

# NANTAHALA HIKING CLUB

173 Carl Slagle Road, Franklin, NC <http://nantalahikingclub.org>

## MAINTENANCE REPORT

DATE: \_\_\_\_\_ Leaders: \_\_\_\_\_ # OF PEOPLE &. LEADER \_\_\_\_\_

Total Hours: \_\_\_\_\_ Work time: \_\_\_\_\_ Travel time: \_\_\_\_\_

Drivers: #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

Trail sections worked: \_\_\_\_\_

CATEGORIES: (A) GENERAL TRAIL MAINT (B) BRIDGES, PRIVY'S (C) TRAIL ASSESSMENT

Sections: (N) Nantahala Ranger District (T) Tusquitee Ranger District

MAINTAINER	WLD	CAT	SEC	WORK COMPLETED	QTY	Linear Ft
				Water bar/rock		
				Water bar/ log		
				Rock steps		
				Log Steps		
				Step stones		
				Drainage ditch		
				Side hill bench		
				Check step/dam, rock		
				Check step/dam, log		
				Cribbing, rock		
				Cribbing, log		
				Turnpike		
				Crush, fill		
				Puncheon/bog bridge, dimensional		
				Puncheon/bog bridge, native		
				Screen, rock walls		
				Brushing/Obscuring/naturalizing		
				Shelter		
				Privy		
				Clearing water bars		
				Clearing blow downs		
<b>PLEASE DESCRIBE ANY TREAD OR OVERNIGHT SITE WORK NOT CAPTURED ABOVE</b>						

Send to: Gwen Kelly by email: [gk28734@gmail.com](mailto:gk28734@gmail.com) or

Mail to: Gwen Kelly, 214 Deerfield Lane, Franklin, NC

## **TAILGATE TOPIC CHECKLIST: Check topics covered during discussion**

	Ensure volunteers sign "Sign-in" sheet
	Review project goals, specifications, Length of hike and type of work
	Tool safety (use types, proper tool for job, proper handling)
	PPE (hard hats, gloves, long pants, eye protection, etc.)
	Hiking on uneven terrain, over exertion, take breaks when needed
	Back sprain, blisters, hot spots, twisted ankles
	Emergency action plan
	Radio/Cell phone coverage
	Bites (insects, bees, animal, snakes), allergies (plants, bee stings), poison ivy, sumac, oak plants, animal encounters
	Falling objects (limbs, hazard trees, rocks, etc.)
	Weather conditions (need rain gear?)
	Other recreational users on the trail
	Sufficient food and water?
	Medical conditions to know about? (EpiPen, heart meds, inhalers, etc.)
	Identify who is carrying first aid

## **ADDITIONAL SAFETY TOPICS COVERED**

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Crew Leader Signature: \_\_\_\_\_ Date: \_\_\_\_\_