

LAND QUESTIONNAIRE

VACANT LAND, OPEN SPACE, TRAILS, MINING CLAIMS

Complete one questionnaire for each parcel of land.

Answer all questions (use no, none or n/a [not applicable] if appropriate).

If you have structures on the land, complete a Property Questionnaire.

Name of Organization _____

Address of land or (if unavailable) legal description of parcel location:

How many acres of land are owned? _____ How many acres do you manage or help maintain? _____

How many miles of trails do you own, hold easements on, manage or maintain? _____ Average width: _____

How many acres of mining claim(s)? _____ What materials are mined? _____

How are they used? _____ Gross annual receipts from sales \$ _____

How many acres of easements? _____ Are these conservation easements? _____ Is there a contract? _____

(Please attach)

How is the land (or trails or claims) used? _____

Are there any prescribed burns done by your organization? _____

Does another party have primary responsibility for management of the land? _____

If yes, who? _____

Does another party have primary responsibility for maintenance of the land? _____

If yes, who? _____

How many visitors are there per year? _____ Is this monitored? _____

How is access controlled? _____

Hours of operation: _____ Estimated annual receipts: \$ _____

	Yes	No	Describe Extent of Use
Picnic Grounds			
Play Facilities			
Trails			
Trail Maintenance for Others			
Cross-Country Skiing			
Whitewater Rafting			
Canoeing			# of canoes owned: _____ # of canoes rented: _____
Rock Climbing			
Mountain Biking			
Swimming Facilities			
			Are there lifeguards on duty? Yes <input type="checkbox"/> No <input type="checkbox"/>
Lodging Facilities			# of overnight stays per year _____ Total receipts \$ _____
Camping			# of overnight stays per year _____ Total receipts \$ _____
Docents			
Describe docent training: _____			

Number of dams on the land: _____ Height: _____ Age: _____ *Use a separate sheet, if necessary.*

Length: _____ Construction: _____ Spillway: _____

Number of bridges: _____ *Describe each (size, material, design, & use) and note who is responsible for maintenance (please attach a separate sheet).*

Are there any underground storage tanks or waste dumps on the site? _____ How many? _____

Do you own watercraft? _____ *If yes, please attach a separate sheet with type, length, HP, value, and describe use.* Describe any use of non-owned watercraft larger than 55 feet: _____

Whom should we contact if we have further questions? Name: _____

Daytime phone number: (_____) _____ E-mail address: _____

McDaniel Insurance Services, DOI #0820481 mcins@west.net

206 N. Signal Street, Suite O, PO Box 1294, Ojai, CA 93024 (805) 646-9948; Fax (805) 646-9976