SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ___ of ___

DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: _____
DATE OF EVALUATION: _____
COUNTY: _____

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	PROFILE CLASS & LTAR
P1	LSS 5-10%	0-8	BSCL GR	fri SSSPSexP	-	48	-	-	.3
		8-24	RC MFSBK	fri SSSPSexP					
		24-48	RCL WSBK	fri SSSPSexP					
		38-59	sl sap/	cl mix pm					
P2		0-6	BSCL GR	fri SSSPSexP	-	54	-	-	.3
		6-28	RC MFSBK	fri SSSPSexP					
		28-54	RCL WSBK	fri SSSPSexP					
P3		0-21	RC MFSBK	fri SSSPSexP	-	54	PS	-	.3
		21-54	RCL WSBK	fri SSSPSexP - SAP Pca					
		54-65	SCL/SAPM	fri SSSPSexP					
B1		0-4	BSCL GR	fri SSSPSexP	-	48	-	-	.3
		4-24	RC MFSBK	fri SSSPSexP					
		24-48	RCL WSBK	fri SSSPSexP					

COMMENTS: _____