



**NOTIFICATION OF DISTURBANCE OF
 HUMAN REMAINS AND/OR
 ANIMAL MORTUARY FEATURE(S)**

Section 1. Project Information

- a. Burial Agreement Number: _____
- b. ASM Accession Number: _____
- c. Permit Number: _____
- d. Institution/Contractor: _____
- e. Project Name: _____
- f. Project Number: _____

Section 2. Contact Information

- a. Project Director: _____
- b. Project Director Phone: _____
- c. Project Director Email: _____
- d. In-field Schedule (indicate days and times for fieldwork): S M T W Th F S Start Time: _____ End Time: _____

Section 3. Summary of Remains Disturbed

Please submit a new notification form for each date of reporting.

- a. Date of Disturbance: _____ b. Notification No.: _____
- c. Remains Reported:

Time of Disturbance	ASM Site No.	Burial Type	No. of Individ.	Context of Disturbance	Assigned Feature No.	AFOs
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>
						<input type="checkbox"/>

Section 4. Project Access Information

- a. PPE required High clearance/4x4 required Steep or rugged terrain

b. In the space below, provide detailed written directions to the area of disturbance, including major cross-streets, if applicable. Also provide specific instructions on how to access the site location and parking areas.



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c. Attach a map of the project area highlighting access gates, parking area, and location to meet the Project Director.

