

Name of Wetland Professional/Firm: _____

Project Owner Name: _____

Project Name: _____

Proposed Site Information

Project Address: _____

Parcel Number(s): _____

Total Number of Acres: _____

I have read and understand the wetland requirements of the South Carolina State Housing Finance and Development Authority's (SC Housing) HTF Supportive Housing program. My signature below certifies that I have followed SC Housing's requirements in the preparation of this Identification of Wetlands submitted as part of the application for the above identified project.

I have followed the below requirements of the HTF Supportive Housing Application Manual:

1. I have made my determination in accordance with the 1989 Federal Manual for Identifying and Delineating Wetlands.
2. The wetland professional will be **required** to submit an NWI Map, their credentials, conduct a site visit, and Submit supporting documentation. The supporting documentation includes either an Army Corps. of Engineer determination, a Wetland Determination Data Form for the corresponding region the site is located in, or a field report. The field report topics must include: methodology, description of the findings from the site visit, sources used if any, and the scientifically defensible determination by the wetland professional as to whether or not they believe the site contains jurisdictional or non-jurisdictional wetlands.
 The parcel(s) for the proposed project site identified above DO NOT contain any jurisdictional or non-jurisdictional wetlands.
 The parcel(s) for the proposed project site identified above DOES contain jurisdictional and/or non-jurisdictional wetlands. The wetlands identified on the parcel(s) of the proposed project site are _____ acres in size, rendering the buildable percentage at _____%.

Wetland Professional's Certification: I certify that I have the appropriate credentials to make this scientifically defensible determination and that neither I nor the company I work for have any financial interest in the proposed HTF application other than in the practice of our profession.

Printed Name of Wetlands Professional

Date

Signature of Wetlands Professionals

Printed Name of Owner Applicant

Date

Signature of Owner Applicant