



The Nature Conservancy in Rhode Island
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PRESERVE MONITORING REPORT

Preserve Name: _____ Date of Visit: _____
Monitor's Name: _____ Phone: _____ Time in/out: _____

**IF THE PRESERVE IS IN GOOD CONDITION
WITH NO SIGNIFICANT PROBLEMS CHECK THIS BOX.**

Were all signs, kiosks, structures, gates in place and in good condition?

Are the trails (if any) in good condition?

Any blow downs, obstructions, erosion or other problems?

What are the condition of bog bridges (if any)? (loose boards/nails; rotting wood; replacement necessary)

Were there any signs of (check any that are appropriate):

Fires Vandalism Motorized Vehicles Bicycles Camping
Litter Safety Hazards Damaged Vegetation Fishing Dumping
Illegal Hunting

Please explain:

Were there any significant changes in natural features? (Such as fire, dramatic changes in water level, or distressed vegetation)

Did you notice any changes in surrounding land use or status?

Did you notice any other problems?

Did you notice any unusual plants or wildlife?

**THIS INFORMATION IS VERY USEFUL.
THANKS FOR YOUR HELP!**