DEPARTMENT OF ENVIRONMENT,
HEALTH, & NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

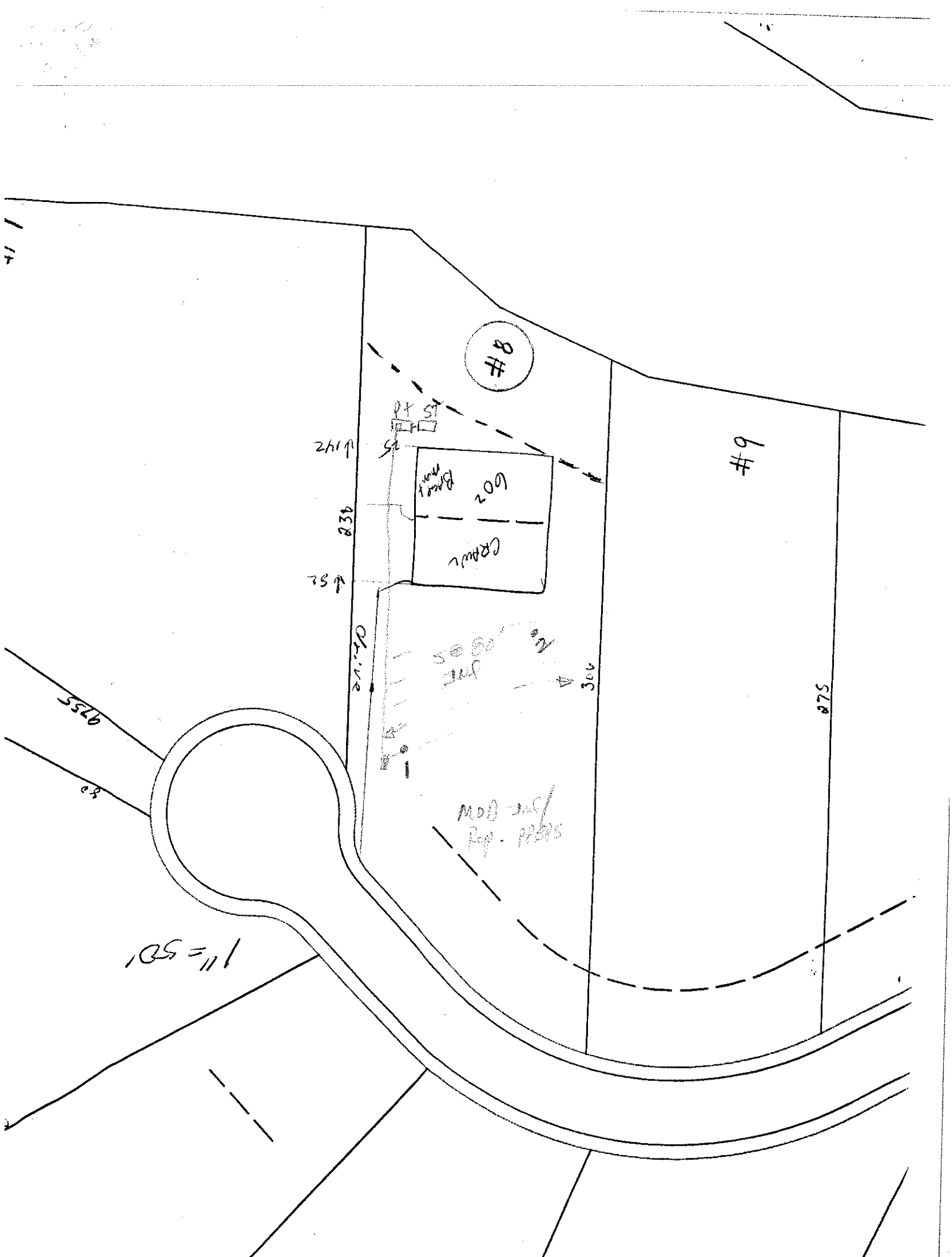
SHEET ____ OF ____
PROPERTY I.D.#: ____
PROPERTY RECORDED: ____
COUNTY: ____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

APPLICANT: CRT OWNER: AGENT: PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 8/25/95
PROPOSED FACILITY: ____
PROPERTY SIZE: ____
LOCATION OF SITE: lot 2, Pinnacle II
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 2-15%	0-4	gr. lmsa sl	fr					.3
		4-19	wk sbk sc	fi, ss, p					
		19-47	m-wk sbk scl	fi, ss, p					
2	LSS 2-15%	0-11	g-wk sbk fscl	fr, ss, p					.3
		11-28	m-fsbk scl	fi, ss, p					
		28-43	m fsbk scl	fr, ss, p					
3									
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: ____
EVALUATED BY: ____ OTHER(S) PRESENT: ____
COMMENTS: ____


#8
#9
Garage
836
826
875
306
105 = 11'