

APPENDIX B

**DIGITAL VISUAL LIBRARY IMAGE INFORMATION**

(The information supplied about each image listed below will be entered into an image database program. This information will provide the end user of these images with the basic details about the images. Please provide individual forms for each photo submitted.)

(ER 25-1-91)

LAB USE ONLY

**IMAGE DESCRIPTION**

1. SUBJECT TITLE/EVENT/PROJECT NAME		2. MAJOR CATEGORY/MISSION AREA(S) <input type="checkbox"/> Civil Construction <input type="checkbox"/> Fish and Wildlife <input type="checkbox"/> Flood Control <input type="checkbox"/> Navigation <input type="checkbox"/> Hydropower <input type="checkbox"/> Safety <input type="checkbox"/> Recreation <input type="checkbox"/> Environmental <input type="checkbox"/> Emergency Response <input type="checkbox"/> History <input type="checkbox"/> Research and Development <input type="checkbox"/> People <input type="checkbox"/> Military Construction <input type="checkbox"/> Hazardous/Toxic Waste <input type="checkbox"/> Military Housing <input type="checkbox"/> Installations <input type="checkbox"/> Water Supply <input type="checkbox"/> Other _____
3. PHOTO, VIDEO OR GRAPHIC CAPTION/GENERAL INFORMATION		
4. LOCATION WHERE PHOTO, VIDEO TAKEN OR GRAPHIC CREATED <i>(Include state, territory, country)</i>	5a. PHOTOGRAPHER/GRAPHIC DESIGNER NAME <i>(If known)</i>	
	5b. LAST 4 DIGITS OF SSN:	
6. ORIGINAL PHOTO, VIDEO STORAGE LOCATION OFFICE SYMBOL	7. DATE OF PHOTO/GRAPHIC <i>(If known)</i>	8. LOCAL FILE REFERENCE <i>(Image/File number)</i>

9. SUBJECT/KEYWORD FOR GLOBAL SEARCHES *(Check all that apply)*

<input type="checkbox"/> air force	<input type="checkbox"/> dock	<input type="checkbox"/> irrigation	<input type="checkbox"/> ship
<input type="checkbox"/> army	<input type="checkbox"/> dredging	<input type="checkbox"/> jetty	<input type="checkbox"/> stream
<input type="checkbox"/> barge	<input type="checkbox"/> employee	<input type="checkbox"/> lake/reservoir	<input type="checkbox"/> survey boat
<input type="checkbox"/> barracks	<input type="checkbox"/> emergency operations	<input type="checkbox"/> levee	<input type="checkbox"/> trail
<input type="checkbox"/> beach	<input type="checkbox"/> endangered species	<input type="checkbox"/> lighthouse	<input type="checkbox"/> visitor
<input type="checkbox"/> boat/boating	<input type="checkbox"/> erosion	<input type="checkbox"/> lock	<input type="checkbox"/> visitor center
<input type="checkbox"/> camping	<input type="checkbox"/> fish	<input type="checkbox"/> military (people)	<input type="checkbox"/> water quality
<input type="checkbox"/> canal	<input type="checkbox"/> fishing	<input type="checkbox"/> model	<input type="checkbox"/> water sports
<input type="checkbox"/> ceremony	<input type="checkbox"/> flooding	<input type="checkbox"/> ordnance/munition	<input type="checkbox"/> wetland
<input type="checkbox"/> channel	<input type="checkbox"/> harbor	<input type="checkbox"/> park	<input type="checkbox"/> wildlife
<input type="checkbox"/> chemical	<input type="checkbox"/> hiking	<input type="checkbox"/> powerhouse	<input type="checkbox"/> other _____
<input type="checkbox"/> civilian (people)	<input type="checkbox"/> historical	<input type="checkbox"/> ranger	
<input type="checkbox"/> dam	<input type="checkbox"/> housing	<input type="checkbox"/> river	
<input type="checkbox"/> dike	<input type="checkbox"/> hurricanes	<input type="checkbox"/> scenic	

10. SUBMISSION <input type="checkbox"/> INITIAL <input type="checkbox"/> UPDATE <i>(Previous Number):</i> _____	11. REMARKS:
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**INFORMATION SUBMITTED BY**

12. CONTACT NAME <i>(Person completing this form)</i>	13. OFFICE SYMBOL	14. PHONE NUMBER	15. DATE
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**LAB USE ONLY**

16. FILE NO.	17. DISK NO.	18. DATE
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