

U.S. Army Corps of Engineers
WETLAND DETERMINATION DATA SHEET – Arid West Region
 See ERDC/EL TR-07-24; the proponent agency is CECW-CO-R

*OMB Control #: 0710-xxxx, Exp: Pending
 Requirement Control Symbol EXEMPT:
 (Authority: AR 335-15, paragraph 5-2a)*

Project/Site: _____ City/County: _____ Sampling Date: _____
 Applicant/Owner: _____ State: _____ Sampling Point: _____
 Investigator(s): _____ Section, Township, Range: _____
 Landform (hillside, terrace, etc.): _____ Local relief (concave, convex, none): _____ Slope (%): _____
 Subregion (LRR): _____ Lat: _____ Long: _____ Datum: _____
 Soil Map Unit Name: _____ NWI classification: _____

Are climatic / hydrologic conditions on the site typical for this time of year? Yes _____ No _____ (If no, explain in Remarks.)
 Are Vegetation _____, Soil _____, or Hydrology _____ significantly disturbed? Are "Normal Circumstances" present? Yes _____ No _____
 Are Vegetation _____, Soil _____, or Hydrology _____ naturally problematic? (If needed, explain any answers in Remarks.)

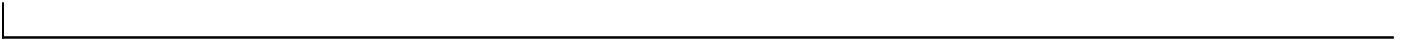
SUMMARY OF FINDINGS – Attach site map showing sampling point locations, transects, important features, etc.

Hydrophytic Vegetation Present? Yes _____ No <u>X</u> Hydric Soil Present? Yes _____ No <u>X</u> Wetland Hydrology Present? Yes _____ No <u>X</u>	Is the Sampled Area within a Wetland? Yes _____ No <u>X</u>
Remarks: _____ _____ _____	

VEGETATION – Use scientific names of plants.

<u>Tree Stratum</u> (Plot size: _____)	<u>Absolute % Cover</u>	<u>Dominant Species?</u>	<u>Indicator Status</u>	Dominance Test worksheet:
1. _____	_____	_____	_____	Number of Dominant Species That Are OBL, FACW, or FAC: _____ Total Number of Dominant Species Across All Strata: _____ Percent of Dominant Species That Are OBL, FACW, or FAC: _____
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
=Total Cover				Prevalence Index worksheet: Total % Cover of: _____ Multiply by: OBL species _____ x 1 = _____ FACW species _____ x 2 = _____ FAC species _____ x 3 = _____ FACU species _____ x 4 = _____ UPL species _____ x 5 = _____ Column Totals: _____ (A) Prevalence Index = B/A = _____
<u>Sapling/Shrub Stratum</u> (Plot size: _____)	<u>Absolute % Cover</u>	<u>Dominant Species?</u>	<u>Indicator Status</u>	
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
=Total Cover				
<u>Herb Stratum</u> (Plot size: _____)	<u>Absolute % Cover</u>	<u>Dominant Species?</u>	<u>Indicator Status</u>	Hydrophytic Vegetation Indicators: _____ Dominance Test is >50% _____ Prevalence Index is ≤3.0 ¹ _____ Morphological Adaptations ¹ (Provide supporting data in Remarks or on a separate sheet) _____ Problematic Hydrophytic Vegetation ¹ (Explain)
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
=Total Cover				
<u>Woody Vine Stratum</u> (Plot size: _____)	<u>Absolute % Cover</u>	<u>Dominant Species?</u>	<u>Indicator Status</u>	¹ Indicators of hydric soil and wetland hydrology may be present, unless disturbed or problematic.
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	Hydrophytic Vegetation Present? Yes _____ No <u>X</u>
=Total Cover				
% Bare Ground in Herb Stratum _____		% Cover of Biotic Crust _____		

Remarks: _____



etc.

(A)

(B)

(A/B)

(B)

ng

)

ust



SOIL

Sampling Point: _____

Profile Description: (Describe to the depth needed to document the indicator or confirm the absence of indicators.)

Depth (inches)	Matrix		Redox Features				Texture	Remarks
	Color (moist)	%	Color (moist)	%	Type ¹	Loc ²		

¹Type: C=Concentration, D=Depletion, RM=Reduced Matrix, CS=Covered or Coated Sand Grains. ²Location: PL=Pore Lining, M=Matrix.

