

Date: 12-9-19 Time: 4:13 a.m. p.m. Employee Name: Z. Barnes / J. Walker

Job Name: Florida Peninsular LiDAR Point ID: VVA 18 GWC 115/116

State: FL Latitude: 30° 25' 56.36671" N + - Longitude: 82° 27' 41.08834" + -

Address and/or Intersection: 3500' south of Sand Mill Road along dirt trails

OBSERVATION METHOD

| | | | | | |
|---|--|------------------------------------|-------------------------|---------------------------------------|-------------------------|
| <input checked="" type="checkbox"/> VRS GPS | RMS: _____ H: <u>0.019</u> V: <u>-0.042</u> Duration: <u>180 SECONDS</u> | | | | |
| <input type="checkbox"/> STATIC GPS | Start Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. End Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | | | | |
| <input type="checkbox"/> Conventional Pairs VRS | Point Number: _____ RMS: _____ H: _____ V: _____ Duration: _____ Point Number: _____ RMS: _____ H: _____ V: _____ Duration: _____ | | | | |
| <input type="checkbox"/> Conventional Pairs STATIC | Point Number: _____ Start Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. End Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. Point Number: _____ Start Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. End Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | | | | |
| <input type="checkbox"/> Occupied Point | Pt. #/HT: _____ / _____ | <input type="checkbox"/> BS | Pt. #/HT: _____ / _____ | <input type="checkbox"/> FS | Pt. #/HT: _____ / _____ |
| <input type="checkbox"/> Back Site Point | Distance: _____ | | Vertical Angle: _____ | <input type="checkbox"/> Angle | <u>00°00'00"</u> |
| <input type="checkbox"/> FS Point | Angle: _____ Vertical Angle: _____ Slope Distance: _____ Horizontal Distance: _____ | | | | |

TYPE OF SURFACE

- NVA: OPEN Terrain**
- VVA: GWC Terrain**
- VVA: BLT Terrain**
- VVA: Forested**
- NVA: Urban Areas**
- NGS Control**

PICTURES

- Picture(s) of Area & Setup**

POINT RE-CHECK

Date: _____ Time: _____ a.m. p.m.

Re-Check Point ID: _____

Description of Point: _____

Sketch or Image of Area



