

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

OMB Control #: 0710-0024, Exp: 06/30/2024
 Requirement Control Symbol EXEMPT:
 (Authority: AR 335-15, paragraph 5-2a)

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 _____ Hydric Soil Present? Yes _____ No _____ Wetland Hydrology Present? Yes _____ No _____	Is the Sampled Area within a Wetland? Yes _____ No _____
Remarks:	

VEGETATION – Use scientific names of plants.

<u>Tree Stratum</u>	Absolute % Cover	Dominant Species?	Indicator Status																	
1. _____	_____	_____	_____	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)																
2. _____	_____	_____	_____																	
3. _____	_____	_____	_____																	
4. _____	_____	_____	_____																	
=Total Cover																				
50% of total cover: _____		20% of total cover: _____																		
<u>Sapling/Shrub Stratum</u>				Prevalence Index worksheet: <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: right;">Total % Cover of:</td> <td style="width:50%; text-align: left;">Multiply by:</td> </tr> <tr> <td>OBL species _____</td> <td>x 1 = _____</td> </tr> <tr> <td>FACW species _____</td> <td>x 2 = _____</td> </tr> <tr> <td>FAC species _____</td> <td>x 3 = _____</td> </tr> <tr> <td>FACU species _____</td> <td>x 4 = _____</td> </tr> <tr> <td>UPL species _____</td> <td>x 5 = _____</td> </tr> <tr> <td>Column Totals: _____ (A)</td> <td>_____ (B)</td> </tr> <tr> <td colspan="2" style="text-align: center;">Prevalence Index = B/A = _____</td> </tr> </table>	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 = _____	
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 = _____																				
1. _____	_____	_____	_____																	
2. _____	_____	_____	_____																	
3. _____	_____	_____	_____																	
4. _____	_____	_____	_____																	
5. _____	_____	_____	_____																	
6. _____	_____	_____	_____																	
=Total Cover																				
50% of total cover: _____		20% of total cover: _____																		
<u>Herb Stratum</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 Indicators of hydric soil and wetland hydrology must be present, unless disturbed or problematic.																
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 _____			Hydrophytic Vegetation Present? Yes _____ No _____																
% Cover of Wetland Bryophytes _____ (Where applicable)	Total Cover of Bryophytes _____																			
Remarks:																				

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 _____
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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 Deposits (C5) <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 _____
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Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available:

Remarks:

VEGETATION Continued – Use scientific names of plants.

Sampling Point: _____

<u>Tree Stratum</u>	<u>Absolute % Cover</u>	<u>Dominant Species?</u>	<u>Indicator Status</u>	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, regardless of size.
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
_____ =Total Cover				
50% of total cover: _____		20% of total cover: _____		
<u>Sapling/Shrub Stratum</u>				
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
13. _____	_____	_____	_____	
14. _____	_____	_____	_____	
_____ =Total Cover				
50% of total cover: _____		20% of total cover: _____		
<u>Herb Stratum</u>				
11. _____	_____	_____	_____	
12. _____	_____	_____	_____	
13. _____	_____	_____	_____	
14. _____	_____	_____	_____	
15. _____	_____	_____	_____	
16. _____	_____	_____	_____	
17. _____	_____	_____	_____	
18. _____	_____	_____	_____	
19. _____	_____	_____	_____	
20. _____	_____	_____	_____	
21. _____	_____	_____	_____	
22. _____	_____	_____	_____	
_____ =Total Cover				
50% of total cover: _____		20% of total cover: _____		

Remarks:

AGENCY DISCLOSURE NOTIFICATION

The public reporting burden for this collection of information, OMB Control Number 0710-0024, is estimated to average 30 minutes 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.d.defense.gov/Privacy/SORNsIndex/DOD-wide-SORN-Article-View/Article/570115/a1145b-ce.aspx>