



## Archaeological Services – Conservation Treatment – Post-excavation

### Personal Information

Miss  Mrs.  Ms.  Mr.  Dr.

First Name: \_\_\_\_\_

Province/State: \_\_\_\_\_

Last Name: \_\_\_\_\_

Country: \_\_\_\_\_

Organization: \_\_\_\_\_

Postal/Zip code: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Web Site: (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

\_\_\_\_\_

Fax: \_\_\_\_\_

City: \_\_\_\_\_

E-mail: \_\_\_\_\_

Organization Type (see Client Categories on the CCI Web site): \_\_\_\_\_

### Request Information

Artifact owner / custodian / repository information: \_\_\_\_\_

\_\_\_\_\_

Province / Territory issuing permit: \_\_\_\_\_

Site – Site name: \_\_\_\_\_ Borden number: \_\_\_\_\_

Type of site (Thule, Dorset, Fur-trade, etc.): \_\_\_\_\_

Site date: \_\_\_\_\_ Permit holder: \_\_\_\_\_

Names and titles of other field research members: \_\_\_\_\_

\_\_\_\_\_

Names of research affiliates (e.g. Band Council, consulting scientists, university or museum staff including conservators, collections managers, technicians, etc.): \_\_\_\_\_

\_\_\_\_\_

Date of excavation (if applicable): \_\_\_\_\_ Total number of artifacts: \_\_\_\_\_

Materials recovered (e.g. bone, ivory, wood, metal (iron, copper, lead), skin, leather, textile, etc.): \_\_\_\_\_

\_\_\_\_\_

Environment of site:  dry  wet  waterlogged  submerged  frozen

other (please specify): \_\_\_\_\_

Other (please list any factors that may affect the conservation of material from this site; this would include large or heavy artifacts, unusual soil conditions that would affect preservation, unusual materials such as rubber or plastics, post-excavation storage conditions, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## Archaeological Services – Conservation Treatment – Post-excavation (con't.)

### Request Information (con't.)

#### Project Details

Project description (aims and objectives of project): \_\_\_\_\_

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Relevant publications/reports/Web sites: \_\_\_\_\_

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#### Significance

What is the significance of the site? (Attach copies of pertinent literature or documentation.) \_\_\_\_\_

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#### Purpose of Request

Describe the anticipated benefits and uses of this treatment: \_\_\_\_\_

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#### Key Request Dates

Requested completion date: \_\_\_\_\_

You may attach supporting documents or images