

Place Site Visit Label Here

Site Visit Form

(One Station per page)

Project ID: _____

Date: _____ Time: _____ Personnel: _____

Waterbody: _____ Location: _____

Station ID: _____ Visit #: _____ HUC: _____ County: _____

Latitude: _____ Longitude: _____ Lat/Long Verified? By: _____

Elevation: _____ ft m Geo Method: **GPS** Other: _____ Datum: NAD27 **NAD83** WGS84

Samples Collected:	Sample ID:	Sample Collection Information/Preservation:
Water <input type="checkbox"/>		GRAB EW1
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
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Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
Analysis:		Preserved: HNO ₃ H ₂ SO ₄ H ₃ PO ₄ HCL Ice Frozen None
Sediment <input type="checkbox"/>		SED-1
Analysis:		Preserved: None Other:
Benthic Chl-a <input type="checkbox"/>		Sample Method: C=Core H=Hoop T=Template N=None
Composite at Lab <input type="checkbox"/> Ash-Free Dry Weight <input type="checkbox"/>		Sample Location: R=Right C=Center L=Left
Transect: A - B - C - D - E - F - G - H - I - J - K -		
Phytoplankton Chl-a <input type="checkbox"/>		D1 Filtered: _____ mL D2 Filtered: _____ mL
Phytoplankton CNP <input type="checkbox"/>		D1 Filtered: _____ mL D2 Filtered: _____ mL
Algae <input type="checkbox"/>		PERI-1-MOD PERI-1 OTHER:
Macroinvertebrates <input type="checkbox"/>		MAC-R-500 HESS OTHER:
Collection Reach Length (m):	# of Jars:	Mesh Size: 500 OTHER:

Field Measurements:	Time:	am pm	Field Assessments:
Water Temp: _____ °C °F	Air Temp: _____ °C °F		Field Forms: Fish Cover Form <input type="checkbox"/> Photographs <input type="checkbox"/>
Bar. Pressure: _____ mm/Hg	SC: _____ umho/cm		Aquatic Plant Tracking Form <input type="checkbox"/> Rosgen Form <input type="checkbox"/>
pH: _____ DO: _____ mg/L	Flow: _____ cfs		NRCS Form <input type="checkbox"/> EMAP Forms <input type="checkbox"/> Summary Form <input type="checkbox"/>
Flow Comments: Dry Bed <input type="checkbox"/> No Measurable Flow <input type="checkbox"/>			Channel Cross-Section <input type="checkbox"/> Other: _____
Flow Method: Meter <input type="checkbox"/> Float <input type="checkbox"/> Gage <input type="checkbox"/> Visual Est. <input type="checkbox"/>			Data Loggers: Temperature <input type="checkbox"/> YSI <input type="checkbox"/> TruTrack <input type="checkbox"/>
Turbidity: Clear <input type="checkbox"/> Slight <input type="checkbox"/> Turbid <input type="checkbox"/> Opaque <input type="checkbox"/>			AquaRods <input type="checkbox"/> Weather Station <input type="checkbox"/> Surveyor <input type="checkbox"/>

Comments: Only Transect F Total Site Length _____ m Average Wetted Width _____ m Transect Length _____ m

Chemistry Lab Information:		
Lab Samples Submitted to:	Account #:	Term Contract Number:
Contact Name & Phone:	EDD <input checked="" type="checkbox"/> Format: MT-eWQX Compatible	
1) Relinquished By & Date/Time:	1) Shipped By: Hand <input type="checkbox"/> FedEx/UPS <input type="checkbox"/> USPS <input type="checkbox"/>	1) Received By & Date/Time:
2) Relinquished By & Date/Time:	2) Shipped By: Hand <input type="checkbox"/> FedEx/UPS <input type="checkbox"/> USPS <input type="checkbox"/>	2) Received By & Date/Time:

Lab Use Only - Delivery Temperature: Wet Ice _____ °C Dry Ice _____ °C

Site Visit Form Instructions

1. Place a Site Visit Code label in the upper left corner (ONLY 1 SITE VISIT CODE PER FORM).
2. Place a Trip Label in the upper right corner. (Covering Project ID and Trip ID with label is alright.)
3. **Project ID:** If you do not have a Trip Label, enter the Project ID assigned by Data Management. If Project ID is not assigned, leave blank for Water Quality Database Manager.
4. **Trip ID:** If you do not have a Trip Label, enter the Trip ID assigned by Data Management. If Trip ID is not assigned, leave blank for Water Quality Database Manager.
5. **Date/Time:** Enter the date and time of the station visit.
6. **Personnel:** Enter the first and last name(s) of the personnel conducting field activities.
7. **Waterbody:** Enter the name of the waterbody such as "Missouri River".
8. **Location:** Description of sample location such as "upstream from bridge on Forest Service road 100". For confidentiality please DO NOT use proper names of people in the location field.
9. **Station ID:** If you have a Trip Label, enter the established ID. If there is no ID on the Trip Label, leave the field blank and Data Management will generate a Station ID when the SVF is submitted.
10. **Visit #:** Enter "1" if this is a new station. Leave blank if visit number is unknown.
11. **HUC:** If you do not have a Trip Label, enter the fourth code (8 digit) HUC the station falls within.
12. **County:** If you do not have a Trip Label, enter the county in which the station falls within.
13. **Lat/Long:** Latitude and Longitudes should be obtained in decimal degrees using a GPS unit reading **NAD83** whenever possible. If a lat/long is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
14. **Lat/Long Verified:** Latitudes and Longitudes should be verified immediately upon return from the field. Verify by plotting on a paper map or using a mapping website. Once the lat/long has been verified check the Verified box and enter initials after "By".
 - Do not make minor adjustments to measured values during verification; they are assumed to be correct within the limitations of the measurement system.
 - Gross errors should be corrected as follows: 1) Draw a single line through the erroneous value(s) and initial. Do not erase the original reading. 2) Write the corrected value in the comment field along with the method and datum used to derive the corrected value.
15. **Elevation:** Record elevation collected by GPS and circle the GPS datum used. If elevation is obtained by another method, the datum and method must be recorded in the Site Visit Comments.
16. **Samples Collected:** Check the box next to each activity that is collected during the station visit.
17. **Sample ID:** Write the Sample ID (Site Visit Code-sample identifier) for all of the samples collected.
18. **Sample Collection Procedure:** Circle the appropriate Sample Collection Procedure ID.
 - For each Chlorophyll a transect, record the sample collection method in the first space provided and the sample location in the second space provided (example: A: T - R).
 - For Phytoplankton, record the volume filtered for each sample collected.
19. **Analysis Requested:** Record the requested laboratory analysis for each chemistry sample and circle the preservative used.
20. **Field Measurements:** Record your field measurements in the spaces provided.
21. **Field Assessments:** Check the boxes next to each type of field assessment completed.
22. **Site Visit Comments:** Record general comments about the station visit, samples, and field measurements.
23. **Chemistry Lab Information:** If chemistry lab samples were taken, complete this section.
 - Lab Samples Submitted to: Enter name of laboratory where samples will be sent.
 - Account #: Enter account number at laboratory where samples will be sent.
 - Date Submitted: Record date the samples were received by the laboratory.
 - Sign and date the form each time the samples change possession.