

**OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
BIOCRITERIA DATA SUBMITTAL PROCEDURE FOR THE 2004 303(d) LIST**

This document explains the content of the form "biocriteria data form 2004 303.xls", the preferred format for submitting electronic biological data. Unless a field is noted as "optional" it must be completed for the data to be reviewed. For latitude/longitude information, either fields D-J must be completed, or fields K-M must be completed.

DATA FORM

- A. ORGANIZATION:** The name of the Organization or Watershed Council submitting data.
- B. SITE DESCRIPTION (Location):** The text description of the sample site location, using USGS stream name. (*Example:* BEAR CREEK at KIRTKAND RD 0.5 mi. D/S OF JACKSON CK CONFLUENCE. Where mi. means "miles", D/S or U/S means "down or up stream").
- C. ELEVATION:** The elevation, in feet, of the sample site. The elevation is used to calculate the percent of dissolved oxygen saturation and is useful when interpreting temperature data. Elevations can be estimated from US Geological Survey (USGS) topographic maps, generally with contour intervals of 40 or 100 feet. Elevations can be estimated in the field with an altimeter calibrated at the nearest USGS benchmark or site of known elevation.
- D. LATITUDE DEGREES:** The degrees of latitude of the sample site. Determine with a GPS unit, read from USGS topographic maps, or specify other method.
- E. LAT MINUTES:** The minutes of latitude of the sample site.
- F. LAT SECONDS:** The seconds of latitude of the sample site. Record to 0.1 seconds.
- G. LONGITUDE DEGREES:** The degrees of longitude of the sample site. Determine with a GPS unit, read from USGS topographic maps, or specify other method.
- H. LONGITUDE MINUTES:** The minutes of longitude of the sample site.
- I. LONGITUDE SECONDS:** The seconds of longitude of the sample site. Record to 0.1 seconds.
- J. LL SOURCE.** The source of sample site location latitude and longitude.

Examples: GPS; USGS Topo Map, 1:100,000 or 1:24,000 (include map scale); or specify other method.

K. LATITUDE - In decimal degrees.

L. LONGITUDE - in decimal degrees.

M. LL SOURCE. The source of sample site location latitude and longitude.

Examples: GPS; USGS Topo Map, 1:100,000 or 1:24,000 (include map scale); or utilize the mapping software available at:

<http://www.deq.state.or.us/wq/wqlmaps/wqlmapshome.htm>

or specify other method.

N. BASIN: The names are based on the USGS Hydrologic Unit Codes (HUCs) third field boundaries (optional field).

O. SUBBASIN: The names are based on the USGS Hydrologic Unit Codes (HUCs) fourth field boundaries (optional field).

P. RIVER MILE: The river mile of the sample site from WRD maps or USGS 7.5 minute topographic maps. (optional)

Q. RIVER MILE SOURCE: The title of the USGS or WRD map from which the river mile was read. (optional)

R. LASAR ID: If the site has a previously assigned LASAR number from DEQ, that number should be entered here.

S. STATION ID: If a LASAR number has not been assigned to the site, the station identification number should be assigned by the organization collecting the data. This code must be unique for each sampling site and identical each time data is reported. *Example:* LWBC BEAR001 or 402728 2001.

T. DATE OF COLLECTION: The date the sample was taken in MM/DD/YYYY format. *Example:* 05/31/1998.

U. TIME OF COLLECTION: Use the 24 hour clock and HH:MM format. *Example:* 14:35 to designate 2:35 p.m.

V. PROTOCOL FOLLOWED: Cite the protocol followed (e.g Water Quality Monitoring Technical Guide Book ,The Oregon Plan for Salmon and Watersheds, July 1999).

- W. DATA LEVEL:** If the Oregon Plan protocol was followed, categorize the Protocol Level (1,2 or 3).
- X. AQUATIC ASSEMBLAGE ANALYZED:** Macroinvertebrate, fish or periphyton.
- Y. SCORE:** The result of the multimetric analysis, the multivariate model analysis, the Biotic Condition Index or the Index of Biotic Integrity.
- Z. SCORING CRITERIA:** If biotic condition indexes are used, the scoring criteria should be summarized.
- AA. RESPONSIBLE PERSON(S):** The person(s) who collected the data, with contact information (full name and phone number).
- AB. DATA REVIEW:** For Level 3 assessments, data should be reviewed by an experienced taxonomist. Answer "yes" or "no".
- AC. DATA REVIEW CONTACT:** Name and contact information for the data reviewer.
- AD. QA/QC PLAN AVAILABLE:** If a QA/QC plan is on file with the organization please answer "yes" and provide contact information. Contact information must include a full name and phone number. Otherwise, write "no" in the box.
- AE. COMMENTS:** Any comments, if appropriate.