

Appendix C

Field Forms

Rayonier Mill Off-Property Dioxin Soil Study

Field Sampling Form

Site ID: _____	Date: _____	Weather: _____
Property address: _____		
Property owner: _____		
Owner Phone No. _____		
Property tenant/resident: _____		
Tenant /Resident Phone No. _____		
Received signed authorization to sample property?		Yes ___ No ___
Sampling observed by project archaeologist?		Yes ___ No ___

Screening Criteria for Developed Sites:					
• Approximate age of the home (exclude homes built after 1977).					
• Year home purchased.					
• Have areas been landscaped or regraded? (Y/N) Since when?					
Yes ___ No ___	Front _____	L-side _____	R-side _____	Back _____	
• Which part of the site is least disturbed?					
	Front _____	L-side _____	R-side _____	Back _____	
• Are there fire pits or burn barrels visible? (Y/N)					
Yes ___ No ___	Onsite _____		Adjacent _____		
• Does the home have a wood burning fireplace? (Y/N) - (If so, note location on site sketch).					
Yes ___ No ___					
• Are there gardens, planting beds, play areas, dog runs, other disturbed areas to avoid? (Y/N)					
Yes ___ No ___	Front _____	L-side _____	R-side _____	Back _____	
• Note setbacks from driveways, busy roads, rail lines, downspouts, drip lines, areas with treated wood on site sketch.					
• Are there steeply sloped areas to exclude or areas potentially shielded from deposition? (Y/N)					
Yes ___ No ___	Steep _____		Shielded _____		

Screening Criteria for Undeveloped Sites:					
• Approximate size of undeveloped site? _____ Acres					
Are trees located on property? (Y/N)					
Yes ___ No ___					
• Are most trees onsite mature (30 years old or older)? (Y/N) - (Note aerial coverage on site map)					
Yes ___ No ___					
• Site recently replanted or evidence of recent fires? (Y/N)					
Yes ___ No ___					
• Obvious paths used by animals or humans to exclude? (Y/N)					
Yes ___ No ___					
• Erosion channels or wet areas to exclude? (Y/N)					
Yes ___ No ___	Erosion channel _____		Wet areas _____		
• Are there steeply sloped areas to exclude or areas potentially shielded from deposition? (Y/N)					
Yes ___ No ___	Steep _____		Shielded _____		
• Are there transition areas from forest to developed land where dumping is more likely to occur? (Y/N)					
Yes ___ No ___					
• Note setbacks from driveways, busy roads, rail lines, downspouts, drip lines, areas with treated wood on site sketch?					

- Collect samples from 0 - 10 cm (0 - 4 inches) in least disturbed areas.
- Developed properties: collect subsamples from 4 corners & center of a 3 m (10-ft) x 3 m (10-ft) square area.
- Undeveloped properties: if obstructions are encountered, may expand from 3 m x 3 m square and collect samples up to 15 m (50 ft) apart.

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Sample Collection Data Sample ID _____ Time collected _____ Sample soil description (color and grain size) _____ Sampler names _____ Photo numbers _____ GPS coordinates__ Lat. _____ Long. _____
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Site Sketch (include north arrow, scale, site boundaries, site features [include chimney], sample points)
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Notes:

Rayonier Mill Off-Property Soil Dioxin Study Cultural Resources Monitoring Form

Sample ID #: _____

Date and Time: _____

Sample Locale Description (include UTM and property owner):

Ground Surface Characteristics:

Photograph Description, ID, Time:

(photograph to be taken once detritus has been cleared from sample area and the sample locales have been outlined)

Sample Notes (include anything regarding stratigraphy, inclusions, artifacts etc):

Artifacts Found? Y N

(if yes, documentation and notification will proceed as outlined in the Cultural Resources Monitoring and Reporting Protocol)

Signature: _____



AXYS

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AXYS CLIENT #: **9940**

REPORT TO:			INVOICE TO:			ANALYSIS REQUESTED					
Company _____			Company _____								
Address _____			Address _____								
_____			_____								
Contact _____			Contact _____								
Phone _____			Phone _____								
FAX _____			FAX _____								
E-mail _____			E-mail _____								
Project Name/Number: _____			Sampler's Name: _____								
			Signature: _____								
Client Sample Identification	Matrix	Sampling Date	Sampling Time	Container Type/No.	AXYS Lab Sample ID (Lab use only)						
Relinquished by (Signature)	Date	Time	Received by (Signature)			Courier	Waybill No.				
			Date				Time				
Relinquished by (Signature)	Date	Time	Received by (Signature)			Sample Receipt					
			Date				Time				
Remarks						Cooler					
						Temp °C					
						Custody Seal #					
						Seal Intact					Y / N
						Sample Tags					Y / N

