

Invasive Plant Atlas of New England (IPANE) Survey Form

The New England Wild Flower Society

(Please refer to guidelines for the use of this form)

FBH Terrestrial Version 3/29/10

Site Form _____ Plot Form _____

Assignment Area Site Code _____ Electronic Submission Number _____

Site Information: State - Mass County - Norfolk Town - Milton Date observed: 10/13/2010

Locality (Closest named entity on the topo quad. Attach photocopy of map) Elliot Circle – Observatory – Great Blue Hill – Blue Hills Reservation

Coordinates: Latitude N 42° 12.71 Longitude W 071° 06.84

Altitude(ft) 620 ‘ please circle - GPS or map estimate Datum (e.g. NAD 1927) WGS 84

Habitat Types (please fill in number on back, spend no more than 30 sec to decide)

Edge	Forest continued	Wetlands	Miscellaneous	Miscellaneous
1) Upland/wetland	8) Oak	16) Herbaceous marsh	23) Dune	30) Rocky outcrops
2) Field/forest	9) Floodplain Forest	17) Bog	24) Open field	31) Beach
3) Lake edge	10) N. hardwood	18) Fen	25) Old field	32) Rocky coast
4) Roadside	11) Upland red maple	19) Shrub wetland	26) Stream bank	33) Abandoned lot/old home site
Forests	12) Oak/hickory	20) Cedar swamp	27) Yard/garden	
5) Aspen/birch	13) Pitch pine	21) Red maple swamp	28) Ag. Field	
6) White pine	14) Hemlock	22) Salt marsh	29) right-of- way	
7) Oak/pine	15) Spruce/fir			

34) Other habitat (Please explain, up to 254 characters)

Is this plot along a trailside? Yes No _____

Site Conditions (please circle)

Canopy Closure	<u>0-25%</u>	26-50%	51-75%	76-100%					
Aspect	North	NE	East	SE	South	SW	<u>West</u>	NW	Flat
Soil Moisture	<u>Xeric (dry)</u>	Mesic (moist)	Saturated	Inundated					

For FBH surveys, this form should be filled out and returned whether or not invasive species were noted during your survey. A separate form should be filled out for each trail surveyed. Please note in the comments section below, where you began and ended your survey by referencing the trail names / roadways you traveled and what section of the Blue Hills you surveyed. If a particular trail is not named on the map, please reference your route by using the white trail intersection markers. Please also note the total number of hours yourself and volunteers spent in the field. Ex. # people x # hours = Total Hours

Comments

- 2 people x 2 hour = 4 Hours

Reporter: Stephanie Radner with Judy Jacobs

Name ID# _____

Funded by the United States Department of Agriculture

Mail documentation to: IPANE Volunteer Coordinator, The University of Connecticut, 75 N. Eagleville Road, Unit 3043 Storrs, CT 06269-3043

Species (Common or scientific name as written in guidelines)	Habitat Type (# from table)	Abundance (Check one)					Distribution (Check one)				Percent Cover (Check one)					Reproduction (Check all that apply)					Documented if required (Check one)		
		Single plant	Less than 20	20-99	100-999	More than 1000	Single plant	Evenly sparse	Single patch	Multiple patches	Dense throughout	Less than 1%	1-5%	6-25%	26-50%	51-75%	76-100%	Vegetative	Flowers	Pollinators	Fruit	Seedlings present ?	Photo graph
Garlic Mustard	30		X				X				X						X				X	X	

Associated vegetation: Black swallow wort and garlic mustard have been sprayed and pulled

