

SITE REGISTRATION PROGRAM
NEW JERSEY STATE MUSEUM
Bureau of Archaeology
205 West State Street
Trenton, N.J. 08625
(609) 292-8594 ph.
(609-292-7636 fx.

SITE NO.: 28-
Site Name:
National Register Status:
State Register Status:
Date:
File:

NJ State Atlas Coordinates: _____

USGS 7.5 Minute Series Quad. Name _____

UTM Coordinates _____

County: _____ Municipality: _____

Location (descriptive): _____ Period of Site: _____

Type of Site:

Cultural affiliation(s) (if known):

Owner's Name:
Address:
Phone:
Attitude toward preservation:

Tenant's Name:
Address:
Phone:

Surface Features: _____ Prominent Landmarks: _____

Vegetation Cover:

Nearest Water Source: _____ Distance: _____

Soil Type: _____ Erosion: _____

Stratified (if known):

THREAT OF DESTRUCTION (if known):

PREVIOUS WORK (list below):

<u>By Whom</u>	<u>Date</u>	<u>Collection Stored</u>	<u>Previous Designation</u>
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Recorders Name:
Address:
Phone:
Collection stored:
Date recorder at site:

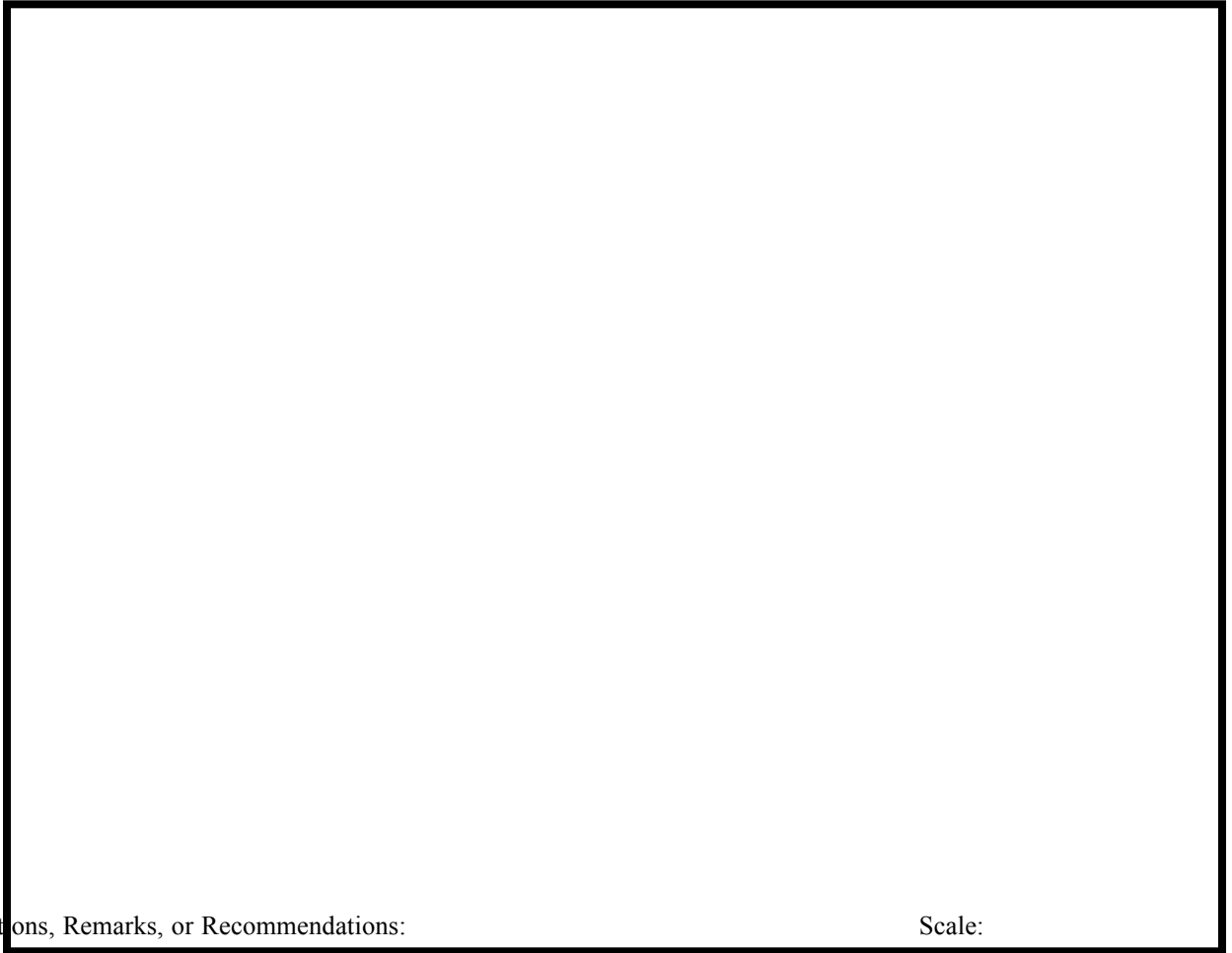
(Please complete reverse side)

Revised 1978b

Sketch Map of the Site:

Indicate the chief topological features, such as streams, swamps, shorelines, and elevations (approx). Also show buildings and roads. Indicate the site location by enclosing the site area with a dotted line. Use a scale (approx) to indicate distance and dimensions.

↑
North



Observations, Remarks, or Recommendations: Scale:

References: Unpublished Approx Date Published Date