Hydric Soil Indicators: (Applicable to all LRRs, unless otherwise noted.)		Indicators for Problematic Hydric Soils³:
___ Histosol (A1)	___ Sandy Redox (S5)	___ 1 cm Muck (A9) (LRR C)
___ Histic Epipedon (A2)	___ Stripped Matrix (S6)	___ 2 cm Muck (A10) (LRR B)
___ Black Histic (A3)	___ Loamy Mucky Mineral (F1)	___ Iron-Manganese Masses (F12) (LRR D)
___ Hydrogen Sulfide (A4)	___ Loamy Gleyed Matrix (F2)	___ Reduced Vertic (F18)
___ Stratified Layers (A5) (LRR C)	___ Depleted Matrix (F3)	___ Red Parent Material (F21)
___ 1 cm Muck (A9) (LRR D)	___ Redox Dark Surface (F6)	___ Very Shallow Dark Surface (F22)
___ Depleted Below Dark Surface (A11)	___ Depleted Dark Surface (F7)	___ Other (Explain in Remarks)
___ Thick Dark Surface (A12)	___ Redox Depressions (F8)	
___ Sandy Mucky Mineral (S1)		
___ Sandy Gleyed Matrix (S4)		

³Indicators of hydrophytic vegetation and wetland hydrology must be present, unless disturbed or problematic.

Restrictive Layer (if observed):	Hydric Soil Present?	Yes ___ No <u>X</u>
Type: _____		
Depth (inches): _____		

Remarks: _____

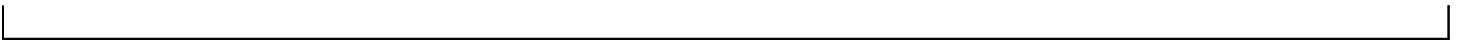
HYDROLOGY

Wetland Hydrology Indicators:		Secondary Indicators (minimum of two required)
Primary Indicators (minimum of one is required: check all that apply)		
___ Surface Water (A1)	___ Salt Crust (B11)	___ Water Marks (B1) (Riverine)
___ High Water Table (A2)	___ Biotic Crust (B12)	___ Sediment Deposits (B2) (Riverine)
___ Saturation (A3)	___ Aquatic Invertebrates (B13)	___ Drift Deposits (B3) (Riverine)
___ Water Marks (B1) (Nonriverine)	___ Hydrogen Sulfide Odor (C1)	___ Drainage Patterns (B10)
___ Sediment Deposits (B2) (Nonriverine)	___ Oxidized Rhizospheres on Living Roots (C3)	___ Dry-Season Water Table (C2)
___ Drift Deposits (B3) (Nonriverine)	___ Presence of Reduced Iron (C4)	___ Crayfish Burrows (C8)
___ Surface Soil Cracks (B6)	___ Recent Iron Reduction in Tilled Soils (C6)	___ Saturation Visible on Aerial Imagery (C9)
___ Inundation Visible on Aerial Imagery (B7)	___ Thin Muck Surface (C7)	___ Shallow Aquitard (D3)
___ Water-Stained Leaves (B9)	___ Other (Explain in Remarks)	___ FAC-Neutral Test (D5)

Field Observations:				Wetland Hydrology Present?	Yes ___ No <u>X</u>
Surface Water Present?	Yes ___ No ___	Depth (inches):	_____		
Water Table Present?	Yes ___ No ___	Depth (inches):	_____		
Saturation Present? (includes capillary fringe)	Yes ___ No ___	Depth (inches):	_____		

Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available: _____

Remarks: _____



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The public reporting burden for this collection of information, OMB Control Number 0710-XXXX, is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. **PLEASE DO NOT RETURN YOUR REQUEST TO THE ABOVE EMAIL**

Privacy Act Statement

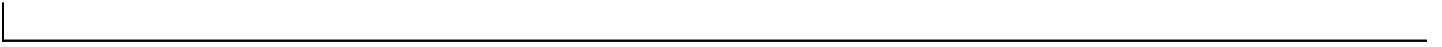
Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned. System of Record Notice (SORN). The information received is entered into our permit tracking database and a SORN has been completed (SORN #A1145b) and may be accessed at the following website: <http://dpcl.dod.mil/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx>

VEGETATION Continued – Use scientific names of plants.

Sampling Point: _____

<u>Tree Stratum</u>	Absolute % Cover	Dominant Species?	Indicator Status	Definitions of Vegetation Strata: Tree – Woody plants 3 in. (7.6 cm) or more in diameter at breast height (DBH), regardless of height. Sapling/Shrub – Woody plants less than 3 in. DBH, regardless of height. Herb – All herbaceous (non-woody) plants, including herbaceous vines, regardless of size. Woody Vine – All woody vines, regardless of height.
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
			=Total Cover	
<u>Sapling/Shrub Stratum</u>				
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
13. _____	_____	_____	_____	
			=Total Cover	
<u>Herb Stratum</u>				
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
13. _____	_____	_____	_____	
14. _____	_____	_____	_____	
15. _____	_____	_____	_____	
16. _____	_____	_____	_____	
17. _____	_____	_____	_____	
18. _____	_____	_____	_____	
19. _____	_____	_____	_____	
20. _____	_____	_____	_____	
			=Total Cover	
<u>Woody Vine Stratum</u>				
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
			=Total Cover	

Remarks:



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