

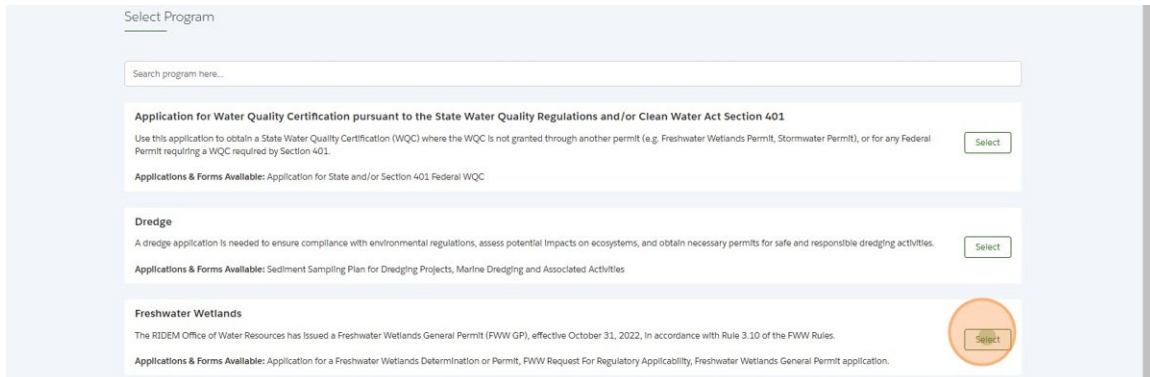


User Guide: Freshwater Wetlands -Determination or Permit Req to Verify Wetland Edges

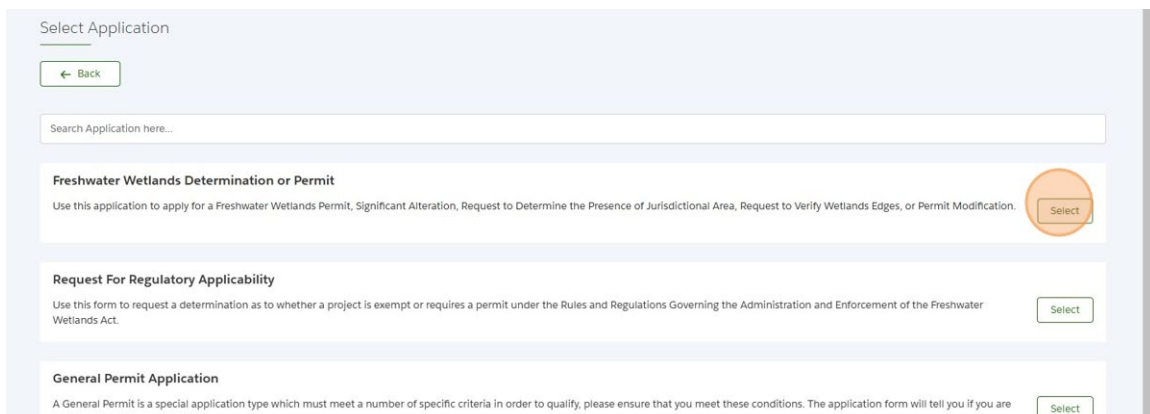
1. Navigate to <https://demri.my.site.com/owr>
2. Click Applications ->Start an Application



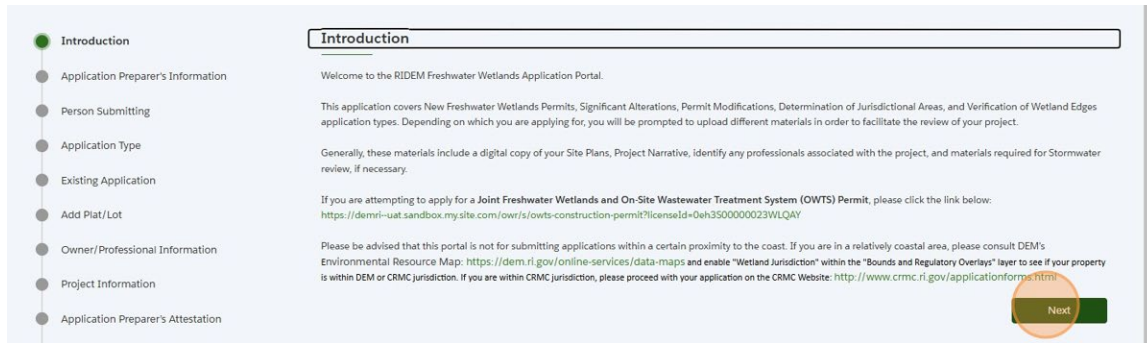
3. Click "Select" next to the program you wish to apply for



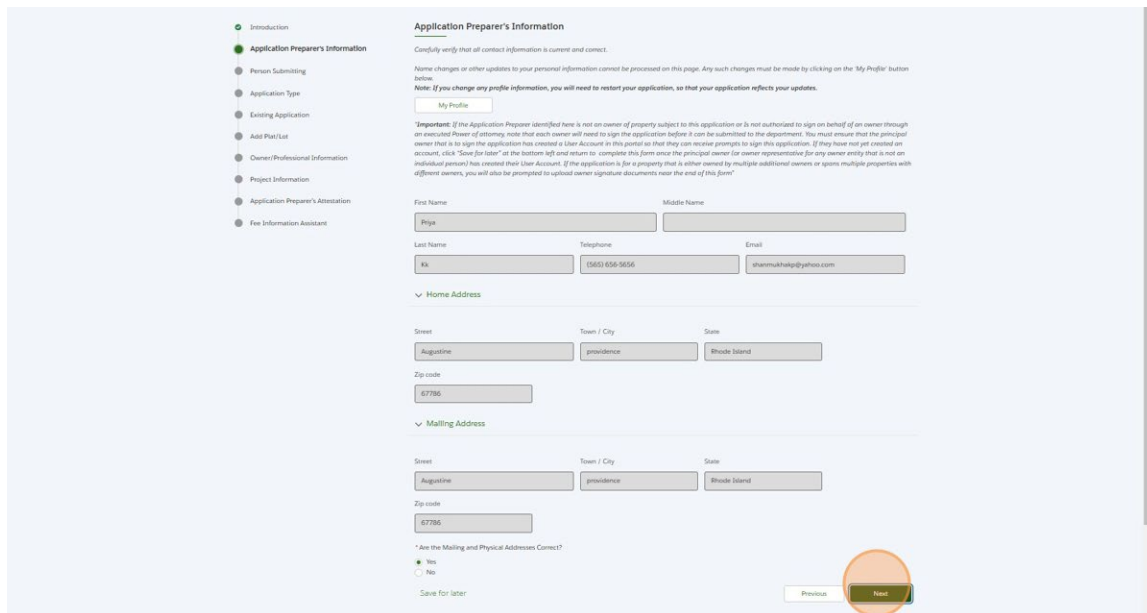
4. Click "Select" next to the application you wish to apply for



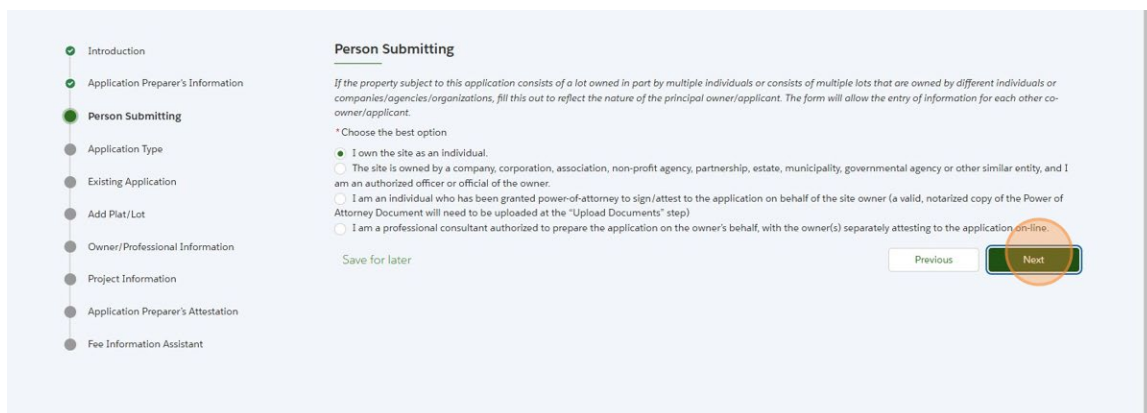
5. First is the Introduction Screen. Upon reading all the information, click Next to proceed.



