



Statewide Pre-Contact Probability Model Testing Methodology Form

(This form should be used for consultation with the Regional Review Archaeologist on testing methodology prior to commencement of archaeological field work.)

1. Project Identification:

ER Number

Project Name &/or Agency Tracking #:

Agency:

Applicant:

Preparers Name and affiliation:

Date Prepared:

Project Area County/Municipality (list all)

County	Municipality

2. Previously Recorded Archaeological Sites within APE / Project Area:

PASS Site Number

3. Statewide Pre-Contact Probability Model Comparison:

Model Region(s):

Total Project Area hectares

Sensitivity Tier	Percent of Total Project Area
High	%
	%
	%
Moderate	%
	%
	%
Low	%
	%
	%

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4. Proposed Testing Methodology:

5. Approval:

Reviewer: _____

Date: _____