

Linear Component Form

This form should be completed for each linear resource or linear segment. Use this form in conjunction with the *Management Data Form*. Call OAHP staff (303-866-5216) prior to assigning a resource number.

I. Resource Identification

1. **Resource Number:**

2. **Temporary Resource Number:**

3. **Site Name:**

4. **Record of:** Entire resource Segment

II. Resource Description

5. **Resource Type:** Road Railroad Trail Ditch/Canal

Other (specify):

6. **Component Description:**

7. **Original use:**

8. **Current use:**

9. **Modifications (describe and include dates):**

10. **Extent of Entire Resource:**

11. **Associated Artifacts:**

12. **Associated Features or Resources:**

Linear Component Form

Resource Number:

Temporary Resource Number:

III. Research Information

13. Architect/Engineer:

Source(s) of Information:

14. Builder:

Source(s) of Information:

15. Date of Construction / Date Range:

Source(s) of Information:

16. Historical / Archival Data:

17. Cultural Affiliation and Justification:

IV. Management Recommendations

18. Eligibility of Entire Resource

Eligible Not Eligible Need Data Is this an official determination? Yes No

Remarks / Justification:

19. Evaluation of integrity of the segment of the entire linear resource being recorded (Complete only if "Segment" under item 4 is checked and the entire resource is marked as Eligible under item 18)

Supporting Non-supporting Not applicable

Remarks / Justification:

20. Recorder(s):

21. Date:

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