6. Next is the Applicant Information Screen. Carefully review all the information. If you need to make changes, scroll to the top and click on 'My Profile' to make the edits. Restart the application for the new changes to apply.



7. Next is the Person Submitting Screen



8. Next is the Application Type Screen

9. Next is the Existing Application Screen.

If answer = Yes, you will be asked to look up an existing application number & the Site Information will be auto populated with the site you looked up

If answer = No, you will be able to proceed to the next screen & will be required to manually enter the site information

10. Next is the Site Information Screen.

11. Next is the Add Plot/Lot screen. Click on Add New

12. Enter Plat, Lot and Block Numbers and Click on Save.

Freshwater Wetlands: Freshwater Wetlands Determination or Permit

Block Details

*Town/City Name
Providence

*Plat Number
234

*Lot Number
12

Block Number
1.00

Cancel Save

13. Click "Next"

DEM RHODE ISLAND

Success
Record saved successfully

Home Applications My Permits My Licenses Requests My Details Application Request Pre-Application Meetings More

Freshwater Wetlands: Freshwater Wetlands Determination or Permit

Add Plat/Lot

Use the "Add New" Button to add required information for each lot and parcel that is subject to this application.

Town/City	Plat Number	Lot Number	Block Number	Action
Providence	234	12	1	

Previous Page 1 of 1 Next

Save for later Previous Next

14. Next is the Owner/Professional Information Screen

Owner/Professional Information

Use the "Add New" Button to add contact information for any additional representative (if applicable) of the primary owner, and/or the professional/consultant who can serve as a primary contact for questions on the application.

Primary Owner/Professional Details

Site Relation	Name	Email Address	Phone Number	Action
Owner	Priya KK	shanmukhkp@yahoo.com	(565) 656-5656	

Check this box if there are any additional owners of any parcel subject to this application who will need to be designated as co-applicants, or if there are any additional professionals/consultants who assisted in preparation of this application.

Save for later Previous Next

15. Next is the Project Information Screen

Project Information

Project Name:

Project Type: Project Size: Unit:

* Within which river buffer zone region is the site located?
 Urban Region Region 1 Region 2

Is the project located within a Drinking Water Supply Reservoir Watershed (DWSRW)?
 Yes No

Is the project located within a Natural Heritage Area?
 Yes No

Have rare wetland types or rare species been documented?
 Yes No

Save for later Previous **Next**

16. Next is the Upload Documents Screen. Click the upload icon to add applicable files

Upload Documents

Document Name	Document Description	Uploaded Files (Multiple file upload)
* Site Plan	Plans drawn to a scale no smaller than one Inch (1") equals one-hundred feet (100') (1" = 100'), with title block, original date of the plan, inset locus map, legend describing all markings or symbols, magnetic north arrow, entire property boundaries depicted, sufficient fixed referenced points, and accurate scale. For more information, see [Rule 3.8.4 & 3.8.5] (hyperlink: https://rules.sos.rl.gov/regulations/part/250-150-15-3)	
* Wetland Delineation Forms	At a minimum, one set of data forms (upland and wetland) must be completed for each wetland on the site. Find and download or fill out the forms here	
Local Master Plan Approval	Local Master Plan approval; or (2) local conditional approval of a combined Master and Preliminary Plan; or (3) A letter from an authorized municipal official (the Administrative Officer) certifying compliance with local low impact development site planning and design requirements as contained within the local zoning ordinance, land development and subdivision Regulations or other pertinent Regulations.	
Site Work Affidavit	Site work affidavit required for upload.	
Supporting Document(s)	Any supporting documents that could assist in review of the application.	

Save for later Previous **Next**

17. Click "Upload Files"

Upload Files

Please attach a copy of the required document.

