DEPARTMENT OF ENVIRONMENT,
HEALTH, & NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SHEET ____ OF ____
PROPERTY I.D.#: ____
PROPERTY RECORDED: ____
COUNTY: ____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

APPLICANT: Pete Scappaticci OWNER: ✓ AGENT: ___ PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 12/17/99
PROPOSED FACILITY: 480 GPD. House
PROPERTY SIZE: .66 AC
LOCATION OF SITE: YACHTRD TR YACHT HARBOR TL KEEL CT. 2ND ON R
WATER SUPPLY: On-Site Well ✓ Comm. Well ___ Public ___ Other ____ EVAL. METHOD: Auger Boring ___ Pit ___ Cut ___

PROFILE #	.1940 LANDSCP POS. (%)	HORIZON DEPTH (IN.)	.1941 STRUCTURE/TEXTURE	.1941 MINERALOGY/ CONSISTENCE	.1942 WETNESS COND.	.1944 RESTRICT HORIZONS	.1948 CLASS OF HORIZ	1943/ 1956 SAPRLT CLASS.	HORIZON LTAR
1	L ~CC 4%	0-11	sbk / cl	1:1 / SS SP	S				
		12-30	wk / hcl	1:1 / S SP	S				
		31-39	GR / cl SAP	1:1 / SS SP					
		40-48	GR / cl SAP VFR	1:1 / SS NP	PS				.3
2	L ~CC 2-3%	0-9	sbk / cl	1:1 / SS SP					
		10-36	wk / hcl FR	1:1 / S SP					.3
		37-48	GR / cl SAP VFR	1:1 / SS NP					
3									
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: ____
EVALUATED BY: ____ OTHER(S) PRESENT: ____
COMMENTS: ____