

Survey Details

Site Name – River/Stream: _____ at Location: _____

Grid Reference: _____

Date: _____ Time: _____ Observer Name: _____

Type of waterbody (tick one)

- River Stream Lake Pond Estuary/tidal
 Other: _____

Rain in previous 24 hours (tick one)

- None Light rain/showers Heavy or prolonged rain



Please take up to four photos to go with your survey data. One photo should be taken from the same place on each visit and will capture some of the waterbody and surroundings.

Other features where photos would be useful are highlighted with the camera icon.

General Ecosystem Observations

Dominant land use within ~50m (tick all that apply)

- Woodland Moorland/heath Urban residential Industrial/commercial Parkland/gardens
 Grassland/pasture Agriculture (crops) Tilled land Other : _____

Dominant bankside vegetation (tick all that apply)

- Trees/shrubs Grass None (impermeable surface) None (bare earth)
 Other: _____

Problem plant species (tick all that apply)

- Himalayan balsam Japanese knotweed Giant hogweed Skunk cabbage Curly waterweed Floating Pennywort
 None Other: _____

Wildlife spotted (tick all that apply)

- Otter Dipper Water vole Kingfisher Grey Wagtail
 Heron Dragonflies/damselflies Fish None
 Other: _____

If you see any of the following, call the Environment Agency 24-hour incident hotline **0800 80 70 60**:
Pollution to water or land, damage or danger to the natural environment, dead fish or fish gasping for air, collapse or badly damaged riverbanks.

Evidence of Pollution

Pollution sources (tick all that apply)

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Outfall present not discharging | <input type="checkbox"/> Outfall present discharging | <input type="checkbox"/> Outfall causing odour | <input type="checkbox"/> Outfall causing discolouration |
| <input type="checkbox"/> Collapsed river banks | <input type="checkbox"/> Cattle/stock access to river | <input type="checkbox"/> Grey water (misconnection) | <input type="checkbox"/> Road run-off |
| <input type="checkbox"/> Soil run-off | <input type="checkbox"/> Farm run-off (slurry/silage) | <input type="checkbox"/> None | <input type="checkbox"/> Other: _____ |

Evidence of recent pollution (tick all that apply)

- | | | | | | |
|--|---|---|-------------------------------------|--|-------------------------------|
| <input type="checkbox"/> Sewage-related litter | <input type="checkbox"/> Litter/fly-tipping | <input type="checkbox"/> Unpleasant odour | <input type="checkbox"/> Oily sheen | <input type="checkbox"/> Sewage fungus | <input type="checkbox"/> Foam |
| <input type="checkbox"/> Smothering algae | <input type="checkbox"/> None | <input type="checkbox"/> Other: _____ | | | |

River Channel Observations

Channel dimensions

Estimated Width at water level (m): _____ Estimated average depth (m): _____

Flow conditions (tick one)

Where 'steady' is walking speed, 'surging' is faster and 'slow' is slower than walking speed.

- Surging Steady Slow Still

Obstacles to fish or flow (tick all that apply)

Water and fish need to move freely. Is there an obstruction in the channel (within 50m) which might stop or inhibit natural flow or fish movement?

- None Weir Fallen or Submerged Tree Debris Dam Bridge/Culvert (with step) Other Artificial Structure

Water level (tick one)

- High Average Low

Predominant substrate (tick one)

- | | | | | | |
|---|---|--|--|---|----------------------------------|
| <input type="checkbox"/> Boulders
>25cm
(football size) | <input type="checkbox"/> Stones
25cm - 6cm
(tennis ball size) | <input type="checkbox"/> Gravel
4mm - 6cm | <input type="checkbox"/> Sand
Up to 2mm | <input type="checkbox"/> Silt/mud
Identify by eye
(looks like mud not sand) | <input type="checkbox"/> Bedrock |
| <input type="checkbox"/> Artificial | <input type="checkbox"/> Not visible | <input type="checkbox"/> Other: _____ | | | |

Water quality observations

Temperature (°C): _____ Dissolved Solids (TDS – ppm): _____ Turbidity: _____

Phosphate (ppb): 0 100 200 300 500 1000 2500

Additional test : _____ Result: _____ Units: _____
(only fill out if you have an added test to complete, such as pH, Nitrate, Bacteria or Ammonia)

Notes