## **ATTACHMENT 8**

## DOCUMENTATION OF ACTIONS TAKEN THAT RESULTED IN UNAVOIDABLE INJURY TO HISTORIC PROPERTIES

This form should be completed and submitted, along with any additional supporting documentation, in a reasonable and timely manner to the appropriate entities listed below:

Name of incident:
Date/time of incident:
Location of incident:
Brief description of response action approved (including the date) by Federal On-S cene Coordinator (OSC) where protecting public health and safety was in conflict with protecting historic properties:
Brief description of why protecting public health and safety could not be accomplished while also protecting historic properties:
Federal OSC Name and Title:
Federal OSC Signature:
Date of Signa ture:
Faxed to:
Judith Bittner, Alaska State Historic Preservation Officer (907-269-8908 fax)
(Name and fax number of potentially-affected resource managers/trustees):
(Name and fax number of potentially-affected resource managers/trustees):
(Name and fax number of potentially-affected resource managers/trustees):