DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

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

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: CRI APPLICATION DATE _____
ADDRESS: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): 4 bdrm DATE EVALUATED: 12-18-02
LOCATION OF SITE: Lot 1119 Ph II The Pt. PROPERTY SIZE: _____
WATER SUPPLY: ☐ Private ☒ Public ☒ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-6	gr fri sd	fri SSP					
		6-48	mf sbk Rel	fri SSP	limited sap	40-48in			-3
2		0-12	gr fri sd	fri SSP					
		12-32	m-f sbk RC	fri SP					
		32-51	wk f sbk red	fri SSP	common rock/SAP				-3
3		0-7	gr fri SL	fri SSP					
		7-34	m sbk RC	fri SP					
		34-50	m sbk gr red	fri SSP	few common rock SAP				-3
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)	C-E 25% Red	pr 14 25-50% Red.
Site LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: DHS
OTHER(S) PRESENT: Paul Rammussen

COMMENTS: _____