

ORDER FORM
COPY OF AN AREA OF A LWI

Mail to: Oregon Department of State Lands
Wetlands Program – Support Staff
775 Summer St NE, Ste 100
Salem, OR 97301-1279
Office: 503-986-5200
Fax: 503-378-4844

Local Wetland Inventory Name (city/area): _____

Township, Range, Section, Tax Lot(s) of inquiry: _____

Do you want a copy of the on-site data sheet(s)
and wetland summary sheet (if applicable)? _____

Required attachments in order for the request to be processed are:

- Vicinity map with street names
- Tax map with Township, Range, Section, tax lot(s), and street names.

Please complete shipping and contact information below (please print or type).

Name _____

Organization _____

Mailing address _____

City _____ State _____ ZIP _____

Phone no. _____ Fax no. _____