

New York State Department of Transportation

Non-Motorizd Count Field Log

(Organization)

Site Information				Installation Information	Setup	Check 1	Check 2	Pickup
Site ID:				Installation Information	Date:	Date:	Date:	Date:
Region:		County:			Time:	Time:	Time:	Time:
FIPS:		Road Name/Intersection:			Dates of Collection:			
GeoCode:					Interval 1:		Interval 2:	
BIN:		Route/Road #:			Interval 3:		Interval 4:	
RR#:				Counter Location				
Municipality:				Location Description:				
Count Type:				GPS Latitude:			Date:	
Count Movements:				GPS Longitude:			Time:	
Crew Information								
Org :				Field Technicians:				
Weather Info								
	Date	Daily High Temp	Daily Low Temp	Precipitation	Weather Type			
Day 1								
Day 2								
Day 3								
Day 4								
Day 5								
Day 6								
Day 7								
Counter Info								
	Manufacturer:	Model:	Serial No:	Filename:	A-B Dir:	Interval		
Counter 1								
Counter 2								
Counter 3								
Counter 4								
Counter 5								
Counter 6								
Count Notes:								
MAP / LAYOUT				SITE PHOTO				