

WETLAND DETERMINATION DATA FORM – Arid West Region

Project/Site: _____ City/County: _____ Sampling Date: _____
 Applicant/Owner: _____ State: _____ Sampling Point: _____
 Investigator(s): _____ Section, Township, Range: _____
 Landform (hillslope, 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 _____ Hydric Soil Present? Yes _____ No _____ Wetland Hydrology Present? Yes _____ No _____	Is the Sampled Area within a Wetland? Yes _____ No _____
Remarks: _____ _____ _____	

VEGETATION

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

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. ²Location: PL=Pore Lining, RC=Root Channel, M=Matrix.

<p>Hydric Soil Indicators: (Applicable to all LRRs, unless otherwise noted.)</p> <p> <input type="checkbox"/> Histosol (A1) <input type="checkbox"/> Histic Epipedon (A2) <input type="checkbox"/> Black Histic (A3) <input type="checkbox"/> Hydrogen Sulfide (A4) <input type="checkbox"/> Stratified Layers (A5) (LRR C) <input type="checkbox"/> 1 cm Muck (A9) (LRR D) <input type="checkbox"/> Depleted Below Dark Surface (A11) <input type="checkbox"/> Thick Dark Surface (A12) <input type="checkbox"/> Sandy Mucky Mineral (S1) <input type="checkbox"/> Sandy Gleyed Matrix (S4) </p>	<p> <input type="checkbox"/> Sandy Redox (S5) <input type="checkbox"/> Stripped Matrix (S6) <input type="checkbox"/> Loamy Mucky Mineral (F1) <input type="checkbox"/> Loamy Gleyed Matrix (F2) <input type="checkbox"/> Depleted Matrix (F3) <input type="checkbox"/> Redox Dark Surface (F6) <input type="checkbox"/> Depleted Dark Surface (F7) <input type="checkbox"/> Redox Depressions (F8) <input type="checkbox"/> Vernal Pools (F9) </p>	<p>Indicators for Problematic Hydric Soils³:</p> <p> <input type="checkbox"/> 1 cm Muck (A9) (LRR C) <input type="checkbox"/> 2 cm Muck (A10) (LRR B) <input type="checkbox"/> Reduced Vertic (F18) <input type="checkbox"/> Red Parent Material (TF2) <input type="checkbox"/> Other (Explain in Remarks) </p>
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³Indicators of hydrophytic vegetation and wetland hydrology must be present.

<p>Restrictive Layer (if present):</p> <p>Type: _____</p> <p>Depth (inches): _____</p>	<p>Hydric Soil Present? Yes _____ No _____</p>
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Remarks:

HYDROLOGY

<p>Wetland Hydrology Indicators:</p> <p>Primary Indicators (any one indicator is sufficient)</p> <p> <input type="checkbox"/> Surface Water (A1) <input type="checkbox"/> High Water Table (A2) <input type="checkbox"/> Saturation (A3) <input type="checkbox"/> Water Marks (B1) (Nonriverine) <input type="checkbox"/> Sediment Deposits (B2) (Nonriverine) <input type="checkbox"/> Drift Deposits (B3) (Nonriverine) <input type="checkbox"/> Surface Soil Cracks (B6) <input type="checkbox"/> Inundation Visible on Aerial Imagery (B7) <input type="checkbox"/> Water-Stained Leaves (B9) </p>	<p> <input type="checkbox"/> Salt Crust (B11) <input type="checkbox"/> Biotic Crust (B12) <input type="checkbox"/> Aquatic Invertebrates (B13) <input type="checkbox"/> Hydrogen Sulfide Odor (C1) <input type="checkbox"/> Oxidized Rhizospheres along Living Roots (C3) <input type="checkbox"/> Presence of Reduced Iron (C4) <input type="checkbox"/> Recent Iron Reduction in Plowed Soils (C6) <input type="checkbox"/> Other (Explain in Remarks) </p>	<p><u>Secondary Indicators (2 or more required)</u></p> <p> <input type="checkbox"/> Water Marks (B1) (Riverine) <input type="checkbox"/> Sediment Deposits (B2) (Riverine) <input type="checkbox"/> Drift Deposits (B3) (Riverine) <input type="checkbox"/> Drainage Patterns (B10) <input type="checkbox"/> Dry-Season Water Table (C2) <input type="checkbox"/> Thin Muck Surface (C7) <input type="checkbox"/> Crayfish Burrows (C8) <input type="checkbox"/> Saturation Visible on Aerial Imagery (C9) <input type="checkbox"/> Shallow Aquitard (D3) <input type="checkbox"/> FAC-Neutral Test (D5) </p>
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<p>Field Observations:</p> <p>Surface Water Present? Yes _____ No _____ Depth (inches): _____</p> <p>Water Table Present? Yes _____ No _____ Depth (inches): _____</p> <p>Saturation Present? (includes capillary fringe) Yes _____ No _____ Depth (inches): _____</p>	<p>Wetland Hydrology Present? Yes _____ No _____</p>
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Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available:

Remarks: