

ARTIFICIAL REEF VOLUNTEER DIVER LOG

DATE: _____ (Please complete a data sheet for each dive and diver)

LOCATION:

Water Body _____ Point of Departure _____ Miles Offshore _____

Depth _____ LORAN C / GPS coordinates _____

Reef or Structure Name _____

Structure Type:

- | | |
|--|---|
| <input type="checkbox"/> Rock | <input type="checkbox"/> Wooden Wreck |
| <input type="checkbox"/> Concrete Rubble | <input type="checkbox"/> Fiberglass Wreck |
| <input type="checkbox"/> Metal Wreck | <input type="checkbox"/> Tires |
| <input type="checkbox"/> Other _____ | |

Max. Height of Structure (feet) _____ Structure Dimensions _____ feet by _____ feet

ENVIRONMENTAL:

Time _____ Tide _____ Current _____

Bottom Temperature _____ Visibility (feet) _____

Bottom Composition _____

PURPOSE OF DIVE:

Lobstering Artifact Hunting Photography Nature Study

Spearfishing Data Collection Other _____

Bottom Time _____

OBSERVATION OF MARINE LIFE:

____ Blackfish (Tautog) ____ Porgy (Scup) ____ Bergall (Cunner) ____ Lobster

____ Sea Bass ____ Ling (Red Hake) ____ Conger Eels (Ocean Pout) ____ Cod

____ Rock Crab _____

Give your best estimate of the presence or absence of encrusting organisms; check the two most abundant organisms present.

Absent Present Most Abundant (check two)

Anemones _____

Sponges _____

Mussels _____

| | | | |
|------------|-------|-------|-------|
| Hydroids | _____ | _____ | _____ |
| Barnacles | _____ | _____ | _____ |
| Tube Worms | _____ | _____ | _____ |
| Corals | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Give your best assessment of the condition and behavior of the marine life

9 Healthy

9 Dead or Dying

List Unhealthy or Dying Species and numbers _____

9 Normal

9 Sluggish

9 Crowded on Structure 9 Touchable

ADDITIONAL COMMENTS: _____

DIVER INFORMATION:

Name: _____

Address: _____

Phone/Fax _____

Boat Name _____

Please either mail or fax the completed surveys to:
 NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 BUREAU OF MARINE RESOURCES / ARTIFICIAL REEF PROGRAM
 205 North Belle Mead Road, Suite 1
 East Setauket, New York 11733-3400
 Phone: (631) 444 - 0438 FAX: (631) 444 - 0449
 or E-mail this survey to: "cjlaport@gw.dec.state.ny.us"