



**OHIO HISTORICAL SOCIETY**  
*Ohio Historic Preservation Office*  
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Site No. 33-\_\_\_\_\_-\_\_\_\_\_

**Preliminary Documentation Form for Ohio Archaeological Sites**

Revised 8/9/2005

Please carefully review instructions on back of form. Use black ink for all page 1 information.

**IDENTIFICATION**

Site Name \_\_\_\_\_

County Name \_\_\_\_\_ Township Name \_\_\_\_\_ Section # \_\_\_\_\_

USGS 7.5' Quadrangle Name \_\_\_\_\_

UTM (optional): Zone: \_\_\_\_\_; Easting: \_\_\_\_\_; Northing: \_\_\_\_\_

**TEMPORAL AFFILIATION** (please check appropriate spaces)

Prehistoric \_\_\_\_\_ Historic \_\_\_\_\_ Both \_\_\_\_\_

Prehistoric materials collected or present at site: Lithics \_\_\_\_\_ Ceramic \_\_\_\_\_ Faunal \_\_\_\_\_ Metal \_\_\_\_\_

Human Remains \_\_\_\_\_ Floral \_\_\_\_\_ Other (specify) \_\_\_\_\_

**REPORTING INFORMATION**

Date of Form (Year/Month) \_\_\_\_\_ Date of Last Field Visit (Year/Month) \_\_\_\_\_

Name(s) of Form Preparer(s) \_\_\_\_\_

Address (include city, state and zip) \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_

Landowner Name (optional) \_\_\_\_\_

Landowner Address (include city, state and zip) \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_ Email \_\_\_\_\_

Site Area: \_\_\_\_\_ meters<sup>2</sup> (Approximation \_\_\_\_ )



Site Description/Site History/Discussion

## Instructions for Completing the Preliminary Documentation Form for Archeological Sites in the Ohio Archaeological Inventory

*NOTE: This form is not to be used by archeologists acting in the capacity as professional consultant. Professional consultants are required to complete the Ohio Archaeological Inventory Form or Isolated Find Form.*

### IDENTIFICATION

Site Name: Give a name to the site that is relevant to the site, the landowner, or the general area.

Section #: Give the number of the section of the township in which the site is located.

USGS 7.5' Quadrangle Name: Name of the USGS 7.5' Quadrangle map on which the site occurs. Attach a copy of the appropriate portion of this map indicating the location and boundaries of the site. Please be as exact as possible.

### TEMPORAL AFFILIATION

Check the appropriate spaces indicating the type of site, and the types of artifacts collected and/or are present on the site. Use the Description/Discussion section or a Continuation Sheet to provide site and artifact descriptions.

### REPORTING INFORMATION

Date of Last Field Visit: Year and month when the site was *last visited* by the form preparer or the field surveyor.

Name(s) of Form Preparer(s): Name of the person(s) completing this form.

Address and phone number: Address and telephone number of a principle person completing this form.

Site Area: Provide approximate dimensions of site in square meters (note: 1 yard equals approximately 1 meter, 10 x 10 m = 100 m<sup>2</sup>). Approximation - indicate with a check mark if you consider this an approximation.

### SITE DESCRIPTION/SITE HISTORY/DISCUSSION

Describe the site and provide any history or other details of which you are aware. You may wish to include the name(s) and contact information of others who wish to be contacted. Describe the conditions of the site and potential threats to its preservation. Use a Continuation Sheet as necessary.

### SKETCH MAP (optional)

The sketch map should illustrate the site location in relation to natural and man-made features (streams, hills, roads, etc). Be sure to label names of features, and provide a scale. The topographic map (see **Identification**, above) should serve as the principal location map, and the sketch map should be used to depict greater detail.

**Provide sketch map below:**



Scale:

