

WETLAND DETERMINATION DATA FORM - Alaska Region

Project/Site: Susitna-Watana Hydroelectric Project Borough/City: Matanuska-Susitna Borough Sampling Date: 28-Aug-15
 Applicant/Owner: Alaska Energy Authority Sampling Point: SW15_T332_08
 Investigator(s): SLI, SCB Landform (hillside, terrace, hummocks etc.): Channel (active)
 Local relief (concave, convex, none): concave Slope: 3.5 % / 2.0 ° Elevation: _____
 Subregion: Interior Alaska Mountains Lat.: _____ Long.: _____ Datum: WGS84
 Soil Map Unit Name: _____ **NWI classification: R3UBH**

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 <input checked="" type="radio"/> No <input type="radio"/> Hydric Soil Present? Yes <input checked="" type="radio"/> No <input type="radio"/> Wetland Hydrology Present? Yes <input checked="" type="radio"/> No <input type="radio"/>	Is the Sampled Area within a Wetland? Yes <input checked="" type="radio"/> No <input type="radio"/>
Remarks: Brushkana Creek. channel approx 50ft wide, total depth 3ft, water depth 2 ft. bottom cobbles to boulders. adjacent floodplain well vegetated with willows, sediment deposits present.	

VEGETATION -Use scientific names of plants. List all species in the plot.

	Absolute % Cover	Dominant Species?	Indicator Status	
Tree Stratum				Dominance Test worksheet:
1. _____	_____	<input type="checkbox"/>	_____	Number of Dominant Species That are OBL, FACW, or FAC: <u>0</u> (A)
2. _____	_____	<input type="checkbox"/>	_____	Total Number of Dominant Species Across All Strata: <u>0</u> (B)
3. _____	_____	<input type="checkbox"/>	_____	Percent of dominant Species That Are OBL, FACW, or FAC: <u>0.0%</u> (A/B)
4. _____	_____	<input type="checkbox"/>	_____	
5. _____	_____	<input type="checkbox"/>	_____	
Total Cover:	<u>0</u>			Prevalence Index worksheet:
Sapling/Shrub Stratum	50% of Total Cover: <u>0</u>	20% of Total Cover: <u>0</u>		Total % Cover of: Multiply by:
1. _____	_____	<input type="checkbox"/>	_____	OBL Species <u>0</u> x 1 = <u>0</u>
2. _____	_____	<input type="checkbox"/>	_____	FACW Species <u>0</u> x 2 = <u>0</u>
3. _____	_____	<input type="checkbox"/>	_____	FAC Species <u>0</u> x 3 = <u>0</u>
4. _____	_____	<input type="checkbox"/>	_____	FACU Species <u>0</u> x 4 = <u>0</u>
5. _____	_____	<input type="checkbox"/>	_____	UPL Species <u>0</u> x 5 = <u>0</u>
6. _____	_____	<input type="checkbox"/>	_____	Column Totals: <u>0</u> (A) <u>0</u> (B)
7. _____	_____	<input type="checkbox"/>	_____	Prevalence Index = B/A = <u>0.000</u>
8. _____	_____	<input type="checkbox"/>	_____	
9. _____	_____	<input type="checkbox"/>	_____	Hydrophytic Vegetation Indicators:
10. _____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/> Dominance Test is > 50%
Total Cover:	<u>0</u>			<input type="checkbox"/> Prevalence Index is ≤ 3.0
50% of Total Cover: <u>0</u>	20% of Total Cover: <u>0</u>			<input type="checkbox"/> Morphological Adaptations (Provide supporting data in Remarks or on a separate sheet)
Herb Stratum				<input checked="" type="checkbox"/> Problematic Hydrophytic Vegetation (Explain)
1. _____	<u>0</u>	<input type="checkbox"/>	_____	¹ Indicators of hydric soil and wetland hydrology must be present, unless disturbed or problematic.
2. _____	<u>0</u>	<input type="checkbox"/>	_____	
3. _____	<u>0</u>	<input type="checkbox"/>	_____	
4. _____	<u>0</u>	<input type="checkbox"/>	_____	
5. _____	<u>0</u>	<input type="checkbox"/>	_____	Plot size (radius, or length x width) <u>2x4m</u>
6. _____	<u>0</u>	<input type="checkbox"/>	_____	% Cover of Wetland Bryophytes (Where applicable) _____
7. _____	<u>0</u>	<input type="checkbox"/>	_____	% Bare Ground _____
8. _____	<u>0</u>	<input type="checkbox"/>	_____	Total Cover of Bryophytes _____
9. _____	<u>0</u>	<input type="checkbox"/>	_____	
10. _____	<u>0</u>	<input type="checkbox"/>	_____	
Total Cover:	<u>0</u>			Hydrophytic Vegetation Present? Yes <input checked="" type="radio"/> No <input type="radio"/>
50% of Total Cover: <u>0</u>	20% of Total Cover: <u>0</u>			

Remarks: active channel, no vegetation

