DEPARTMENT OF ENVIRONMENT 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: Cusson
ADDRESS: _____ APPLICATION DATE _____
PROPOSED FACILITY: House PROPOSED DESIGN FLOW (.1949): 480 DATE EVALUATED: _____
LOCATION OF SITE: _____ PROPERTY SIZE: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L	0-7	LS WSBK	-S 6 SAP		48			.6
		7-38	SL WSBK	SS 6 SAP					
		38-48	LS WSBK	SS 6 SAP					
2	L	0-7	SCL WSBK	SSS SAP		48			.34
		7-48	CL MSBK	SSS SAP					
3	6%	0-5	SCL WSBK	SSS SAP		48			.34
		5-48	CL MSBK	SSS SAP					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	225	
System Type(s)	200 gpm well	
Site LTAR	.3	

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): P
EVALUATED BY: Lee Cook
OTHER(S) PRESENT: Lonty Jacobs

COMMENTS: _____