

Site Visit Forms

Crew Member Initials: _____

Site Name/Code: _____

Site Visit Crew Members Information

Crew Members (First and Last Names): _____

Crew Leader (Signatory) and Contact Information:

Full Name: _____

Full Address (postal code included): _____

Phone Number: (____)-____-____ Email address: _____

Site Visit Information

Location information

GPS Datum: GRS8 WGS84 or GRS8 NAD83 or Other: _____

Coordinates: _____

Lat/Long DMS or Lat/Long DD or UTM

Elevation: _____ masl or fasl

Directions: _____

Assessment and Sampling Conditions

Weather Conditions (check all that apply):

Sun Cloud Rain Snow Still wind Light breeze Windy

Additional Comments: _____

What was assessed/sampled during this visit (check all that apply):

Site description Vegetation Assessment Waterbodies Assessment

Wildlife Exposure Assessment Water Samples Soil Samples Other : _____

Site Description

Odourous air presence: Strong Moderate Mild Not detected

Description: _____

Erosion pathways present: Yes No

Vegetation growth within site: Yes No

Waterbodies within site area (check all that apply):

Ephemeral Wetlands/Ponds Streams/Creeks/Rivers

Permanent Wetlands/Ponds Streams/Creeks/Rivers Lakes

Additional Comments: _____

Mining Infrastructure Present: Yes No

Description: _____

Adjacent Land Usage (check all that apply):

NORTH

Forestry Mining Other industry Urban development Agriculture

Parkland Urban Residential Rural Residential Waterbodies Naturalized

Additional Comments: _____

EAST

Forestry Mining Other industry Urban development Agriculture

Parkland Urban Residential Rural Residential Waterbodies Naturalized

Additional Comments: _____

SOUTH

Forestry Mining Other industry Urban development Agriculture

Parkland Urban Residential Rural Residential Waterbodies Naturalized

Additional Comments: _____

WEST doesn't have room for additional comments

Forestry Mining Other industry Urban development Agriculture

Parkland Urban Residential Rural Residential Waterbodies Naturalized

Additional Comments: _____

Crew Member Initials: _____

Site Name/Code: _____

Dimensions and Layout

Mesoslope position:

Crest Upper Middle Lower Toe Depression Level

Aspect: N NE E SE S SW W NW None/Flat

Tailings Measurements (At least two):

Transect Direction/Description	Length (m)	Slope (degrees)

Estimated size method: GPS track Aerial photos Satellite photos Other : _____

Additional Comments: _____

Site Drawing Map

Include North arrow, waterbodies, and length measurements

Qualitative Contamination Assessment

Vegetation Assessment - Terrestrial

Deciduous trees	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaf loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bark loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregular growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

Coniferous trees	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaf loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bark loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregular growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

Shrubs	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaf loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregular growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

Forbes/grasses	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patchy growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

Vegetation Assessment – Terrestrial continued

Moss	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High (4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patchy growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

FINAL AVERAGE SCORE: High (3-4) Medium (2-3) Low (1-2)

Vegetation Assessment – Riparian/Aquatic Macrophyte Plants

Shrubs	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaf loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irregular growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	Score (average ranking): _____			

Vegetation not visible

Additional Comments: _____

Macrophytes	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaf loss	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patchy growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Vegetation not visible

Additional Comments: _____

Moss	Presence (% total vegetation): <1 <input type="checkbox"/> 1-25 <input type="checkbox"/> 26-50 <input type="checkbox"/> 51-75 <input type="checkbox"/> 76-100 <input type="checkbox"/>			
Health Indicator	High(4)	Medium(3)	Low(2)	Not visible(1)
Leaf discolouration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection/Disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patchy growth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall signs of stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Vegetation not visible

Additional Comments: _____

FINAL AVERAGE SCORE: High (3-4) Medium (2-3) Low (1-2)

