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| A picture containing text, clipart  Description automatically generated | **ARCHAEOLOGICAL INFORMATION FORM****Non-Geophysical Programs**Physical Address: 6534 Airport Road,Fort St. John, B.C.Mailing Address: 6534 – 100th Ave., Fort St. John, B.C. V1J 8C5Phone: (250) 794-5200 |
| THIS IS AN AUDITABLE DOCUMENT |
| This form is to be submitted under the authority of the *Heritage Conservation Act* by energy resource applicants or their agents as part of their application to carry out exploration, development, construction or production activities. |
| **APPLICANT INFORMATION** | **A** |
| Application Type: [ ]  New Application [ ]  Amendment   | Regulator File AA No. :\*Regulator File AD No. :\*If this is an amendment, provide the original AD file number for the project. |
| Applicant Company Name: | Project Name: |
| Construction Plan Map Job No.: | Revision No.: | Revision Date: |
| Application Shapefile Reviewed in AMS? [ ]  Yes [ ]  NoDate viewed: dd/mm/yyyy \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  Application meets administrative change requirement (Describe):  |
| **ARCHAEOLOGICAL POTENTIAL ESTABLISHMENT** | **B** |
| 1) List sources of information used to identify archaeological potential: *(plan maps with revision number and date, RAAD, orthophotos, field visit, potential modeling, etc.)* |
| 2) Are there areas/components in the application area that contain archaeological potential? [ ]  Yes [ ]  No |
| 3) Specify factors used to assess potential: (describe specific terrestrial, hydraulic , cultural attributes, historic features, etc.) |
| 4) Are there archaeological sites within 200 m of the application area? [ ]  Yes [ ]  No

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| *Borden Number (AaBb-1234)* | *Distance (0.00m)* |
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 |
| 5) Are there management recommendations for archaeological sites and/or areas of archaeological potential? [ ]  Yes [ ]  No |
| **ASSESSMENT INFORMATION** | **C** |
| 1. Has field work been completed? [ ]  Yes [ ]  No
 |
| Select one of below as appropriate: |
| 1. [ ]  No field work is required
 |
| 1. [ ]  Field work is required or is ongoing (specify type):

 [ ]  AIA [ ]  PFR [ ]  Other (Description):  |
| 1. [ ]  All field work has been completed (specify type):

 [ ]  AIA [ ]  PFR [ ]  Other (Describe):

|  |
| --- |
| 1. Archaeological site identified? [ ]  Yes [ ]  No
2. If Yes, indicate Borden number(s) and/or temporary site number(s) and describe mitigation strategy:

Borden Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Site Mitigation – brief description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Has Regulator Heritage Conservation Program staff approved the archaeological report?  [ ]  Yes [ ]  No (If *Yes*, upload mitigation approval letter) |
| Archaeological Consulting Company: | HCA Section 12.2 Permit No.:  |
| First Nations Heritage Permit No.: |

*I declare that I have read and agree with the information contained in this form and to the best of my knowledge the application area is consistent with this assessment.***This is a legal document. Signatory, please print *and* sign name**: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PERMITTED ARCHAEOLOGIST OR CERTIFIED ARCHAEOLOGIST – PRINT NAME | PERMITTED ARCHAEOLOGIST OR CERTIFIED ARCHAEOLOGIST – SIGN NAME | DATE (dd/mm/yyyy) |