

**Little Compton Agricultural Conservancy Trust
Annual Property Monitoring Form, 2019/20**

Property Name: Cissel (Fee)

Plat/Lot: 32/11

Name(s) of Monitor(s): Carol Lynn Trocki

Date of Visit: 9/2020

Time & Duration of Visit: n/a

Was the stewardship file & related documentation (easement, deed, baseline documentation report, previous monitoring records, etc.) reviewed prior to the monitoring visit?

Yes No

Landowner Information

Current Land Owner: LCACT

Landowner Contact Information (Address/Telephone/E-mail): n/a

Was the landowner contacted prior to the monitoring visit? Yes No

How was contact made?	Phone	Mail	E-Mail
-----------------------	-------	------	--------

Was the landowner (or a representative) present during the site visit? n/a

Monitoring Visit

1. Describe monitoring activities (walked all boundaries, accessed interior, viewed from the road only): viewed the property on recent aerial photography from Spring 2019 and from Long Pasture and Shaw Road.

2. Were boundaries clearly marked and identifiable? Yes No
Notes: Boundary has been digitized in GIS. It was reviewed on high resolution aerial photographs taken from Spring 2019.

3. List and describe any observations of human alterations or management activity (construction, clearing, harvest, trails, etc.) that represent changes from the previous visit or from conditions recorded in the baseline document: No changes noted.

4. Are these activities permitted in the conservation easement or deed? Yes No
N/A

5. List and describe any other observations, needs, comments etc. that may be affecting the condition of this property: No changes observed.

6. To the best of your knowledge and observation, are the conservation values of this property being preserved and do all activities comply with existing restrictions (as referenced in the conservation easement, deed, etc.)? Yes No

If no, please describe: *No observations of note.*

7. Please include any additional comments and reference any additional materials provided (photos, annotated maps, etc.) from the monitoring visit here:

Nothing of note.

Signature of monitor(s):

Carol Lynn Ivicki

Date: 10/7/2020

This section is to be completed by the monitoring program coordinator:

Signature of receiver (program coordinator, stewardship committee chair, etc.):

[Signature]

Date: 10.31.20

Follow-up tasks identified & person who will follow up: