

Date: 02/06/19 Time: 12:55  a.m.  p.m. Employee Name: Andrew Strickland

Job Name: Florida Peninsular LiDAR Point ID: (GCP QSI 82) 60191

State: FL Latitude: 29°32'15.62470"N  +  - Longitude: 81°47'06.86101"W  +  -

Address and/or Intersection: County Road 310 / Pipe Crossing to South

**OBSERVATION METHOD**

<input checked="" type="checkbox"/> <b>VRS GPS</b>	RMS: _____ H: <u>0.007</u> V: <u>0.015</u> Duration: <u>180 seconds</u>				
<input type="checkbox"/> <b>STATIC GPS</b>	Start Time: _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. End Time: _____ a.m. <input type="checkbox"/> p.m. <input type="checkbox"/>				
<input type="checkbox"/> <b>Conventional Pairs VRS</b>	Point Number: _____ RMS: _____ H: _____ V: _____ Duration: _____				
	Point Number: _____ RMS: _____ H: _____ V: _____ Duration: _____				
<input type="checkbox"/> <b>Conventional Pairs STATIC</b>	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"/> <b>Occupied Point</b>	Pt. #/HT: _____ / _____	<input type="checkbox"/> <b>BS</b>	Pt. #/HT: _____ / _____	<input type="checkbox"/> <b>FS</b>	Pt. #/HT: _____ / _____
<input type="checkbox"/> <b>Back Site Point</b>	Distance: _____ Vertical Angle: _____		<input type="checkbox"/> <b>Angle</b> _____ 00°00'00"		
<input type="checkbox"/> <b>FS Point</b>	Angle: _____ Vertical Angle: _____ Slope Distance: _____ Horizontal Distance: _____				

**Sketch or Image of Area**

**TYPE OF SURFACE**

- PAVEMENT
- MOWED GRASS
- BARE SOIL
- NGS Control

**PICTURES**

- Picture(s) of Area & Setup

**POINT RE-CHECK**

Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m.

Re-Check Point ID: \_\_\_\_\_

Description of Point: \_\_\_\_\_

SET 5/8" IRC Stamped "TRAV PT LB 8011"