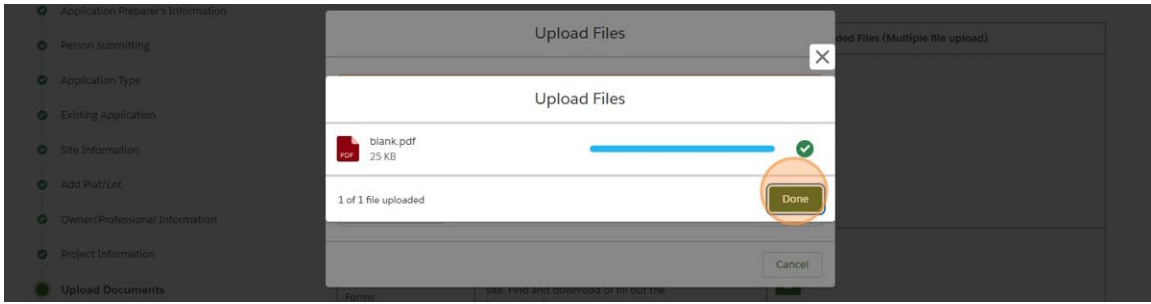
Note:

- File size should not exceed 2 GB.
- File extensions will be accepted only of type doc, docx, pdf, png, tiff, jpg, jpeg, txt, csv.
- Documents may be uploaded as individual files or as a single merged file on the next page.

Upload Files Or drop files

Cancel

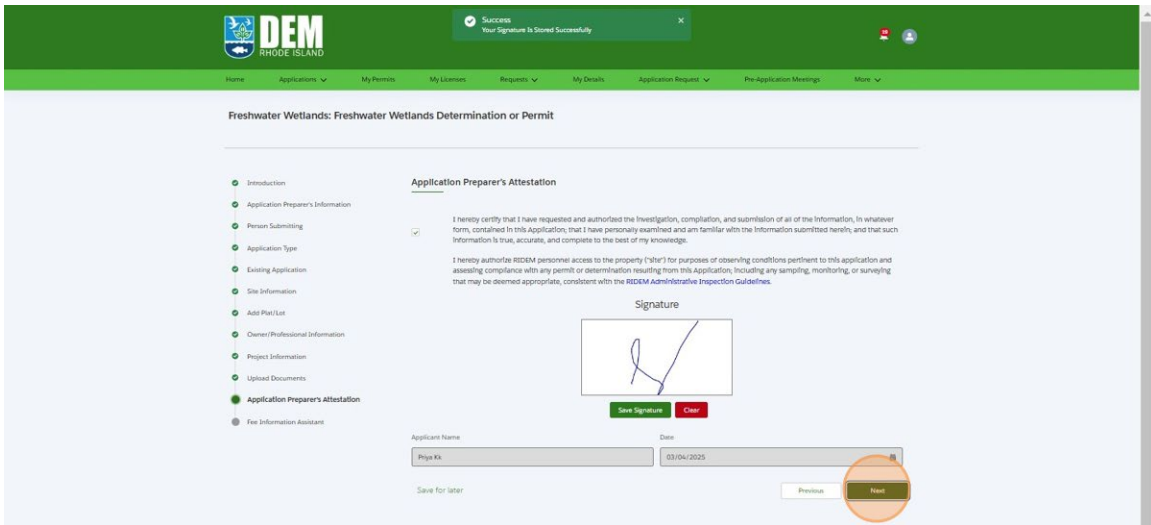
18. Click "Done"



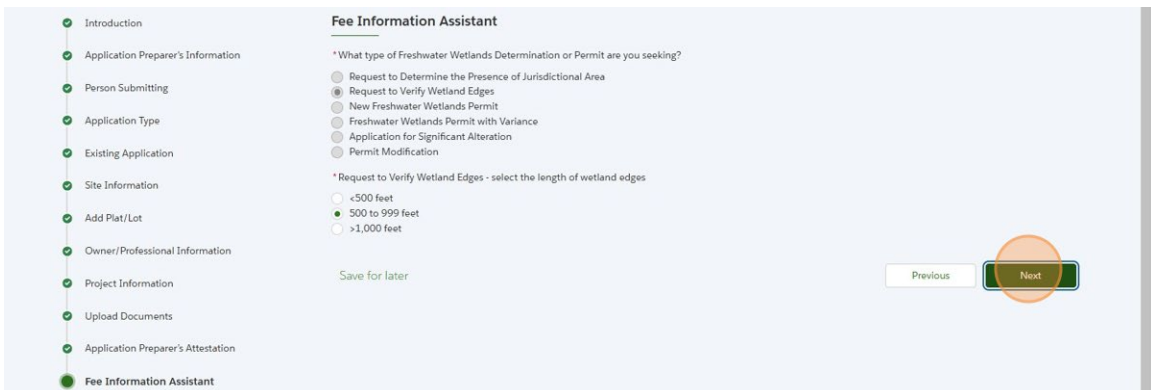
19. Click "Next"



20. Next is the Application Attestation Screen. Check the box to attest, sign in the signature box and click save signature. Click Next to proceed.



