

WEED INVENTORY FIELD FORM

General Information

Site Number _____ Collection Date (YYYYMMDD) ____ _
Examiner Name: Last _____ First: _____ Middle Initial ____
Country ____ _ State or Province: ____ _
County/Municipality ____ _ National Ownership ____ _
Local Ownership ____ _ Source of Data: ____ _

Location Information

Quad No ____ _ Quad Name _____

Describe the site location through one or more of the following methods must be entered. Users with GIS technology may link the location directly with that information.

1/4 1/4 1/4 1/4 Sec ____ _ 1/4 1/4 1/4 Sec ____ _ 1/4 1/4 Sec ____ _ 1/4 Sec ____ _ Sec ____ _
Township ____ _ Range ____ _ Meridian ____ _

Metes and Bounds: Enter on the comment field, located on the back of this form.

Latitude/Longitude Datum ____ _
Latitude: Degrees ____ _ Minutes ____ _ Seconds ____ _ Direction: ____N
Longitude: Degrees ____ _ Minutes ____ _ Seconds ____ _ Direction: ____W

UTM: UTM Datum Zone ____ _ UTM Year ____ _
UTM Easting ____ _ UTM Northing ____ _

Plant Information

GENUS _____ SPECIES _____
INTRASPECIFIC NAME(S) _____
Authority _____ PLANT CODE ____ _
Common Name _____
Infested Area ____ _ UNIT OF MEASURE ____ _
Gross Area ____ _ UNIT OF MEASURE ____ _
Canopy Cover ____ _%

