



**GENERAL INFORMATION**

Name of beach (if applicable):		Date(s) of survey:
Beach ID:		Time(s) of survey:
Name of waterbody:		Waterbody type:
Sampling station(s)/ID:		Surveyor affiliation:
WQX organizational ID:		Name(s) of surveyor(s):
Sampling location	Latitude:	Longitude:
Dates of swim season	Start:	End:

**QUALITY ASSURANCE**

Will the data collected use an approved Quality Assurance Project Plan (QAPP)?    yes    no

**PART 1: WEATHER AND GENERAL WATERBODY CONDITIONS**

**Weather Conditions**

Survey the weather using the method of your choice. You may use the National Weather Service as your source.

Air temperature: _____ °C or °F	Method for temperature: (check one) <input type="checkbox"/> Liquid-in-glass therm. <input type="checkbox"/> Electronic thermometer
Wind speed: _____ units: _____	<input type="checkbox"/> Weather app <input type="checkbox"/> Weather report: from airport or weather station? <input type="checkbox"/> Other: _____
Wind gust speed: _____ units: _____	Method for wind speed: (check all that apply) <input type="checkbox"/> Wind vane for direction <input type="checkbox"/> Weather app
Wind direction: _____	<input type="checkbox"/> Wind sock for direction/speed <input type="checkbox"/> Anemometer for wind speed
Is the wind: (circle one)    Onshore    or    Offshore	<input type="checkbox"/> Beaufort scale for wind speed <input type="checkbox"/> Aerovane for wind direction/speed
	<input type="checkbox"/> Weather report: from airport or weather station? <input type="checkbox"/> Other (specify): _____

If you collected wind speed from a local weather station, how far were you from the station: \_\_\_\_\_ mi or km

How recent was the last rain event: (circle one)	Rain intensity: (circle one)	Misting	Light rain
0-24 hrs    24-48 hrs    48-72 hrs    72+ hrs	Moderate rain	Heavy rain	Other: _____

Total measured rainfall: \_\_\_\_\_ in or cm    Distance to the gauge/station when recording rainfall amount: \_\_\_\_\_ mi or km

Method for rainfall: (check one)     Rain gauge     Weather report     Weather app     Other (specify): \_\_\_\_\_

Sky condition/amount of cloud cover: (circle one)	Sunny/ No clouds	Mostly sunny/ 1/8 to 2/8	Partly sunny/ 3/8 to 1/2	Mostly cloudy/ 5/8 to 7/8	Cloudy/ Total coverage
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Method for weather conditions: (check one)     Visual observations     Weather app     Other (specify): \_\_\_\_\_

**Waterbody Conditions**

Water flow speed: \_\_\_\_\_ units: \_\_\_\_\_

Method for water flow speed: (check one)     Stick with fishing reel with water balloon on end     Ball and tether     Other: \_\_\_\_\_

Direction from which the wave is coming (e.g., N, SW): \_\_\_\_\_    How tall are the waves: \_\_\_\_\_ m or ft

Is the wave height measured or estimated? (circle one)    Measured    Estimated

Method for measuring wave height: (check one)     Visual examination of wave height     Graduated stick and ranging pole  
 Other (specify): \_\_\_\_\_

Is the stream bank/shoreline eroding?    yes    no

Width of riparian vegetation on river/stream left (looking downstream)	Width of riparian vegetation on river/stream right (looking downstream)
(circle one)    none    0-25 ft    25-50 ft    50+ ft	(circle one)    none    0-25 ft    25-50 ft    50+ ft

Add additional comments for general waterbody conditions.



**Aquatic Organism Passage Barrier**

What is the outlet drop (e.g., 3.5ft)	Severity of barrier debris, sediment, or rock for the structure with the least amount of debris (None, minor, moderate, severe)	Location (lat/long)	Description

\* Minor = <10% open area of structure blocked; Moderate = 10-50% open area of structure blocked; Severe = 50% open area structure blocked

Take images to document aquatic organism passage barriers and provide detailed descriptions where possible:

**PART 2: WATER QUALITY**

**Bacteria**

List bacteria samples collected at the beach. Potential pollution sources, if applicable, can be recorded in Part 4.

