Pacific Crest Trail Association Project Scouting Form

Date:		Project Name:		
Your Name:		Nearest Trailhead:		
Email address:	s: Distance & Time From Trailhead:			
Phone number:		Is this section of trail in Wilderness? Yes No		
Problem (circle one or more):				
Cupped/Rutted Tread	Ineffect	ive Drainage	Signage Problem	Berm
Narrowed/Sloughed Tread	Drainage C	crossing Problem	Downed Trees	Slide
Widened/Braided Tread	Structure/	Bridge Problem	Heavy Brush	Bog
Unstable Tread	ı	Other:		
Cite of problem area (in fact or n	niloo\;			
Size of problem area (in feet or n	,			
Exact location of work to be don	e:			
Diameter of largest downed tree	(if applicable):			
Proposed Solutions (please desc	eribe):			
Tools and Materials Needed:				
Estimate of person hours neede	d to complete, inc	luding transportatior	n:	
Nearest campsite and water sou	rce if multi-day pr	oject:		
Safety Considerations:				
Proposed Project Lead Person:				
Proposed Work Crew: Vo	olunteers Corp	s Crew Agency C	rew	
Will you need help recruiting add	ditional volunteers	? Yes No		
Priority (circle one or more):	Urgent	High	Moderate	Low
	Public Safety	Resource Damage	User Convenience	

Please include a drawing and/or map on reverse side of this sheet