

SHORELINE ASSESSMENT FORM for _____ **Spill** Page ___ of ___

1. GENERAL INFORMATION				Date (dd/mm/yy)	Time (24h standard/daylight)	Tide Height														
Segment ID:						L/M/H														
Segment Name:					hrs to	hrs	H/M/L													
Survey By: Foot / Boat / Helicopter / Overlook / _____					Sun / Clouds / Fog / Rain / Snow / Windy															
2. SURVEY TEAM No. ____		Name			Organization			Phone Number												
3. SEGMENT		Total Length ____m/yd		Length Surveyed ____m/yd		Differential GPS		Yes/No												
Start GPS: LAT		____ deg.		____ min		LONG		____ deg.		____ min										
End GPS: LAT		____ deg.		____ min		LONG		____ deg.		____ min										
4. SHORELINE TYPE		Select only ONE Primary (P) and ANY Secondary (S) types present																		
		Rocky Cliffs								Riprap										
		Exposed Man-made Structures								Exposed Tidal Flats										
		Wave-cut Platforms								Sheltered Rocky Shores										
		Fine-Medium grained Sand Beaches								Sheltered Man-made Structures										
		Coarse-grained Sand Beaches								Sheltered Tidal Flats										
		Mixed Sand and Gravel Beaches								Wetlands										
		Gravel Beaches								Other _____										
5. OPERATIONAL FEATURES		Oiled Debris? Yes / No		Type _____		Amount _____		bags												
		Direct backshore access? Yes / No		Access restrictions _____																
		Alongshore access from next segment? Yes / No		Suitable backshore staging? Yes / No																
6. SURFACE OILING CONDITIONS		Begin with "A" in the lowest tidal zone																		
Zone ID	Tidal Zone				Oil Cover			Oil Thickness					Oil Character							
	LI	MI	UI	SU	Length m/ft	Width m/ft	Distr. %	PO	CV	CT	ST	FL	FR	MS	TB	TC	SR	AP	No	
7. SUBSURFACE OILING CONDITIONS		Use letter of Zone location plus Number of trench, e.g., "A1"																		
Trench No.	Tidal Zone				Trench Depth cm / in	Oiled Interval cm-cm/in-in	Subsurface Oil Character					Water Table cm / in	Sheen Color B,R,S,N	Clean Below? Yes/No						
	LI	MI	UI	SU			OP	PP	OR	OF	TR				No					
8. COMMENTS		Cleanup Recommendations; Ecological/Recreational/Cultural Issues/Wildlife Obs.																		
Sketch: Yes / No Photos: Yes / No (Roll# _____ Frames _____) Video Tape: Yes / No (Tape# _____)																				