## Visual Impact Rating Form

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Viewpoint #:			Viewpoint Location:					
Your Name:			Date:					
Landscape Similarity Zone (LSZ):			Viewer Type check as many as apply  □Resident □Traveler □Recreational □Other					
Inventoried Aesthetic Resources: □Yes □No			Describe:					
VIEWPOINT DESCRIF	PTION: Please de.	scribe this view in your own	words.					
VIEWPOINT SENSIT	<b>FIVITY</b> : Rate the s	cenic quality and viewer exp	posure for this viev	N.				
			VIEWER EXPOSURE: frequency and duration of view					
SCENIC QUALITY: please rate existing scenic quality  □Low □Moderate □High				☐ Continuous ☐ Repeated/Regular ☐ Occasional/Brief ☐ Rare				
CONTRAST RATING	G: Rate the level of	of contrast between the prop	osed structures ar	nd the existing view.				
COMPONENT	SCORE	DESCRIPTION OF CO	TION OF CONTRAST					
Landform								
Vegetation								
Land Use								
Water *								
Sky								
Viewer Activity								
TOTAL		Total all scores above.						
AVERAGE		Average all scores abo						
* If no water is vis	ible in the view, ple	ease enter "N/A" in the 'Score	re".					
Variable factors that	may have influence	ced rating (atmospheric co	onditions, seasor	n, etc.):				
Perceived effect on s	cenic quality / vie	wer enjoyment:			Contrast Rating Score Chart  O Insignificant 0.5 1 Minimal 1.5 2 Moderate 2.5 3 Appreciable 3.5 4 Strong			