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: Lee Tasker
APPLICANT: ___
ADDRESS: ___
APPLICATION DATE: ___
DATE EVALUATED: /—
PROPOSED FACILITY: SFR
PROPOSED DESIGN FLOW (.1949): 360
PROPERTY SIZE: ___
LOCATION OF SITE: Lot 3, Hawks Nest
PROPERTY RECORDED: ___
WATER SUPPLY: ☑ Private ☐ Public ☐ Well ☐ Spring ☐ Other ___
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

now Lot 2

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON 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	LSS 15-20%	0-4	wksab loamy	1:1 fr					~.53
		4-17	sab RC	1:1 fi,sp.					
		17-48	mwksab RCL	1:1 fr					
2	LSS 10-15%	0-5	wksab loamy	1:1 fr					~.53
		5-26	sab RC	1:1 fi,sp.					
		26-48	m-wksab RCL	1:1 fr ss,sp					
3	LSS 15-20%	0-3	wksab loamy	fr		1PP soil depth			
		3-16	sab RC	fi,s,p					
		16-25	wksab RCL	fr					
		25-48	wksab RCL-wr mix						
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: ___