21. Next is the Fee Information Assistant Screen



22. Next is the Payment Screen. Select a Payment Mode and click Pay & Submit.

Introduction
Application Preparer's Information
Person Submitting
Application Type
Existing Application
Site Information
Add Plat/Lot

Payment

* Payment Mode
Credit Card

The amount to be paid is **\$600**
Please click the Pay & Submit button to proceed with the payment.

Save for later

Previous **Pay & Submit**

23. You will then be routed to the secure payment page's Customer Information Section.

State of Rhode Island
Payment Processing

Home > Customer Info > Payment Information > Submit Payment

Payment

Payment Type
Credit/Debit Card

Customer Information

Country *
United States

First Name *
Last Name *

Address *
Address 2 *

City *
Providence

State *
Rhode Island

ZIP/Postal Code *
02906

Phone Number
5085555555

Email *
sharmukharp@yahoo.com

Payment Information

Verification

Cancel

Transaction Summary

DEM Licensing & Permits Online \$500.00
RI Interactive Price \$600.00

Need Help?
Please complete the Customer Information Section.

Next >

24. Next is the Payment Information Screen

State of Rhode Island
Payment Processing

Home > Customer Info > Payment Information > Submit Payment

Payment

Payment Type
Credit/Debit Card

Customer Information

Address
Priya G.
Providence, RI 02906

Phone Number
5085555555

Country
United States

Email Address
sharmukharp@yahoo.com

Payment Information

Credit Card Number *
4111111111111111

Credit Card Type
VISA

Expiration Month *
03 - March

Expiration Year *
2020

Security Code *
432

Name on Credit Card *
sajja

Payment Address is the same as Customer Information *

Verification

Cancel

Transaction Summary

DEM Licensing & Permits Online \$500.00
RI Interactive Price \$600.00

Need Help?
Please complete your payment below.

Next >

25. Lastly is the Verification Section. Click the checkbox and click Submit Payment

State of Rhode Island
Payment Processing

Payment Type: Credit/Debit Card

Customer Information:

Address: Priya Kk, Augustime, providence, RI 07786
Phone Number: 6555555556
Country: United States
Email Address: shanmukhalp@yahoo.com

Payment Information:

Credit Card: Visa ****1111, Exp. 03/2028
Name on Credit Card: sarya

Verification:

I'm not a robot

Submit Payment

Transaction Summary:

DEM Licensing & Permits Online	\$600.00
RI Interactive Price	\$630.00

Need Help?
Review payment information. You may edit Billing and Payment Method here if needed. When complete, select Make Payment.

26. Upon successful payment, print this screen for your records and click

Payment Receipt Confirmation

Your payment was successfully processed. Please print this receipt page for your records.

Print

Transaction Summary

Description	Amount
DEM Licensing & Permits Online	\$600.00
RI Interactive Price	\$630.00

Customer Information:

Customer Name: Priya Kk
Local Reference ID: a1Lop000002358HEA
Receipt Date: 3/4/2025
Receipt Time: 01:45:29 PM EST

Payment Information:

Payment Type: Credit Card
Credit Card Type: VISA
Credit Card Number: ****1111
Order ID: 73622026
Name on Credit Card: sarya

Account Holder Information:

Billing Address: Augustime, providence, RI, 07786, US
Phone Number: 6555555556
Email Address: shanmukhalp@yahoo.com

Continue

27. You can then click 'Back to Home' to return to the OWR Portal Home Page.

Thank you! Your application has been submitted successfully.

You may check the status of your application by logging into your Portal at any time. Department staff will contact you if additional information or documentation is needed to complete the review of your application. Once your application is approved, you will receive an email notifying you of the update. If you paid by Credit card or E-Check then you will receive a receipt.

You can track the status of new request from "My Application -> Ongoing New Applications " tab and renewal request from "My Application -> Ongoing Renewal Applications " tab .

Back to Home

###