Sample Point	Sample Number	Location (lat/long)	Date & Time	Parameter (enterococci, E. coli, etc.)	Comments

**General Water Quality**

Water temperature: \_\_\_\_\_ °C or °F | Water color: (circle one) Clear Blue Brown Green Red Other: \_\_\_\_\_

Method for water temperature: (check one)  Multiprobe  Electronic meter  Graduated thermometer  
 Report from local radio station  Report from NOAA weather band radio  Other: \_\_\_\_\_

Has the water color changed since the last visit? yes no don't know If yes, take photographs and describe:

Select the best description of the water smell: (circle one) None Septic Algae Sulfur Other: \_\_\_\_\_

How did you measure turbidity? (check one)  Observed: (circle one) Clear Slightly turbid Opaque  
 Measured: NTU value: \_\_\_\_\_ Secchi disc depth: \_\_\_\_\_

What method was used to measure the turbidity of the water: (circle one) Simple visual observation Visual test kit  
 Titrimetric test kit Nephelometer/Turbidimeter Other: \_\_\_\_\_

Describe other measurements taken and report values:

Additional water quality observations:

**PART 3: PEOPLE**

Are there recreators (swimmers, boaters, waders, etc.) present at the beach or waterbody? yes no

Total people in water: \_\_\_\_\_ + Total people out of water: \_\_\_\_\_ = Total people at the beach or waterbody: \_\_\_\_\_

Total number of boats: \_\_\_\_\_



Report activities observed at the beach or shoreline and in the water. Quantify and take photographs, if possible.

Activity (swimming, fishing, etc.)					
Approximate # of people participating					

Describe notable activities that could affect water quality (Example: babies in disposable diapers in the water):

Method for numbers of people participating in various activities: (check one)  Counting by surveyor  Photos  
 Counting by lifeguard  Turnstiles  Other: \_\_\_\_\_

## PART 4: POTENTIAL POLLUTION SOURCES

Identify visible sources of pollutants up to 500 feet from the beach or waterbody boundary. Quantify and photograph sources, if possible.

Type of Source	Discharge Source Name	Discharge Source Amount (H, M, L)	Discharge Flow Rate	Discharge Volume	Discharge Source Characteristics
Wetland drainage					
Outfall/Pipe (stormwater)					
Leaking pit latrines/septic					
Runoff (impervious surfaces)					
Homeless encampments					
Other (specify): _____					

Did you collect samples and complete the Bacteria Samples section in Part 2? yes no

If no, describe why not:

How did you identify the source of discharge? (circle one) Visual observation WWTP notification/report Other: \_\_\_\_\_

How did you measure flow/velocity or volume? (circle one) Mechanical flow meter Electric flow meter  
 USGS gauging station WWTP notification/report Orange (float) and stopwatch Other: \_\_\_\_\_

## Floating and Debris

Are floatables present in the water? yes no If yes, select the types found: (check all that apply)

- Street litter (e.g., cigarette filters)
- Food-related litter (e.g., packaging/containers)
- Medical items (e.g., syringes)
- Sewage-related (e.g., tampons, condoms)
- Building materials (e.g., wood/siding)
- Fishing-related (e.g., fishing line, nets, lures)
- Household waste (e.g., household trash, plastic bags)
- Other: \_\_\_\_\_

Method for determining floatables presence: (circle one) Visual observation Cleanup event results Other: \_\_\_\_\_

Is there debris or litter present on the beach or shoreline? yes no

Select the amount (%) of debris/litter on the beach or shoreline: (circle one)

None Low (1% - 20%) Moderate (21%- 50%) High (>50%)

Select the types of debris found? (check all that apply)

- Street litter (e.g., cigarette filters)
- Food-related litter (e.g., packaging/containers)
- Medical items (e.g., syringes)
- Sewage-related (e.g., tampons, condoms)
- Natural debris (e.g., driftwood, algae)
- Building materials (e.g., wood/siding)
- Fishing-related (e.g., fishing line, nets, lures)
- Household waste (e.g., household trash, plastic bags)
- Tar/Oil (e.g., tar balls)
- Oil/Grease (e.g., oil slick)
- Other: \_\_\_\_\_

Method for determining debris presence: (circle one) Visual observation Cleanup event results Other: \_\_\_\_\_

## Algae

Is algae present in the nearshore water, beach and/or shoreline? yes no don't know If present, document with photographs.

