

Request to Obtain Information About Archaeological and/or Burial Sites

I am requesting information about archaeological and/or burial sites on this parcel:

Address of Parcel				
Town	Range	Section	Quarter Sections	
Civil Town		County		
Parcel ID (if known)				

Authorization to Access Information:

I own or lease this parcel.

I am conducting due diligence on this parcel prior to purchase or land transfer.

IMPORTANT: This form is <u>only</u> for the use of private landowners, realtors, or potential property buyers. For Section 106 review, WDNR review, or other Federal or State-driven cultural resource investigations contact Chip Brown at 1-608-264-6508.

Confidentiality Statement:

Records related to the presence of archaeological and/or burial sites are confidential, and are exempt from open records requests pursuant to Wis. Stat. §44.48 and 157.70. This information is also protected by Federal law, Section 304 of the National Historic Preservation Act, and Section 9(a) of the Archaeological Resources Protection Act of 1979.

The Wisconsin Historical Society reserves the right to release information concerning archaeological and/or burial sites when that information may help preserve and protect archaeological and/or burial sites. Recipients of that information will be asked to sign a confidentiality agreement.

All records within the Wisconsin Historical Society's Wisconsin Historic Preservation Database (WHPD) are copyrighted original works. The Wisconsin Historical Society reserves all rights of authorship granted under U.S. and International copyright laws and agreements.

Signature

I (sign here) ______, on (date) ______ affirm that the information provided above is correct, and that I have read the confidentiality statement. I agree not to reproduce or disseminate any information regarding archaeological resources and/or burial sites on this parcel if disclosure of that information would be likely to result in disturbance of the archaeological resources and/or burial sites, or if notified by the Wisconsin Historical Society that disclosure of the information would be likely to result in disturbance of the archaeological resources and/or burial sites.

I also agree to hold the Wisconsin Historical Society and its officers and employees harmless against any claims by third parties arising out of the use of the data provided to me.

Return this completed form to:	Amy L. Rosebrough
	Wisconsin Historical Society
	816 State Street, Madison, Wisconsin 53706
	Fax (608) 264-6504
	amy.rosebrough@wisconsinhistory.org