



TOWN OF PEMBROKE CONSERVATION COMMISSION

CONSERVATION PROPERTY MONITORING REPORT

DATE OF VISIT: ____/____/____

PROPERTY NAME: _____

REASON FOR VISIT: _____

MONITOR(S): _____

ACTIONS TAKEN (Check and describe if appropriate):

- ☐ Walked Boundaries: _____
- ☐ Walked Trails: _____
- ☐ Walked Interior: _____
- ☐ GPS Data Collected: _____
- ☐ Checked Boundary Markers: _____
- ☐ Checked Signage: _____
- ☐ Removed Trash: _____
- ☐ Other: _____

FINDINGS (Describe and attach maps and/or photos if necessary):

Boundary Conditions and Marking: _____

Usage Evident: _____

Significant Natural Changes: _____

Man-made Alterations: _____

Potential Violations: _____

FOLLOW-UP ACTIONS REQUIRED: _____

OTHER COMMENTS: _____

SIGNATURE: _____ DATE: ____/____/____