DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

Duthie

OWNER: Mobile Home Direct APPLICANT: Greg + Kathleen [redacted]
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 7/31/02
PROPOSED FACILITY: 4BR/mod/Cmcl PROPOSED DESIGN FLOW (.1949): 480 PROPERTY SIZE: 3.169
LOCATION OF SITE: _____ PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed
Patriot Point Lot #8

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTAR
1	Linear	0-12	scr w sbk	fr ss sp SE/P					PS .30
		12-29	cl sbk	fi SE/P					
		29-44	cl w/sig sbk	fr/fi s SE/P					
2	Linear	0-16	scl wsbk	fr ss sp SE/P					PS .35
		16-[illegible]	scl w sbk	fr/fi SE/P					
3	Linear	0-15	scl wsbk	fr SE/P					PS .30
		15-25	c sbk	fi SE/P					
		25-[illegible]	cl sc sbk	fr/fi SE/P					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Bill Johnson
OTHER(S) PRESENT: _____