



Rare Species Sighting Form

Please print this form and mail it to:

Virginia Department of Conservation and Recreation
Division of Natural Heritage
600 East Main Street; 24th Floor
Richmond, VA 23219
(804) 786-7951

Species Name: _____

Date Observed: _____

County: _____

USGS Quadrangle Name (if known): _____

Location: (Provide a detailed description. Include a topographic map showing the location or sketch a map on the back of this form): _____

Habitat Description: (Include associated species, elevation, natural features, natural community type, etc.) _____

Population Data: (Include data such as number of individuals, age, size, spatial distribution, evidence of reproduction) _____

Owner: _____

Threats or evidence of Disturbance: _____

Protection Information: (Under present conditions, will this population maintain itself over a long period of time? Why or why not?) _____

Reported By: _____

Address: _____

Phone: _____

E-Mail: _____

Date: _____