Natural Heritage & Endangered Species Program

RARE ANIMAL OBSERVATION FORM

Observer's name: Robert D. Roy/Doug Smith Species observed: Triangle Flower

Address: Woodlot Alternatives, Inc.
122 Main Street
Topsham, Maine 04086

Date and Time of observation: 9.16.98

Phone: 207-846-6764 (H) 207.729.1199 (W)

1. Location where species was observed:

a) Town: Pittsfield County Berkshire USGS Map: Pittsfield East

b) Please attach a photo copy of the appropriate section of a USGS topographic map (or similar map if a USGS map is unavailable). Please carefully mark the site in red where you observed this rare species.

c) Please explain how to get to this spot: Population occurs in the Housatonic River 100' to 500' downstream of Holmes Rd. Bridge.

2. Number of individuals observed: 8

3. Was a positive ID possible? Yes Based on what field marks? Definitive shell characteristics

Were photographs taken? No
If yes, please submit one clear photograph of the animal.

4. Age and sex of individuals: 1 indiv. was an adult, gravid ♀. Others were unknown. 45 mm long.

5. Evidence (if any) of breeding activity at this site: 1 gravid ♀

(OVER)

6. Have you observed this species at this site in previous years? NO

If yes, please give details: _____

7. Description of habitat at this site: FINE, SHIFTING SANDS IN WEST ½ OF CHANNEL; PACKED, SILT-COVERED GRAVEL IN EAST ½ WHERE MUSSELS WERE FOUND

8. Observed or potential threats to the species habitat at this site:

9. Landowner's name and address, if known: _____

10. Additional observations/comments: _____

11. Qualifications of observer (check all that apply):

____ Amateur naturalist. Years of experience: ____

____ Conservation Commission member

X Biology/science teacher – D. Smith

X Environmental Consultant – R. Roy

____ Degree in Biology: X Bachelor's ____ Master's X Ph. D.

____ Other. Please specify: _____

12. Briefly explain your previous field experience with this species: BOTH OBSERVERS ARE EXPERIENCED IN MUSSEL SURVEYS + I.D.

13. List names and qualifications of other observers (if any): _____

14. I hereby certify under pains and penalties of perjury that the information contained in this report is true and complete to the best of my knowledge.

Signature _____ Date: 9.16.98

Please submit field forms and all supporting documentation (map, photo, etc.) to:

MA Natural Heritage and Endangered Species Program
MA Division of Fisheries and Wildlife
Route 135
Westboro, MA 01581
508-792-7270 ext. 200

USGS PITTSFIELD EAST
QUADRANGLE

TRIANGLE FLOATER