



# NNHP

Species Observation Form



| SNAME  |  | SCOMNAME                |                  |                      |                     |
|--|--|-------------------------|------------------|----------------------|---------------------|
| Survey Site:   |  | State:                  |                  | County:              |                     |
| Identification Y N ?   |  |                         |                  |                      |                     |
| <b>Quad</b>  |  |                         |                  |                      |                     |
| Name:  |  |                         | Code:            |                      |                     |
| <b>UTM</b>   |  |                         |                  |                      |                     |
| Northing (Y):  |  | Zone                    | 12               | 13                   |                     |
| Easting (X):   |  | Datum                   | NAD 27           | Other:               |                     |
| Uncertainty:   |  | Lat:                    |                  | Long:                |                     |
| Townrange:   |  |                         | Section:         |                      |                     |
| Directions:  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
| <b>Surveyors</b>   |  |                         |                  |                      |                     |
| Name   |  | Title                   |                  | Organization         |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
| Survey Date:   |  | Last Obs:               |                  | First Obs:           |                     |
| Survey Type:   |  | <i>Imagery</i>          | <i>Secondary</i> | <i>Qualitative</i>   | <i>Quantitative</i> |
| <b>EO Rank</b>   |  | <b>EO Rank Comments</b> |                  | <b>EO Rank Date:</b> |                     |
| Condition<br>A B C D   |  |                         |                  |                      |                     |
| Size<br>A B C D  |  |                         |                  |                      |                     |
| Landscape Context<br>A B C D   |  |                         |                  |                      |                     |
| Basic EO Rank<br>A B C D   |  |                         |                  |                      |                     |
| <p><b>Size</b>-Quantitative measure of area abundance <i>eg:area of occupancy, pop abundance, density, fluctuation</i></p> <p><b>Condition</b>-Qualitative measure of biotic/abiotic factors, structures processes <u>within</u> EO <i>eg:reproduction &amp; health(species), development/maturity(communities), ecological processes, species composition and biological structure, abiotic physical / chemical factors</i></p> <p><b>Landscape Context</b>-Qualitative measure of biotic/abiotic factors, structures, processes <u>surrounding</u> the EO <i>same eg factors as condition egs.</i>      A=Excellent B=Good C=Fair D=Poor</p> |  |                         |                  |                      |                     |
| EO Data:   |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |
| Monitor/Research Needs:  |  |                         |                  |                      |                     |
|  |  |                         |                  |                      |                     |

LOCATORS

STATUS

(cont)

|   |                                      |                         |                |                        |                        |
|---|--------------------------------------|-------------------------|----------------|------------------------|------------------------|
| STATUS  |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
| DESCRIPTION                                   | General Description:                 |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   | Min Elevation:                       |                         | Max Elevation: |                        |                        |
| EO Observed Area (Size in Acres or Hectares): |                                      |                         |                |                        |                        |
| PROTECTION                                    | Protection Comments (Needs/Threats): |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   | Management Comments:                 |                         |                |                        |                        |
| OWNER   | Owner:                               |                         |                |                        |                        |
|   | Owner Comments:                      |                         |                |                        |                        |
| GENERAL                                       | General Comments:                    |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
| DOCUMENTATION                                 | Data Sensitivity                     | Y                       | N              | Confidence Extent:     | Y N ?                  |
|   | Photo                                | Y                       | N              |                        |                        |
|   | Transcriber:                         | Date:                   |                | Mapper:                | Date:                  |
|   | <b>Primary Reference</b>             |                         |                |                        |                        |
|   | Name                                 | Address                 |                |                        | Phone Number           |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   |                                      |                         |                |                        |                        |
|   | <b>Specimen(s)</b>                   |                         |                |                        |                        |
|   | Collector:                           | Collector#:             | Acquisition#:  |                        |                        |
| Year Collected:                               | Collection Code:                     |                         |                |                        |                        |
| FEATURE                                       | Source Feature Type                  | <i>Single Source EO</i> |                | <i>Multi-Source EO</i> |                        |
|   | Conceptual Feature Type              | <i>Point</i>            | <i>Line</i>    | <i>Polygon</i>         |                        |
|   | Spatial Uncertainty                  | <i>Negligible</i>       | <i>Linear</i>  | <i>Areal Delimited</i> | <i>Areal Estimated</i> |
|   | Areal Delimited Comments:            |                         |                |                        |                        |
|   | Areal Estimated Uncertainty:         |                         |                |                        |                        |

**Attach a 7 1/2 Minute Map with EO Location Signified**

Mail Completed Forms To:

NNHP

PO Box 1480

Window Rock, AZ 86515