|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Form for Providing Updates to the California Fish Passage Assessment**  For Fish Passage Improvement and Screening Projects  Send to [Anne.Elston@wildlife.ca.gov](mailto:Anne.Elston@wildlife.ca.gov). This form is available at [www.calfish.org/pad/](http://www.calfish.org/pad/) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **I. Contact Information** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name:** | | | | | | | | | | | | | | | | | | | **Date:** | | | | | | | |
| **Title:** | | | | | | | | | | | | | | | | | | | **Phone:** | | | | | | | |
| **Agency:** | | | | | | | | | | | | | | | | | | | **Email:** | | | | | | | |
| **III. Location** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Latitude** (Decimal Degrees, Geographic NAD 83)**:** | | | | | | | | | | **Longitude** (Decimal Degrees, Geographic NAD 83)**:** | | | | | | | | | | | | | | | | |
| **Stream Name:** | | | | | | **Tributary To:** | | | | | | | | | | | | | | | | | **Bank Location:** | | | |
| **Road Route/Name** (If Applicable): | | | | | | | | | | | | | **Milepost** (If Applicable): | | | | | | | | | | | | | **River Mile**: |
| **IV. Site/Structure** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Structure Name:** | | | | | | | | | | | | | | **Structure Owner:** | | | | | | | | | | | | |
| **Structure Type:** | Diversion | | | | **Mobile?**  Yes  No | | | | | | | | | | | | **Pump Type:** | | | | | | | | **Horsepower:** | |
|  | Dam | | | | | | Ford | | | | | | | | | Utility Crossing | | | | | | | | Tidegate | | |
|  | Flow Measurement Weir | | | | | | Culvert | | | | | | | | | Grade Control | | | | | | | | **Other:** | | |
|  | Fish Trap | | | | | | Bridge | | | | | | | | | Flood Control Channel | | | | | | | |
| **Passage Status Pre-Treatment:** | Total | | | Temporal & Total | | | | | | | | | | | | Partial | | | | **Intake Size/Structure Dimensions** (inches): | | | | | | |
| Temporal | | | Temporal & Partial | | | | | | | | | | | | |  | | |
| **Species Blocked:** | | | | | | | | **Lifestages Blocked:** | | | | | | | | | | | | | | | | | | |
| **V. Fish Passage Improvement Projects** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Description of Treatment:** | | | | | | | | | | | | | | | | | | | | | **Date Treated (MM/YYYY):** | | | | | |
| **Implementation Cost:** | | | | | |
| **Fishway Installed?**  Yes  No | | | **Type of Fishway:** | | | | | | | | | | | | | | | | | | | | | | | |
| **Species Benefited from Treatment:** | | | | | | | | | | | | | **Lifestages Benefited from Treatment:** | | | | | | | | | | | | | |
| **Pre-Treatment Biological Monitoring Available?**  Yes  No | | | | | | | | | | | **Undergoing Post-Biological Monitoring?**  Yes  No | | | | | | | | | | | | | | | |
| **VI. Fish Screening Projects** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Screen Type:** | | | | | **Screen Size (inches):** | | | | | | | | | | | | | **Mesh Size (inches):** | | | | | | | | |
| **Date Screened (MM/YYYY):** | | | | | | | | | | | | **Screened By:** | | | | | | | | | | | | | | |
| **What CFS is the Diversion Screened to?** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Was this a Diversion Consolidation Project?**  Yes  No | | | | | | | | | | | | | | | ***If the answer is YES, please fill out the information for the abandoned diversions below.*** | | | | | | | | | | | |
| **Abandoned Diversion** | | **Stream Name** | | | | | | | **Latitude** | | | | | | | | | | | | | **Longitude** | | | | |
| **1** | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **2** | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **3** | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **4** | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **5** | |  | | | | | | |  | | | | | | | | | | | | |  | | | | |
| **VII. Attachments & Additional Info** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Before & After Photos (Provide as an Email Attachment or Copy and Paste Below): | | | | | | | | | | | | | | | | | | | | | Biological Monitoring Report | | | | | |
| Operations & Maintenance Plan | | | | | |