

**DATA FORM**  
**ROUTINE WETLAND DETERMINATION**  
**(1987 COE Wetlands Determination Manual)**

Project / Site: _____ Applicant / Owner: _____ Investigator: _____	Date: _____ County: _____ State: _____
Do normal circumstances exist on the site?      Yes _____ No _____ Is the site significantly disturbed (Atypical situation)?      Yes _____ No _____ Is the area a potential problem area?      Yes _____ No _____ (explain on reverse if needed)	Community ID: _____ Transect ID: _____ Plot ID: _____

**VEGETATION**

Dominant Plant Species	Stratum	Indicator	Dominant Plant Species	Stratum	Indicator
1. _____	_____	_____	9. _____	_____	_____
2. _____	_____	_____	10. _____	_____	_____
3. _____	_____	_____	11. _____	_____	_____
4. _____	_____	_____	12. _____	_____	_____
5. _____	_____	_____	13. _____	_____	_____
6. _____	_____	_____	14. _____	_____	_____
7. _____	_____	_____	15. _____	_____	_____
8. _____	_____	_____	16. _____	_____	_____

Percent of Dominant Species that are OBL, FACW, or FAC excluding FAC-). \_\_\_\_\_

Remarks:

**HYDROLOGY**

<input type="checkbox"/> Recorded Data (Describe In Remarks): <input type="checkbox"/> Stream, Lake, or Tide Gauge <input type="checkbox"/> Aerial Photographs <input type="checkbox"/> Other  <input type="checkbox"/> No Recorded Data Available  <b>Field Observations:</b>  Depth of Surface Water: _____ (in.)  Depth to Free Water in Pit: _____ (in.)  Depth to Saturated Soil: _____ (in.)	<b>Wetland Hydrology Indicators</b>  <b>Primary Indicators:</b> <input type="checkbox"/> Inundated <input type="checkbox"/> Saturated in Upper 12" <input type="checkbox"/> Water Marks <input type="checkbox"/> Drift Lines <input type="checkbox"/> Sediment Deposits <input type="checkbox"/> Drainage Patterns in Wetlands  <b>Secondary Indicators:</b> <input type="checkbox"/> Oxidized Roots Channels in Upper 12" <input type="checkbox"/> Water-Stained Leaves <input type="checkbox"/> Local Soil Survey Data <input type="checkbox"/> FAC-Neutral Test <input type="checkbox"/> Other (Explain in Remarks)
Remarks:	

**SOILS**

Map Unit Name

(Series and Phase): \_\_\_\_\_ Drainage Class: \_\_\_\_\_

Taxonomy (Subgroup): \_\_\_\_\_ Confirm Mapped Type? Yes \_\_\_ No \_\_\_

**Profile Description:**

Depth (inches)	Horizon	Matrix Colors (Munsell Moist)	Mottle Colors (Munsell Moist)	Mottle Abundance/Contrast	Texture, Concretions, Structure, etc.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**Hydric Soil Indicators:**

- |  |   |
|--|---|
| <input type="checkbox"/> Histosol                    | <input type="checkbox"/> Concretions  |
| <input type="checkbox"/> Histic Epipedon             | <input type="checkbox"/> High Organic Content in Surface Layer in Sandy Soils |
| <input type="checkbox"/> Sulfidic Odor               | <input type="checkbox"/> Organic Streaking in Sandy Soils                     |
| <input type="checkbox"/> Aquic Moisture Regime       | <input type="checkbox"/> Listed On Local Hydric Soils List                    |
| <input type="checkbox"/> Reducing Conditions         | <input type="checkbox"/> Listed on National Hydric Soils List                 |
| <input type="checkbox"/> Gleyed or Low-Chroma Colors | <input type="checkbox"/> Other (Explain in Remarks)                           |

Remarks:

**WETLAND DETERMINATION**

Hydrophytic Vegetation Present?	Yes ___ No ___	Is the Sampling Point	
Wetland Hydrology Present?	Yes ___ No ___	Within a Wetland?	Yes ___ No ___
Hydric Soils Present?	Yes ___ No ___		

Remarks: