

WETLAND DETERMINATION DATA FORM – Great Plains 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 – Use scientific names of plants.

Tree Stratum (Plot size: _____)	Absolute % Cover	Dominant Species?	Indicator Status	
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
_____ = Total Cover				
Sapling/Shrub Stratum (Plot size: _____)				
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
_____ = Total Cover				
Herb Stratum (Plot size: _____)				
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
_____ = Total Cover				
Woody Vine Stratum (Plot size: _____)				
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
_____ = Total Cover				
% Bare Ground in Herb Stratum _____				

Dominance Test worksheet:
 Number of Dominant Species That Are OBL, FACW, or FAC (excluding 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:
 ___ 1 - Rapid Test for Hydrophytic Vegetation
 ___ 2 - Dominance Test is >50%
 ___ 3 - Prevalence Index is ≤3.0¹
 ___ 4 - 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 _____

Remarks: _____

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Extra Page for Vegetation Species

Date _____
Sampling Point _____

Tree Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
5				
6				
7				
8				
9				
10				

_____ = Total Cover

Sapling/Shrub Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
6				
7				
8				
9				
10				

_____ = Total Cover

Herb Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				

_____ = Total Cover

Over > ?

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Date _____
Sampling Point _____

Tree Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
11				
12				
13				
14				
15				

_____ = Total Cover

Sapling/Shrub Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
11				
12				
13				
14				
15				

_____ = Total Cover

Herb Stratum

	Scientific Name	Absolute % Cover	Dominant Species?	Indicator Status
36				
37				
38				
39				
40				
41				
42				
43				
44				
45				
46				
47				
48				
49				
50				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				

_____ = Total Cover

Wetland Qualitative Revegetation Evaluation Form

Form # _____

Date _____
 Observer(s) _____
 Location ID _____

Photographs taken today? Y N

Are desired wetland plant species present? Y N

Are there any issues regarding the establishment of the desired wetland species? Explain, if so.

Are the hydrologic conditions appropriate for successful establishment and sustainability of the wetland. If not, describe the problem/issue.

Woody Plant Counts

Species	Stem Count	Height			Width		
		1	2	3	1	2	3

Noxious weed evaluation. See separate noxious weed evaluations conducted throughout the summer months (June – August).

Suggestions for management:

Other comments:

Completed by: _____ Date _____