

U.S. Army Corps of Engineers WETLAND DETERMINATION DATA SHEET – Alaska 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)
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Project/Site: _____ Borough/City: _____ Sampling Date: _____

Applicant/Owner: _____ Sampling Point: _____

Investigator(s): _____ Landform (hillside, terrace, hummocks, etc.): _____

Local relief (concave, convex, none): _____ Slope (%): _____

Subregion: _____ 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>
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Remarks: _____

VEGETATION – Use scientific names of plants.

<u>Tree Stratum</u>	Absolute % Cover	Dominant Species?	Indicator Status	
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
				=Total Cover
50% of total cover: _____		20% of total cover: _____		
<u>Sapling/Shrub Stratum</u>				
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
				=Total Cover
50% of total cover: _____		20% of total cover: _____		
<u>Herb Stratum</u>				
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
				=Total Cover
50% of total cover: _____		20% of total cover: _____		
Plot Size (radius, or length x width) _____		% Bare Ground _____		
% Cover of Wetland Bryophytes _____		Total Cover of Bryophytes _____		
(Where applicable)				

Dominance Test worksheet:

Number of Dominant Species That Are OBL, FACW, or FAC: _____ (A)

Total Number of Dominant Species Across All Strata: _____ (B)

Percent of Dominant Species That Are OBL, FACW, or FAC: _____ (A/B)

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)	_____ (B)
Prevalence Index = B/A = _____	

Hydrophytic Vegetation Indicators:

____ Dominance Test is >50%

____ Prevalence Index is ≤3.0¹

____ Morphological Adaptations¹ (Provide supporting data in Remarks or on a separate sheet)

____ Problematic Hydrophytic Vegetation¹ (Explain)

¹Indicators of hydric soil and wetland hydrology must be present, unless disturbed or problematic.

Hydrophytic Vegetation Present? Yes _____ No X

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: <input type="checkbox"/> Histosol or Histel (A1) <input type="checkbox"/> Histic Epipedon (A2) <input type="checkbox"/> Black Histic (A3) <input type="checkbox"/> Hydrogen Sulfide (A4) <input type="checkbox"/> Thick Dark Surface (A12) <input type="checkbox"/> Alaska Gleyed (A13) <input type="checkbox"/> Alaska Redox (A14) <input type="checkbox"/> Alaska Gleyed Pores (A15)	Indicators for Problematic Hydric Soils³: <input type="checkbox"/> Depleted Below Dark Surface (A11) <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"/> Red Parent Material (F21) <input type="checkbox"/> Very Shallow Dark Surface (F22)	<input type="checkbox"/> Alaska Color Change (TA4) ⁴ <input type="checkbox"/> Alaska Alpine Swales (TA5) <input type="checkbox"/> Alaska Redox With 2.5Y Hue <input type="checkbox"/> Alaska Gleyed Without Hue 5Y or Redder Underlying Layer <input type="checkbox"/> Other (Explain in Remarks)
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³One indicator of hydrophytic vegetation, one primary indicator of wetland hydrology, and an appropriate landscape position must be present unless disturbed or problematic.
⁴Give details of color change in Remarks.

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

HYDROLOGY

Wetland Hydrology Indicators: <u>Primary Indicators (any one indicator is sufficient)</u> <input type="checkbox"/> Surface Water (A1) <input type="checkbox"/> High Water Table (A2) <input type="checkbox"/> Saturation (A3) <input type="checkbox"/> Water Marks (B1) <input type="checkbox"/> Sediment Deposits (B2) <input type="checkbox"/> Drift Deposits (B3) <input type="checkbox"/> Algal Mat or Crust (B4) <input type="checkbox"/> Iron Deposits (B5) <input type="checkbox"/> Surface Soil Cracks (B6)	<input type="checkbox"/> Inundation Visible on Aerial Imagery (B7) <input type="checkbox"/> Sparsely Vegetated Concave Surface (B8) <input type="checkbox"/> Marl Deposits (B15) <input type="checkbox"/> Hydrogen Sulfide Odor (C1) <input type="checkbox"/> Dry-Season Water Table (C2) <input type="checkbox"/> Other (Explain in Remarks)	<u>Secondary Indicators (2 or more required)</u> <input type="checkbox"/> Water-Stained Leaves (B9) <input type="checkbox"/> Drainage Patterns (B10) <input type="checkbox"/> Oxidized Rhizospheres along Living Roots (C3) <input type="checkbox"/> Presence of Reduced Iron (C4) <input type="checkbox"/> Salt Crust (B11) <input type="checkbox"/> Stunted or Stressed Plants (D1) <input type="checkbox"/> Geomorphic Position (D2) <input type="checkbox"/> Shallow Aquitard (D3) <input type="checkbox"/> Microtopographic Relief (D4) <input type="checkbox"/> FAC-Neutral Test (D5)
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Field Observations: Surface Water Present? Yes _____ No _____ Depth (inches): _____ Water Table Present? Yes _____ No _____ Depth (inches): _____ Saturation Present? Yes _____ No _____ Depth (inches): _____ (includes capillary fringe)	Wetland Hydrology Present? Yes _____ No <u>X</u>
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Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available:

Remarks: