

Sites:

- Site ID
 - *Site identification – this can be a name, ID number, etc.*
- Observation Date & Time
 - *Date and time of initial site visit*
- Ownership
 - *Ownership of the property – Association, Commercial, School, Private, Public*
- Property Owner Name
 - *Name of the property owner*
- Property Owner Address
 - *Property owner's address*
- Property Owner City
 - *City in which property owner is located.*
- Property Owner County
 - *County in which property owner is located.*
- Property Owner State
 - *State in which property owner is located*
- Property Owner Zip Code
 - *Zip code in which property owner is location.*
- Location
 - *General location of the site – coordinates, address, etc.*
- Associated Group
 - *CISMA that is involved with the treatment*
- Associated Project
 - *Is this a Federal, State or Locally funded project?*
- Associated Grant
 - *Is this project funded by MISGP, GLRI, SOGL or another grant?*
- Notes
 - *Any additional notes.*

Terrestrial Treatments (Polygons/Lines):

- Control Method
 - *Control method that is being used*

- Site ID
 - *Site identification – this can be a name, ID number, address, etc.*
- Associated Group
 - *CISMA / Group that is involved with the treatment, select from dropdown.*
- Observation Date & Time
 - *Treatment date and time*
- Treatment Type
 - *Is this treatment a retreatment or the initial treatment at this site?*
- Address / Location
 - *General description of the treatment location – coordinates, address, etc.*
- Company Name(s) (If different from Permittee)
 - *Company name involved with the treatment if different from the Permittee*
- Applicators / Workers
 - *List names of chemical Applicators and workers involved with the treatment*
- For Control Of (Target Species)
 - *List the species that is being targeted with this treatment*
- Application Method
 - *Select the chemical application method being used at this treatment site.*
- Chemical Used
 - *Name and active ingredient of the chemical being used at this treatment site.*
- EPA Registration No. / Concentration
 - *Select the EPA Registration number and concentration of the chemical being used at this treatment site.*
- Chemical Used #2
 - *If more than 1 chemical is used at the treatment site, select the second chemical and active ingredient being used at this site.*
- EPA Registration No. / Concentration #2
 - *Select the EPA registration number and concentration of the second chemical being used at this treatment site.*
- Chemical Used #3
 - *If a third chemical is being used at the treatment site, please select the third chemical and active ingredient being used at this treatment site.*
- EPA Registration No. / Concentration #3
 - *Select the EPA registration and concentration of the third chemical being used at this location.*
- Adjuvant

- *Select the adjuvant that is being used.*
- Dilutant
 - *Select the dilutant being used.*
- Dye Used
 - *Are you using dye with your chemical application at this site?*
- Amount of Mixture Used (GAL)
 - *Amount of mixture used, in gallons, during this treatment written as a number.*
- Mix Rate (OZ/GAL)
 - *Mix rate, in ounces per gallon, of chemicals mixed into dilutant*
- Total Active Ingredient Used (OZ)
 - *Total ounces of active ingredient used during this treatment.*
- Rate of Application (oz / acre)
 - *Ounces per acre rate of application for this treatment written out as a fraction (example: 5 oz/1 acre)*
- Application Area (acres)
 - *Total application area in acres, this should be the area treated and not the area of the whole site.*
- Equipment Used
 - *Did you use any equipment during this treatment – if so what?*
- Number of Bags Filled
 - *Number of bags filled if performing manual treatments.*
- Weight Estimate
 - *Weight estimate of biomass removed.*
- Total Person Hours
 - *Total person hours spent on this treatment.*
- Phenology
 - *Phenology of plants being treated.*
- Weather Conditions
 - *Current weather conditions*
- Temperature (F)
 - *Temperature, in Fahrenheit, during treatment.*
- Wind Speed (MPH)
 - *Wind speed, in miles per hour, during treatment.*
- Wind Direction
 - *Direction of wind during treatment.*
- Rain

- *Rain at any point before, during or after treatment.*
- Effectiveness
 - *Effectiveness of treatment – can be updated at any time.*
- PDMP
 - *Whether this pest control activity was addressed in the PDMP prior to pesticide application.*
- Notes
 - *Additional information / comments*

Prescribed Fire

- Site ID
 - *Site identification – this can be a name, ID number, etc.*
- Associated Group
 - *CISMA / group involved with the treatment*
- Treatment Date
 - *Date and time of treatment*
- Treatment Type
 - *Was this treatment an initial treatment or a re-treatment*
- Address / Location
 - *General description of the location – this can be an address, coordinates, etc.*
- Applicators / Workers
 - *Name of applicators / workers involved with the treatment*
- Target Species
 - *Invasive species being targeted by this treatment*
- Unit Area
- Forecasted Weather
- Observed Weather
- Days Since Rain
- Days Until Next Rain
- Invasives Observed in Unit
- Fine Fuel Moisture Code (FFMC)
- Initial Spread index (ISI)
- Drought Code (DC)
- Duff Moisture Code (DMC)

