






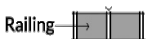


# Bridge/Structure Bat Assessment Form

Date & Time of Assessment		DOT Project Number		Route/Facility Carried		County	
Federal Structure ID		Structure Coordinates (latitude and longitude)		Structure Height (approximate)		Structure Length	
<b>Structure Type (check one)</b>				<b>Structure Material (check all that apply)</b>			
<i>Bridge Construction Style</i>				<i>Deck Material</i>		<i>Beam Material</i>	
<input type="checkbox"/> Cast-in-place 		<input type="checkbox"/> Pre-stressed Girder 		<input type="checkbox"/> Metal	<input type="checkbox"/> None	<input type="checkbox"/> Concrete	
<input type="checkbox"/> Flat Slab/Box 		<input type="checkbox"/> Steel I-beam 		<input type="checkbox"/> Concrete	<input type="checkbox"/> Concrete	<input type="checkbox"/> Timber	
<input type="checkbox"/> Truss 		<input type="checkbox"/> Covered 		<input type="checkbox"/> Timber	<input type="checkbox"/> Steel	<input type="checkbox"/> Stone/Masonry	
<input type="checkbox"/> Parallel Box Beam 		<input type="checkbox"/> Other:		<input type="checkbox"/> Open grid	<input type="checkbox"/> Timber	<input type="checkbox"/> Other:	
<i>Culvert Type</i>				<i>Culvert Material</i>		<i>Creosote Evidence</i>	
<input type="checkbox"/> Box		<input type="checkbox"/> Other Structure		<input type="checkbox"/> Metal	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Pipe/Round				<input type="checkbox"/> Concrete	<input type="checkbox"/> Unknown		
<input type="checkbox"/> Other:				<input type="checkbox"/> Plastic	<i>Notes:</i>		
				<input type="checkbox"/> Stone/Masonry			
<i>Crossings Traversed (check all that apply)</i>				<i>Surrounding Habitat (check all that apply)</i>			
<input type="checkbox"/> Bare ground		<input type="checkbox"/> Open vegetation		<input type="checkbox"/> Agricultural		<input type="checkbox"/> Grassland	
<input type="checkbox"/> Rip-rap		<input type="checkbox"/> Closed vegetation		<input type="checkbox"/> Commercial		<input type="checkbox"/> Ranching	
<input type="checkbox"/> Flowing water		<input type="checkbox"/> Railroad		<input type="checkbox"/> Residential-urban		<input type="checkbox"/> Riparian/wetland	
<input type="checkbox"/> Standing water		<input type="checkbox"/> Road/trail - Type:		<input type="checkbox"/> Residential-rural		<input type="checkbox"/> Mixed use	
<input type="checkbox"/> Seasonal water		<input type="checkbox"/> Other:		<input type="checkbox"/> Woodland/forested		<input type="checkbox"/> Other:	
<b>Areas Assessed (check all that apply)</b>							
Check all areas that apply. If an area is not present in the structure, check the "not present" box.							
Document all bat indicators observed during the assessment. Include the species present, if known, and provide photo documentation as indicated.							
<b>Area (check if assessed)</b>		<b>Assessment Notes</b>		<b>Evidence of Bats (include photos if present)</b>			
<input type="checkbox"/> All crevices and cracks: <b>Bridges/culverts:</b> rough surfaces or imperfections in concrete <b>Other structures:</b> soffits, rafters, attic areas		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Concrete surfaces (open roosting on concrete)		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Spaces between concrete end walls and the bridge deck		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Crack between concrete railings on top of the bridge deck 		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Vertical surfaces on concrete I-beams		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Spaces between walls, ceiling joists		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> Weep holes, scupper drains, and inlets/pipes		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> All guiderails		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
<input type="checkbox"/> All expansion joints		<input type="checkbox"/> Not present		<input type="checkbox"/> Visual - live #	<input type="checkbox"/> dead #	<input type="checkbox"/> Audible	<input type="checkbox"/> Species
				<input type="checkbox"/> Guano		<input type="checkbox"/> Odor	
				<input type="checkbox"/> Staining		<input type="checkbox"/> Photos	
Name:				Signature:			