

AMERICAN RIVER PARKWAY CONDITION REPORT

Location: Mile Number: _____ North or South (circle one)		Volunteer Steward Group: _____						
	Item	Condition Excellent	Condition Good	Condition Fair	Condition Poor	Not Observed	N/A	Comments (Additional Comments on Separ
A	Bike Trail							
1	Asphalt Surface							
2	Asphalt Edge							
3	Walking/Running Path							
4	Presence of Trash and Litter							
5	Other (Describe in Comments)							
B	Firebreak Roads (Unpaved)							
1	Surface							
2	Weeds, Brush, Tree Clearance							
3	Presence of Trash and Litter							
4	Other (Describe in Comments)							
C	Equestrian Trail							
1	Trail Surface							
2	Brush, Tree Clearance							
3	Presence of Trash and Litter							
4	Other (Describe in Comments)							
D	Woodland/Grassland Areas							
1	Presence of Campers							
2	Cleanliness							
3	Other (Describe in Comments)							
E	River/Watercourse Areas							
1	Erosion							
2	Cleanliness							
3	Other (Describe in Comments)							
F	River Islands							
1	Cleanliness							
2	Other (Describe in Comments)							
G	Bridge(s)							
1	Physical Condition							
2	Cleanliness							
3	Other (Describe in Comments)							

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	Item	Condition Excellent	Condition Good	Condition Fair	Condition Poor	Not Observed	N/A	Comments (Additional Comments on Separ
H	Restrooms							
1	Physical Condition							
2	Cleanliness							
3	Other (Describe in Comments)							
I	Invasive Plants							
1	Red Sesbania							
2	Spanish Broom							
3	French Broom							
4	Pampas Grass							
5	Yellow Starthistle							
6	Other							
J	Other Constructed Improvements							
1	Picnic Tables (Number:)							
2	Barbecue Grills (Number:)							
3	Benches (Number:)							
4	Post and Cable Installations							
5	Parking Lot Stripes/Traffic Lines							
6	Signage							
7	Other (Describe in Comments)							
K	Other Items/Issues							
1	Large trash (special work needed)							
2	Graffiti (identify exact locations)							
3	Other (describe in comments)							
Highest Priority Items/Issues:								
Report Prepared By: _____ Phone: _____ Email: _____								
Other Reviewers: _____								
Review Date: _____ Report Date: _____								