

# Lake Data Sheet

## OLMS/OEPA Division of Surface Water

### CLAM Volunteer Monitoring Program

QDC Name \_\_\_\_\_ QDC # \_\_\_\_\_ CLAM ID# \_\_\_\_\_  
 Monitor Name (If different than QDC Name) \_\_\_\_\_  
 Phone # \_\_\_\_\_ Email \_\_\_\_\_ Date \_\_\_\_\_  
 Lake Name \_\_\_\_\_ Lake ID # \_\_\_\_\_

Please provide latitude and longitude for each site.

Site # \_\_\_\_ Lat/Long (in decimal degrees): \_\_\_\_\_ °N/ \_\_\_\_\_ °W  
 Site # \_\_\_\_ Lat/Long (in decimal degrees): \_\_\_\_\_ °N/ \_\_\_\_\_ °W  
 Site # \_\_\_\_ Lat/Long (in decimal degrees): \_\_\_\_\_ °N/ \_\_\_\_\_ °W  
 Site # \_\_\_\_ Lat/Long (in decimal degrees): \_\_\_\_\_ °N/ \_\_\_\_\_ °W

Lat/Long Source (topozone, Google Earth, GPS unit, USGS map, etc.) \_\_\_\_\_

**Atmospheric Conditions:**

Cloud Cover: ( ) Clear ( ) Hazy ( ) Few Clouds ( ) Many Clouds ( ) Overcast  
 Rainfall Occurred: ( ) Today ( ) Yesterday ( ) 2 Days Prior ( ) 3 Days Prior  
 Wind Direction ( ) None ( ) N ( ) NE ( ) E ( ) SE ( ) S ( ) SW ( ) W ( ) NW

**Lake Data**

Lake Level \_\_\_\_\_ Air Temperature (°F or °C) \_\_\_\_\_

Site #	Time (am/pm)	Secchi #1 (nearest inch)	Secchi #2 (nearest inch)	Average Secchi *	Water Color (Color #)	Water Temp (°F or °C)	Waves 1-4 **	Water Depth (nearest 1/2 ft.)

\*Indicate (B) if the disk is seen on the lake bottom.

\*\* Waves from 1 to 4: 1- Calm, 2- Ripples, 3- Moderate Waves, 4- White Caps

<sup>1</sup>Qualified Data Collection (State of Ohio, Credible Data Program, Chapter 3745-4 of the Ohio Administrative Code): Qualified Data Collectors are responsible for the accuracy and completeness of data sheets.

Has recent rain or other factors made your site unusually turbid today? ( ) Yes ( ) No

Please describe any recent lake or watershed management techniques (i.e., dredging, chemicals, etc.)

Type and Date, if known: \_\_\_\_\_

Indicate with a checkmark whether the lake has been suitable for the following purposes, within the last two weeks, if possible. Please do not include impairment due to weather.

	Excellent, No Problems	Minor Problems	Slight Use Impairment	Substantial Impairment	Total Impairment
Overall Water Quality					
Swimming					
Boating					
Fishing					
Aesthetics					

Indicate with a checkmark the problems on your lake, within the last two weeks, if possible. Check all that apply.

	Excellent, No Problems	Minor Problems	Slight Use Impairment	Substantial Impairment	Total Impairment
Algae					
Weeds					
Silt Turbidity					
Boat Congestion					
Personal Watercraft					
Trash					
Other (including smell or wildlife): _____					

Mail completed data sheets to:  
 OLMS/CLAM  
 8584 E. Washington St #206  
 Chagrin Falls, OH 44023