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: CRI OWNER: AGENT: PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 6-16-95
PROPOSED FACILITY: 4 BR SFR
PROPERTY SIZE: ____
LOCATION OF SITE: Lot 4 Pinnacle Shores
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	LSS 4-6%	0-5	Sg. SL	1:1 VFR					.35
		5-23	SSAb SC	1:1 fi					
		23-40	MSAb - SL	1:1 - fr					
		40-48	UnkSAb - SL/Sap rock						
2									
3									
4									
5									

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

EVALUATED BY: ____ OTHER(S) PRESENT: ____

COMMENTS: Washed/eroded area 35' Rt. left side of house x 10' wide — pipe across it w/ future repairs