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: CRT OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 4/6/95
PROPOSED FACILITY: 4BR SFD
PROPERTY SIZE: 1+
LOCATION OF SITE: Lot 45 The Hudson
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		0-5"	gr - SL						.3
		5-20"	SBK - C						
		20-42	SBK - CL						
		42-57	WSBK - CL						
2									
3									
4									
5									

AVAILABLE SPACE (.1945)_____ SITE CLASSIFICATION (.1948):_____ SITE LONG-TERM ACCEPTANCE RATE:_____

EVALUATED BY:_____ OTHER(S) PRESENT:_____

COMMENTS:_____