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

Sheet ____ *of* ____
PROPERTY ID #: ____
COUNTY: ____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Dean Richon
ADDRESS: ____
PROPOSED FACILITY: 3bR Home PROPOSED DESIGN FLOW (.1949): 360 g/d.
LOCATION OF SITE: Falls Creek Rd. - Lot #39 Shawn Ln.
APPLICATION DATE ____
DATE EVALUATED: 25 Apr 08
PROPERTY SIZE: 0.5 ac.
PROPERTY RECORDED: ____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other ____
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 1670	0-8	CL/L	vfr/ss/p?	>48	>48	-	-	PS 0.3
		8-48+	~~SC~~ SSk/C	fr/ss/p?					
2	C 1870	0-11	CL/C	vfr/ss/p	>48	>48	-	-	PS 0.3
		11-48+	SSk/C	fr/ss/p					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	III 25%	III 50%
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): PS
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: TEH
OTHER(S) PRESENT: ____

COMMENTS: ____