Crew Member Initials: _____

Site Name/Code: _____

Waterbodies Assessment page ____ of ____

ID Code	Location description	Waterbody type	Ephemeral?	Dominant sediment type	Sediment colour	Periphyton/algae description	Sample taken during assessment?	Additional comments
		Wetland <input type="checkbox"/> Sm Creek <input type="checkbox"/> Lrg Creek <input type="checkbox"/> Lake <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/>	Boulders <input type="checkbox"/> Cobbles <input type="checkbox"/> Gravel <input type="checkbox"/> Sand <input type="checkbox"/> Soil <input type="checkbox"/> Not visible <input type="checkbox"/>	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/> Sample ID(s):	
		Wetland <input type="checkbox"/> Sm Creek <input type="checkbox"/> Lrg Creek <input type="checkbox"/> Lake <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/>	Boulders <input type="checkbox"/> Cobbles <input type="checkbox"/> Gravel <input type="checkbox"/> Sand <input type="checkbox"/> Soil <input type="checkbox"/> Not visible <input type="checkbox"/>	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/> Sample ID(s):	
		Wetland <input type="checkbox"/> Sm Creek <input type="checkbox"/> Lrg Creek <input type="checkbox"/> Lake <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/>	Boulders <input type="checkbox"/> Cobbles <input type="checkbox"/> Gravel <input type="checkbox"/> Sand <input type="checkbox"/> Soil <input type="checkbox"/> Not visible <input type="checkbox"/>	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/> Sample ID(s):	
		Wetland <input type="checkbox"/> Sm Creek <input type="checkbox"/> Lrg Creek <input type="checkbox"/> Lake <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/>	Boulders <input type="checkbox"/> Cobbles <input type="checkbox"/> Gravel <input type="checkbox"/> Sand <input type="checkbox"/> Soil <input type="checkbox"/> Not visible <input type="checkbox"/>	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	Not visible <input type="checkbox"/> Other <input type="checkbox"/> :	No <input type="checkbox"/> Yes <input type="checkbox"/> Sample ID(s):	

Crew Member Initials: _____

Site Name/Code: _____

Wildlife Exposure Assessment

Browse evidence? Yes No

Nests in adjacent trees? Yes No

Wildlife-made cavities present in trees? Yes No

If yes, comments: _____

Tracks present? Yes No

If yes, comments: _____

Wildlife sightings while on site? Yes No

If yes, comments: _____

Scat Survey

Transect	Length (m)	Deer	Elk	Moose	Sheep	Hare	Other	Comments
N/S Transect								
E/W Transect								
TOTALS								

Additional comments:

Crew Member Initials: _____

Site Name/Code: _____

Sampling Inventory page: ____ of ____

ID code	Date (YYYY/MM/DD)	Coordinates	Sample type	Sample and location description	Shipping date (YYYY/MM/DD)	Additional comments
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	
	____/____/____		Water <input type="checkbox"/> Soil <input type="checkbox"/> Other <input type="checkbox"/> : _____		Same as sampling date <input type="checkbox"/> Other <input type="checkbox"/> : ____/____/____	

Crew Member Initials: _____

Site Name/Code: _____

Access Road Assessment

Crew Members Information

Crew Members (First and Last Names): _____

Crew Leader (Signatory) and Contact Information:

Full Name: _____

Full Address (postal code included): _____

Phone Number: (____)-____-____ Email address: _____

Description and Location

Description

Name of Road: _____ General Location: _____

Type of Road: FSR Resource Private

Owner/Maintainer/Deactivated: _____ Radio Frequency: _____

Distance of Route (from major road to site) (km): _____

Location

GPS Datum: GRS8 WGS84 GRS8 NAD83 Other: _____

Lat/Long DMS Lat/Long DD UTM

GPS Track Name: _____ Map Attached: Device: _____

Start of Route

Coordinates: _____

Elevation: _____ masl fasl

End of Route

Coordinates: _____

Elevation: _____ masl fasl

Crew Member Initials: _____

Site Name/Code: _____

Route Description/Directions

Grade

Average Sustained Grade (%): _____

Maximum Favourable Pitch (<100m) (%): _____ Duration (m): _____

Maximum Adverse Pitch (<100m) (%): _____ Duration (m): _____

Notes/photo location as applicable: _____

Switchbacks

If conditions vary, record data for the most restrictive switchback (max grade/min radius)

Running surface width at switchback (m): _____

Radius (m): _____ (R) Diameter [2R] (m): _____ (D)

Length of Curve [πR] (m): _____ (LOC)

Slope from bottom to top of curve (%): _____ (S)

Change in elevation [$S \cdot D / 100$] (m): _____ (E)

Switchback Grade [$E / LOC \cdot 100$] (%): _____

Notes:/photo location as applicable: _____

Side Slopes

Estimated Average Side Slope (%): _____

Maximum Side Slope (%): _____ Duration (m): _____

Notes/photo location as applicable: _____

Crew Member Initials: _____

Site Name/Code: _____

Condition of Running Surface

Width of running surface (m): _____

Check all that apply:

Location (km-km/frequency of occurrence)

Washboarding: _____

Potholes: _____

Tire rutting: _____

Road surface erosion: _____

Loose rock: _____

Brush on road _____

Notes/photo location as applicable: _____

Structural Integrity

Check all that apply:

Location (km-km/frequency of occurrence)

Cut/fill slope failure: _____

Tension cracks visible: _____

Evidence of slides or mass land movement: _____

Notes/photo location as applicable: _____

Drainage

Check all that apply:

Location (km-km/frequency of occurrence)