Select the amount (%) of algae in nearshore water: (circle one)

None Low (1%-20%) Moderate (21%-50%) High (> 50%)



Select the amount (%) of algae on the beach or shoreline: (circle one)

None                      Low (1%–20%)                      Moderate (21%–50%)                      High (> 50%)

Method for determining amount and color of algae: (circle one)

Visual observation                      Other: \_\_\_\_\_

Circle the types of algae found: (check all that apply)

Free floating (no obvious mass of materials)                       Periphyton (attached to rocks, stringy)                       Globular (blobs of floating material)  
 Other: \_\_\_\_\_

Algae colors: (circle all that apply)    Light green    Bright green    Dark green    Yellow    Brown    Other: \_\_\_\_\_

Is the nearshore water discolored?    yes    no    don't know

If yes, specify the color: (circle all that apply)    Clear    Green    Dark red    Brown    Yellowish    Other: \_\_\_\_\_

## Harmful Algae Blooms

Is there presence of harmful algal blooms?    yes    no    don't know    If yes, photograph and describe:

Method for identifying harmful algae blooms in nearshore water and beach: (circle one)

Field guide or internet site for taxonomic identification                      Other: \_\_\_\_\_

Are there mats or scum in nearshore waters? (circle all that apply)    Mats-floating    Foam    Scum    None

Are there dead fish or other dead wildlife deaths present with bloom?    yes    no

Have any illnesses (e.g., itchy throat, cough, gastrointestinal) been reported by local or state health departments?    yes    no

If yes, describe:

Is algal toxin monitoring conducted?    yes    no    don't know    If yes, have algal toxins been detected? \_\_\_\_\_

Have algal species been identified?    yes    no    don't know    If yes, specify the species: \_\_\_\_\_

## Presence of Wildlife and Domestic Animals

Are wildlife and domestic animals present?    yes    no    If yes, document with photographs.

Are dead birds found on the beach?    yes    no    If yes, specify the number and species of dead birds.

Type	Number	Type	Number	Type	Number	Type	Number	Type	Number	Type	Number
Geese		Otters		Deer		Ducks		Rodents		Snakes	
Shorebirds		Turtles		Toads		Dogs		Beavers		Other	
Pigeons		Horses		Gulls		Frogs		Raccoons			

Method for determining presence of wildlife and domestic animals: (circle one)

Counting using hand-held counter and if necessary, binoculars                      Other (specify): \_\_\_\_\_

List the number and species of birds found dead on the beach

Type	# Dead	Type	# Dead	Type	# Dead	Type	# Dead
Common loon		Black-crowned night-heron		Long-tailed ducks		Ospreys	
Herring gulls		Double crested cormorants		Horned grebes		Common tern	
Ring-billed gulls		White winged scoter		Snowy egrets		Belted kingfisher	
Mallard ducks		Red-necked grebes		Great blue herons		Other: _____	

Method for determining the number of dead birds: (circle one)

Counting using hand-held counter and if necessary, binoculars                      Other: \_\_\_\_\_

Method for identifying dead birds: (circle one)

Field guide or internet site for taxonomic identification                      Other: \_\_\_\_\_

Are dead fish found in the waterbody, on the beach or along the shoreline?    yes    no    If yes, specify the number of dead fish found on the beach or in/at the waterbody and take photographs:

Method for determining the number of dead fish: (circle one)    Visual observation    Other: \_\_\_\_\_

Additional comments or observations on pollution sources, algae, or animals. Describe any photos taken.