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| Wiltshire Museum, Devizes Deposition of Archaeological Archive Form |
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| Site Details: | Wiltshire Museum Number: |  |
| Site Name |  |
| Site Code |  |
| Site Address |  |
| Parish |  |
| Co-ordinates |  |
| Other reference number (e.g. project or account code) |  |
|  |  |  |
| Depositor Details | Company Name |  |
| Address |  |
| Main Contact |  |
| Email |  |
|  |  |  |
| Land Owner/Occupier Details (individual or company with legal ownership of material archive | Name |  |
| Address |  |
| Main Contact |  |
| Email |  |
| Start Date |  | End Date |  |
| Requested deposition period (please specify preferred dates/period and we will try to accommodate where possible): |  |
| Number of boxes of: |
| Documents |  | Bulk finds |  | Small finds |  |
| Number of boxes of material needed special attention: |
| Human Remains |  | Waterlogged material |  | Other |  |
| Please provide a summary of the project, including the period and type of archaeology covered (this may be a copy of the report summary if appropriate): |  |
| Please provide a statement of significance and future potential, taking into account any relevant research frameworks (this may be copied from specialist reports if appropriate): |  |
| Any other relevant site information: |  |