Site ID: _____
(leave blank)

Regional Tidal Marsh Inventory
Data Sheet

Please fill out this form as completely as possible. Your responses will help populate a searchable database, located at http://gulfofmaine.fws.gov, of potential and existing tidal marsh restoration projects in the Gulf of Maine watershed. Lines for additional note are optional, but will help clarify your responses, especially when "other" is chosen. If your project can be broken down into phases, please submit one form per phase. Thank you for your participation.

PROJECT NAME (subjective; fill in one letter/punctuation per box including blank boxes for space; e.g. Conomo Point-Phase1)

CITY OR TOWN (Manchester-By-The-Sea)

STATE OR PROVINCE (circle one)	**AREA IMPROVED**: _____ m^2 (practicable area of enhancement/restoration not just the area worked on e.g. a dam removal area would be large, but the area restored could be small)
MA ME NH NB NS	

WATERBODY (closest waterbody identified from a 1:24,000, 7.5 minute quadrangle map produced by the U.S. Geological Survey or a 1:50,000 map produced by Energy, Mines, and Resources, Canada; e.g. Saratoga Creek)

COORDINATES (of a point near the center of the restoration site; e.g. 40 18' 30", 70 34' 45")

LATITUDE ____degrees ____minutes ____seconds
LONGITUDE ____degrees ____minutes ____seconds

OWNER(S) check all that apply (list owner and owner acronym/ abbreviation, if known)

- ☐ **private**_____
- ☐ **non-profit organization**_____
- ☐ **public**_____

ESTIMATED COST (circle one) **<$10k** **$10k-100k** **>$100k**

IS THE PROJECT FUNDED? (circle one) **YES** **NO** **PARTIALLY**

 J. Fujikawa, 4R Fundy Road, Gulf of Maine Program, Falmouth, Maine, 01405, (207)781-8364, jean_fujikawa@fws.gov

HISTORIC CONDITION (pre-impact National Wetlands Inventory Classification (U.S.) or Canadian Wetlands Atlas Classification (Can.) or specific species (scientific); e.g. E2EM/S.patens)

note:_____

NATURE OF ALTERATION (check all that apply)

☐ **tidal restriction** ☐ **bulkhead** ☐ **stormwater** ☐ **ditching** ☐ **fill** ☐ **salthay**

☐ **other-**

note:_____

IMPACTS (consequence of alteration, check all that apply)

☐ **drained marsh** ☐ **impounded** ☐ **flooded** ☐ **invasive vegetation**

☐ **other-**

note:_____

RESTORATION ACTION (check all that apply)

☐ **stormwater treatment** ☐ **culvert enlargement** ☐ **ditch plugging** ☐ **fill removal**

☐ **other-**

note:_____

STATUS (check ALL that have been completed AND CIRCLE the current status) **CURRENT DATE**:____/____/____

☐ none ☐ pre-monitoring ☐ permitted ☐ implementation ☐ post-monitoring

note:_____

FURTHER INFORMATION (up to 2 contacts)

Name:_____
Organization:_____
Address:_____
City:_____
State/Province:_____
Zip Code:_____
Phone:_____
E-mail:_____

Name:_____
Organization:_____
Address:_____
City:_____
State/Province:_____
Zip Code:_____
Phone:_____
E-mail:_____

RETURN TO: *(Regional Coordinator for your area)*