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: CRI APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 10-22-98
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Lot 7 Pinnacle PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
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		0-4	Gr brs scl			2 @			
		4-25	SBK RC	fsp					
		25-32	massive cl sp	ff ss sp					
		32-61	massive sl sap	fr ss sp					
				Gr sap	39"+				
2		0-4	sl						
		4-20	[illegible] vfr c	fsp					
		20-36	massive Rf scl sap	friable ff-fr ss sp					
		36-65	massive sl sap	fr ss sp	SLt				
				Gr sap 36"+					
3		0-3	scl						2
		3-22	massive R cl	fsp					R25-3
		22-39	Gr 25% Rf scl	ff-fr ss sp	Common mid sap				
		39-60	massive Rf sl sap	fr ss sp					
4		0-35	SBK mcl						R5
		35-75	sl sap						-25-03

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

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