

Number Assignment Request Form Florida Master Site File

Division of Historical Resources / R.A. Gray Building 500 South Bronough St., Tallahassee, Florida 32399-0250 Phone 850.245.6440 / Fax 850.245.6439 / Email <u>SiteFile@dos.myflorida.com</u>

IMPORTANT: Assignment of a State Site Number **DOES NOT** mean a resource is recorded at the Site File. The resource is not added to the inventory until a completed resource recording form has been submitted. Requesting a State Site Number **indicates your agreement** to complete and submit a recording form for each number requested. Resource recording forms can be found on-line here: <u>Site File website</u>.

Check for Previously Assigned Numbers (Required)

Yes, Florida Master Site File records were checked for previously recorded resources at this location.

Please indicate the date and search method(s) used for checking: Date Checked______ Site File Staff Consulted Address Township, Range & Section GIS FMSFweb

Contact Information (Required)							
Name:							
Organization (if applicable):							
Phone:							
Email:							

Project Name (if applicable; use key words indicating location, tract name, survey phase, etc.)

	Individual Request (If more	e than 5 site numbers	s are needed use Bl	ock Request at botton	1)	
County:	Request Date:	Date	Assigned:	FMSF Staff:		
Select Resource Ty	pe: Archaeological	Bridge	Cemetery	Structure	Resource Group	
	Use a separate request fo	orm for each reso	<mark>urce type, count</mark> y	y, and project.		
Resource Name	Addre	ess or GPS Coo	ordinates or Tw	n/Rng/Sect	Assigned Number	
1						
2						
3						
4						
5						
	Block Request	Use if more than t	5 site numbers are n	eeded)		
County:	Request Date:	Date	Assigned:	FM\$	SF Staff:	

Archaeological Sites: ____ Bridges: ____ Cemeteries: ____ Structures: ____ Resource Groups: ____

Range of Numbers Assigned by the Florida Master Site File ____