FL iMapInvasives Terrestrial Plant Observation & Assessment Field Form

Survey Date:_____ Observer Name: _____

Project Name/Location: _____

Use the Assessment ID field to indicate the assessment area on an associated map

ASSESMENT ID	LAT	LONG	SPECIES	DISTRIBUTION	PCT_COVER	MATURITY	LANDSCAPE TYP	NATIVE VEG.	DISTURB. TYPE	DISTURB. SEV.	PHOTO INFO	COMMENTS

DISTRIBUTION
1 Single plant or clump
2 Scattered plants or clumps
3 Scattered dense patches
4 Dominant cover
5 Dense monoculture
6 Linearly scattered

PCT_COVER
1 <5 %
2 5–25 %
3 26–50 %
4 51–75 %
5 >75 %

MATURITY
1 Immature
2 Mature
3 Both

LANDSCAPE TYPE
1 Waterbody
2 Agricultural system
3 Forest
4 Open naturalized area
5 Human dominated area
6 Transportation corridor

NATIVE VEG DISTRIBUTION
1 Mixed
2 Surrounding
3 Dominant
4 Subdominant
5 Absent
6 Unknown

DISTURB TYPE
1 Human
2 Natural
3 Both
4 None

DISTURB SEV
1 None
2 Light
3 Moderate
4 Heavy