Protecting Michigan's Natural Heritage Since 1952

Sanctuary Monitor Report

Name:	Date of Visit (include year):						
Address: Phone:		Email:					
Filone.			Liliali.				
General Inform	nation						
Property Name		Property Number					
Acreage			Classification				
Describe Property's	s Use (high trat	ffic, few apparent visi	ts etc.)				
			I				
Access: Conditions or needs related to access.			Parking: Conditions or needs of parking area.				
Report Based on Observation of:							
Entire Property *Preferred*		Entire Boundary		Portion of Property Indicate which portion			
rreierreu				maicat	c willon portion		
Boundary Markings							
Are boundaries marked?			Which type of boundary signage?				
If yes, is the entire boundary marked, corners only, etc.? Any needs?		etc.?	Boundary sign w/web address □				
Any needs:				Bounda	ry sign w/phon	e num	ber □
			Other (describe):				
				Otner (d	Jescribe):		

Submit this form to your Regional Stewardship Organizer by September 15. You can send via email or mail a hard copy to the MNA Office.

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Do You Need Additional Signs Mailed to You?

Sign type:	Number requested:
Boundary signs	
Trail diamonds (blue, yellow, purple, green, white)	
Sanctuary Rules	
Please Respect this Nature Sanctuary	
No Hunting	
No Motorized Vehicles	
No Dumping	
MNA Access	
Do Not Mow or Spray	
No Pets Permitted	

Trails How many trails?

Trail Markings: How are they marked? What color?	Conditions:	Needs related to trails, signage, boardwalks, etc.:

Structures How many structures?

Please Describe: Condit	ion/Needs:

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Violations

	Dumping	Plant Removal		
Hunting/Poaching	ORV	Other		
Explain Circumstan	ices:			
Flora & Fauna				
Please share any observations of interest, particularly rare species or invasive species concerns (use back of page for additional listings or notes):				

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Suggestions/Comments

Please describe visit and attach photos if taken. Include any other notes or suggestions here.		
Have there been any new developments on adjacent property? Have you met neighbors? Did you get their contact information? Any adjacent property for sale? Other notes, concerns, questions, etc.		
Monitor Name:		
Date Report Completed:		

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