- Build-up Index (BUI)
- Primary Fuel Types
- Relative Humidity (RH)
- Rate of Spread / Residence Time / Flame Length (ROS)
- Burn Frequency for Unit
- Flame Temps
- Notes

Aquatic Treatments:

- Control Method
 - *Control method for this treatment*
- Site ID
 - *Site identification – this can be a name, ID number, etc.*
- Associated Group
 - *CISMA / group involved in this treatment*
- Treatment Date
 - *Treatment date and time*
- Treatment Type
 - *Is this treatment an initial treatment or a re-treatment?*
- Address / Location
 - *General description of the location – this can be an address, coordinates, etc.*
- Water Body
 - *Name of water body being treated*
- Managing Entity Company
 - *Name of company completing treatment*
- Managing Entity Name
 - *Name of point of contact from this entity*
- Managing Entity E-mail
 - *Email of the project contact of the company completing treatments*
- Managing Entity Phone
 - *Phone number for the point of contact of the company completing treatments*
- NPDES COC #
 - *Permit number of the NPDES permit that covers the treatment being completed*

- Permittee Name
 - *Name on the ANC permit*
- Permit Number
 - *Permit number for the ANC permit that is covering the work being completed*
- Applicators / Workers
 - *Name of the chemical applicator(s) and/or workers involved in this treatment*
- For Control Of (Target Species)
 - *Name of the invasive species you are targeting with this treatment*
- Application Method
 - *Application method*
- Chemical Used
 - *Chemical name and active ingredient used during this treatment*
- EPA Registration No. / Concentration
 - *EPA Registration number and concentration of chemical used during this treatment*
- Chemical Used #2
 - *If an additional chemical is used, select the chemical name and active ingredient of the second chemical.*
- EPA Registration No. / Concentration #2
 - *EPA registration number and concentration of second chemical used*
- Adjuvant
 - *Adjuvant used during this chemical treatment*
- Dilutant
 - *Dilutant used during this chemical treatment*
- Dye Used
 - *Is dye being used during this chemical treatment*
- Amount of Mixture Used (GAL)
 - *Amount of chemical mixture used during this chemical treatment in gallons.*
- Mix Rate (OZ/GAL)
 - *Chemical mix rate in ounces per gallon mixed into dilutant.*
- Total Active Ingredient Used (OZ)
 - *Total active ingredient used during this treatment in ounces*
- Rate of Application (oz / acre)
 - *Ounces per acre rate of application for this treatment written out as a fraction (example: 5 oz/1 acre)*
- Application Area (acres)

- *Total application area in acres*
- Equipment Used
 - *Did you use any equipment during this treatment – if so what?*
- Total Person Hours
 - *Total person hours spent on this treatment*
- Phenology
 - *Phenology of plants at time of treatment*
- Weather Conditions
 - *Current weather conditions at time of treatment*
- Temperature
 - *Current temperature, in Fahrenheit, at time of treatment*
- Wind Speed (MPH)
 - *Current wind speed, in miles per hour, at time of treatment.*
- Wind Direction
 - *Wind direction at time of treatment*
- Rain
 - *Was there any rain prior, during or after the treatment was performed?*
- Effectiveness
 - *Effectiveness of treatment – this can be modified at any time.*
- PDMP
 - *Whether this pest control activity was addressed in the PDMP prior to pesticide application.*
- Notes
 - *Additional notes / comments regarding treatment*

Monitoring

- Site ID
 - *Site identification – this can be a name, ID number, etc.*
- Associated Group
 - *CISMA / group involved with this treatment*
- Observation Date
 - *Observation date and time*
- Location Center Latitude
 - *Latitude of location center*
- Location Center Longitude

- *Longitude of location center*
- Target Species
 - *Species being monitored*
- Notes
 - Additional notes / comments regarding treatment

Monitoring Plots

- Site ID
 - *Site identification – this can be a name, ID number, etc.*
- Pre or Post Monitoring
- Season
- Date
- Percent Cover of Target Species
- Percent Cover of Native Flora
- Stem Count
- Native Inventory
- Control Code
- Treatment Type
- Percent Bare Ground

Restoration

- Site ID
- Ecosystem Type
- Year Declared Restored
- Next Steps / Maintenance Plan
- Monitoring Plan