please explain/ What did you do about it?:		
Did you notice any changes in surrounding	land use or status?	
Describe any interactions you had with pres	serve neighbors or visitors.	
Describe any significant wildlife or plant spelike to hear about anything unusual you obs	ecies you may have encountered during your visit. served!	We'd
General Comments. Did you notice any other	r problems or have suggestions for preserve improv	/ement?