Oregon Department of State Lands Offsite Wetlands and Waters Determination Request WD#:

The Department of State Lands (DSL) conducts *offsite* wetland determinations upon request. There is no fee for the service. An offsite determination consists of reviewing wetlands and soils maps, aerial photos and other information to determine if wetlands or other regulated water bodies (such as creeks) are present, likely to be present, or unlikely to be present. Only an *onsite* check can verify whether there are regulated wetlands on a site.

If wetlands are present or likely to be present on a parcel or near a project area, a wetland delineation by a qualified wetland consultant may be needed. Wetland delineation reports and the required fee should then be submitted to DSL for review and agency approval.

Please include the following information:

- 1. Site location map (i.e. city map) with the precise parcel location indicated.
- 2. Project description and site plan. A brief narrative, site photographs, and site plan (showing property boundaries, existing buildings, creeks and other features). An annotated tax assessor's map is fine and can be hand drawn if legible.

	map is fine and can be hand drawn i	f legible.
3.	Site location information. <u>Street address</u> (or nearest cross street	ets):
	City (or nearest community if outside	le city limits):
	County:	
4.	Township, Range, Section, Quarter/	Quarter Section, and Tax Lot Number(s)
	T: R: S: Q/0	Q:TL(s):
Pro	operty Owner 🔲 Legal Represent	ative Other (specify):
Name:		
Firm/A	Agency:	
	g Address:	
1,10,1111	<u></u>	
Phone:	:	E-Mail:
Mail co	ompleted request form, project description	n, photos and site plan to:
Oregon	Department of State Lands, 775 Summer	r Street NE, Suite 100, Salem, OR 97301-1279;
_	ail to: support.services@dsl.oregon	
		WRD, OPRD, Local Planning Department, etc.):
Name/	Agency:	E-mail:
	or those with legal authority to allow access from the property and conduct a onsite determination. (DSI	e owner may request a DSL onsite visit. Signing this form authorizes DSL staff to L will make contact prior to conducting a site visit.)
Printed N	Name/Date:	Signature:
Additiona	al Comments:	