Culverts blocked: _____

Culvert size insufficient: _____

Ditches obstructed: _____

Waterbars/crossditches: _____ Depth (cm): _____

Notes/photo location as applicable: _____

Crew Member Initials: _____

Site Name/Code: _____

Water Crossings

Number of bridge crossings on route: _____

Number of open stream crossings: _____

Number of non-classified drainage (NCD) crossings: _____

Notes (width, depth, substrate of crossings, bridges requiring maintenance to be usable)/photo location as applicable: _____

Access Road Scoring

Accessibility				Points:
Select the most appropriate score from each row:				
Distance of Route				
<10 km 0 pts	10-20 km 1 pt	21-30 km 3 pts	>30 km 5 pts	
Average Sustained Grade				
<7% 0 pts	7-10% 2 pts	10-15% 5 pts	>15% 10 pts	
Maximum Pitch (<100m)				
<10% 0 pts	10-15% 2 pts	15-20% 5 pts	>21% 10 pts	
Maximum Switchback Grade				
<6% 0 pts	6-8% 5 pts	>9% 10 pts		
Minimum Switchback Radius				
<15 m 10 pts	15-18% 3 pts	>18% 0 pts		
Accessibility Score (points total):				

Score Interpretation:

<10 pts = Good Access – access is likely possible for most equipment

10-15 pts= Moderate Access - some equipment may be unable to access site

15-25 pts = Difficult Access - equipment access will be limited

>25 pts = Likely Not Accessible - access may not be possible for most heavy equipment

Crew Member Initials: _____

Site Name/Code: _____

Access Road Scoring Continued

Road Condition (Upgrades/Maintenance Required?)

Condition of Running Surface

Add 1 point for each of the listed issues that is present for less than 1 kilometre (additive). Add 5 points for each of the listed issues that is present for more than 1 kilometre.

Structural Integrity

Add 5 points for each of the listed issues that is present for less than 1 kilometre (additive). Add 10 points for each of the listed issues that is present for more than 1 kilometre.

Drainage

Add 1 point for each of the listed issues that is present infrequently. Add 5 points for each of the listed issues that is present frequently.

Water Crossings

Add 10 points for each bridge crossing requiring maintenance. Add 10 points for any open stream crossings. Add 5 points for any NCD crossings.

Maintenance and Condition Score (points total):

Score Interpretation: This section is intended as a tool to estimate the amount of maintenance that would be required to make the road safe and usable, and compare this amount with other routes or locations.

Notes: _____

Additional Notes: _____

Glossary of Terms

Abandoned tailings: known and identified tailings, on private or public property, for which no remediation plan has been established.

Accessibility: the ease and safety of site access for required equipment.

Bankfull width: width of stream channel that is within the 1.5 year flood plain. Indicators of bankfull width are lack of growth of perennial plants, undercut banks, and sand and gravel deposition.

Boulders: rock with a diameter greater than 256mm

Cap and cover: Action in which tailings are isolated on site by placing them within a barrier, and the top barrier is covered by topsoil for land reclamation

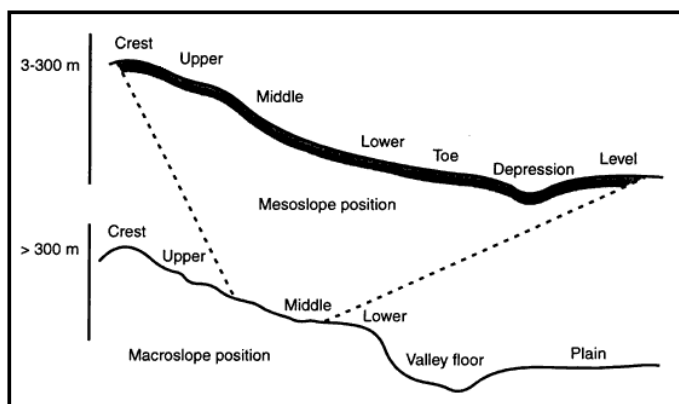
Cobble: rock with a diameter between 64 mm and 256 mm

Ephemeral waterbody: any waterbody that will only exist for a short period of time following precipitation or snowmelt events.

Gravel: rock with a diameter between 2 mm to 64 mm

Large Creek: a flowing water body system with a bankfull width on average greater or equal to than 5 m

Mesoslope position: description of the position of the site with respect to the slope of the surrounding location.



From Steen et al. 1990

Mining infrastructure: any structure indirectly and directly related to extraction and processing of ore, including electrical processing, and offices, and other buildings associated with mining activity.

Non Classified Drainage: Small ephemeral or intermittent streams that do not meet the Environmental Protection and Management Regulation definition and classifications of a stream (S1-S6) are classified as “Non-Classified Drainages (NCD)”.

Recycling tailings: action in which tailings are processed to extract remaining metals

Restore: action to return the site to a certain historical ecological integrity

Sand: rock or rock particle with a diameter less than 2 mm

Small Creek: a flowing water body system with a bankfull width on average less than 5 m

Tailings: Any rock, mill or waste material that is produced from mining activity.