



REQUESTED SELECTED SITE AREAS - CULTURAL RESOURCE REVIEW

Borrow, Waste, Asphalt or Concrete Batch Plant

Wisconsin Department of Transportation

DT1919 5/2026 For additional information, see [CMM.158.1](#)

Submit Request to: DOTCulturalResources@dot.wi.gov

Project ID:	REQUIRED Information Construction Activity: (Check the appropriate box) <input type="checkbox"/> Borrow <input type="checkbox"/> Waste <input type="checkbox"/> Asphalt or Concrete Batch Plant <input type="checkbox"/> Other: Required Attachment(s): <input type="checkbox"/> Aerial Imagery <input type="checkbox"/> Site Map (Show Precise Location) <input type="checkbox"/> Sketch Map of Activities Area
Highway (Street):	
Project Termini:	
County:	
Contractor: Name: _____ Email: _____	
Project Manager: Regional Environmental Coordinator:	

SURVEY SITE	ALTERNATIVE 1 (A1)			ALTERNATIVE 2 (A2)			ALTERNATIVE 3 (A3)		
Location – County									
Township(s)									
Town and Range Lines	T	N,R		T	N,R		T	N,R	
Section Number									
¼ Section	¼	¼	¼	¼	¼	¼	¼	¼	¼
Landowner Name									
Address									
Current Land Use									
Acreage to be Used									

ARCHAEOLOGIST COMMENTS

- | | | | |
|-----------------------------|-----------------------------|-----------------------------|---|
| <input type="checkbox"/> A1 | <input type="checkbox"/> A2 | <input type="checkbox"/> A3 | 1. No Site(s) in Area |
| <input type="checkbox"/> A1 | <input type="checkbox"/> A2 | <input type="checkbox"/> A3 | 2. Site(s) in Area |
| <input type="checkbox"/> A1 | <input type="checkbox"/> A2 | <input type="checkbox"/> A3 | 3. Burial site (mounds, cemetery, other) in Area |
| <input type="checkbox"/> A1 | <input type="checkbox"/> A2 | <input type="checkbox"/> A3 | 4. Field Survey Required (State Owned Lands, MOA/PA Commitments – See CMM 158.2.2) |

SUMMARY:

Archaeologist Signature

Date

BUREAU RECOMMENDATIONS

- Clear for Use Additional Coordination Required

Bureau of Technical Services

Date