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: 6-23-95
PROPOSED FACILITY:_____
PROPERTY SIZE:_____
LOCATION OF SITE: Lot 40 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		0-9	gr. sl	vfr					.35
		9-18	vf gr sub sCL	fr					
		18-47	msbk cL	Mfi					
2		0-19	vf-m sub cL	fr, SS, SP					.3
		19-36	m-c sL	vfr, SS, SP					
		36-46	light cL w/sand	SS, SP					
3									
4									
5									

AVAILABLE SPACE (.1945)_____ SITE CLASSIFICATION (.1948):_____ SITE LONG-TERM ACCEPTANCE RATE:_____
EVALUATED BY:_____ OTHER(S) PRESENT:_____
COMMENTS: Woods off both sides of home w/ some stream on side & above home ID possibility for IAS w/ fill.