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

OWNER: CRC
ADDRESS: _____ APPLICANT: _____
PROPOSED FACILITY: _____ APPLICATION DATE: _____ DATE EVALUATED: 5/13/96
LOCATION OF SITE: 29A Hardscrabble PROPOSED DESIGN FLOW (.1949): _____ 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 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	V 0%	0-48	80% c/cl Common quartz rock & fine sap	[illegible]					B .3
2	V 0%	0-7 7-32 32-[illegible]	gr, blocky fr mod RC [illegible]	[illegible]					B .3
3		0-6 6-30 30-36 36-[illegible]	gr, blocky fr sab RC wk rock wk sab blocky fr	[illegible]					
4									

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

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