PROJECT REVIEW FORM

Instructions to complete the form –

Please ensure that all the fields listed with an asterisk (*) are completed before you submit your request as they are mandatory and comprise the minimum information needed for us to fulfill your request.

This is a fillable document. After completing this form, you can either save it and send it to us electronically, or you can print it, and then scan the completed form and send it to us electronically.

When you are about to send us the completed form, please feel free to add additional attachments like photos, documents etc. that are complimentary to this request.

After completing this form please send your request to: **MIAC.culturalresources@state.mn.us**

Data Dictionary of the form fields

Project Name – The user can add a project name for the requested review. Example: Mounds Review, Historic Property Review etc.

Project ID – The user can create a unique identifier by which MIAC &/or OSA can communicate back to the user regarding their submitted request. Example: Mounds123, HPP789 etc.

Reason for Review – The user can add the reason they are submitting the review request.

Review Type – What is the type of review you are requesting.

Funding – If there is any funding attached to your request, please mark the appropriate selection.

Organization Name – If you are associated with an organization on whose behalf you are sending this request.

Submitting Organization Type – Please select the organization type you are associated with.

Project Description – Please write a detailed description of the project you would like reviewed.

Site Numbers – If you consulted the State Archaeologist portal and your proposed project intersected any sites add the site numbers as part of your request.

County – Please add the County(s) where the project is located.

Background Research Done – If you consulted any of the systems before sending this request.

Known Resources Adjacent to Review Area – If you are aware of any known cultural resources adjacent to your project area, please mark the selection(s) appropriately.

Additional Information – If there is any other additional information, you want us to know for us to work on your request.

Location Information (PLSS) – Please add the Township, Range, Range Direction, Section for the project you are wanting us to review [Complete this or Location Information (Project Address) if PLSS is not known].

Location Information (Project Address) – If PLSS is not known for your project, enter the project's address here.

Requested By – Name of the person submitting this request [this will be used for communication purposes only].

Requestor's Email Address – Valid email of the person submitting the request [this will be used for communication purposes only].

Requestor's Phone Number – Phone number of the person submitting the request [this will be used for communication purposes only].

Requestor's Physical Address – Physical address of the person submitting the request [this will be used for communication purposes only].

Attachments - Please add any pertinent photos, maps, documents etc. to accompany your request.