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The Rhode Island Wild Plant Society, Inc. (RIWPS) is a nonprofit conservation organization dedicated to the preservation and protection of Rhode Island's native plants and their habitats. The RIWPS Inventory Committee serves to assist the State of Rhode Island, towns, nonprofit organizations, and individuals with inventories of the wild plants on their properties or prospective properties. We are pleased to work with you to help preserve and protect our native flora.

RIWPS INVENTORY AGREEMENT

Organization requesting inventory _____
Contact person _____
Address _____
Phone(s) _____ E-mail _____
Name of property to be surveyed _____
Location _____
Name & address of landowner _____

THE RIWPS INVENTORY COMMITTEE WILL:

- conduct site surveys throughout the growing season covering as much of the specified area as possible (within reason) for the purpose of identifying wild trees, shrubs, and herbaceous plants (but not mosses, algae, fungi, or lichens).
- provide a written list of all plant species found including scientific name, common name, family, native or introduced, and Natural Heritage status of any rare plants. These lists will be provided after each visit.
 - *RIWPS will conduct an inventory only with written permission of the landowner and/or the landowner's signature at the bottom of this form.*
 - *Our intent is to conduct a complete survey, however RIWPS cannot guarantee that we will locate every plant species on the property.*
 - *RIWPS reserves the right to share information from the plant inventory with the RI Natural Heritage Program and the RI Natural History Survey, particularly any information regarding the location of rare or endangered plants.*

IN RETURN FOR THESE SERVICE THE INVENTORY REQUESTOR WILL:

- provide RIWPS with a map of the site clearly indicating the boundaries of the property to be surveyed.
- allow RIWPS Inventory teams access to the property at mutually convenient times.
- pay a fee of \$100 per visit payable within two weeks after receipt of each inventory report, which will be presented after each visit.

Inventory Project Coordinator _____

Phone _____ E-mail address _____

RIWPS Representative

Inventory Requestor

Property Owner

Signature

Date

Signature

Date

Signature

Date