


COASST DATA SHEET

DATA TYPE(S) *(circle appropriate)* beached birds large debris medium debris small debris

PARTICIPANT(S)



Bag & Tag: Y N

Pacer: _____ ( /m) _____

Others: _____

*If you have **NOT** circled medium/small debris, measure ZONE WIDTHS. Measure Veg **ONLY** if you have circled large debris.*ZONE WIDTHS *(paces)*

Surf	Wrack	Bare	Wood	Veg
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="large debris only"/>

TIME & LOCATION

Beach Name: _____

Region: _____

Survey Date: _____
*(mm/dd/yyyy)*Travel Time: _____
*(hrs & min— e.g., 1 hr 30 min)*Data Collection Time: *(HR:MIN)*

Start _____ AM PM

Turnaround _____ AM PM

End _____ AM PM

START

ZONE WIDTHS *(paces)*

Surf	Wrack	Bare	Wood	Veg
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="large debris only"/>

WOOD *(if present, circle predominant)*

Diameter: small (<20cm) med (20cm to 1m) large (>1m)

Frequency: patchy continuous

WRACK *(if present, circle predominant)*

Frequency: patchy continuous

 OIL *(if present, circle predominant and describe in comments)*

A Patch Every: 1km 100m 10m 1m

Type: sheen tarballs goopy mousse

TURNAROUND

WEATHER *(circle predominant)*

sun clouds fog rain snow

HUMAN USE

Humans Dogs Motor Vehicles

Count: _____

Tracks (Y/N): _____ N/A _____

 BEACHED MARINE MAMMALS# of individuals _____ *(describe in comments)*COMMENTS *(any additional information that could not be recorded above)*

ON RETURN

LARGE DEBRIS

#:	Id:		Comments:		
Veg: _____	L (cm): _____	W (cm): _____	H (cm): _____	Color: _____	
Wood: _____	Complex: N Y		Material: _____ if plastic: hard foam soft ↓ ♻️ _____	Biofoul: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Bare: _____	Weathering: _____				
Wrack: _____	low	med	high	whole frag part	Loops → Crumbly Beak Sharp Shiny Floppy
Surf: _____	Refind <input type="checkbox"/> Logo/Brand <input type="checkbox"/> Language <input type="checkbox"/>		Collected <input type="checkbox"/> Barcode <input type="checkbox"/> Poison <input type="checkbox"/>		

#:	Id:		Comments:		
Veg: _____	L (cm): _____	W (cm): _____	H (cm): _____	Color: _____	
Wood: _____	Complex: N Y		Material: _____ if plastic: hard foam soft ↓ ♻️ _____	Biofoul: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Bare: _____	Weathering: _____				
Wrack: _____	low	med	high	whole frag part	Loops → Crumbly Beak Sharp Shiny Floppy
Surf: _____	Refind <input type="checkbox"/> Logo/Brand <input type="checkbox"/> Language <input type="checkbox"/>		Collected <input type="checkbox"/> Barcode <input type="checkbox"/> Poison <input type="checkbox"/>		

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Veg: _____	L (cm): _____	W (cm): _____	H (cm): _____	Color: _____	
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Bare: _____	Weathering: _____				
Wrack: _____	low	med	high	whole frag part	Loops → Crumbly Beak Sharp Shiny Floppy
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#:	Id:		Comments:		
Veg: _____	L (cm): _____	W (cm): _____	H (cm): _____	Color: _____	
Wood: _____	Complex: N Y		Material: _____ if plastic: hard foam soft ↓ ♻️ _____	Biofoul: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
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