DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH, ENVIRONMENTAL HEALTH SECTION
ON-SITE WATER PROTECTION BRANCH

Sheet ____ of ____
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
***for* ON-SITE WASTEWATER SYSTEM**
(Complete all fields in full)

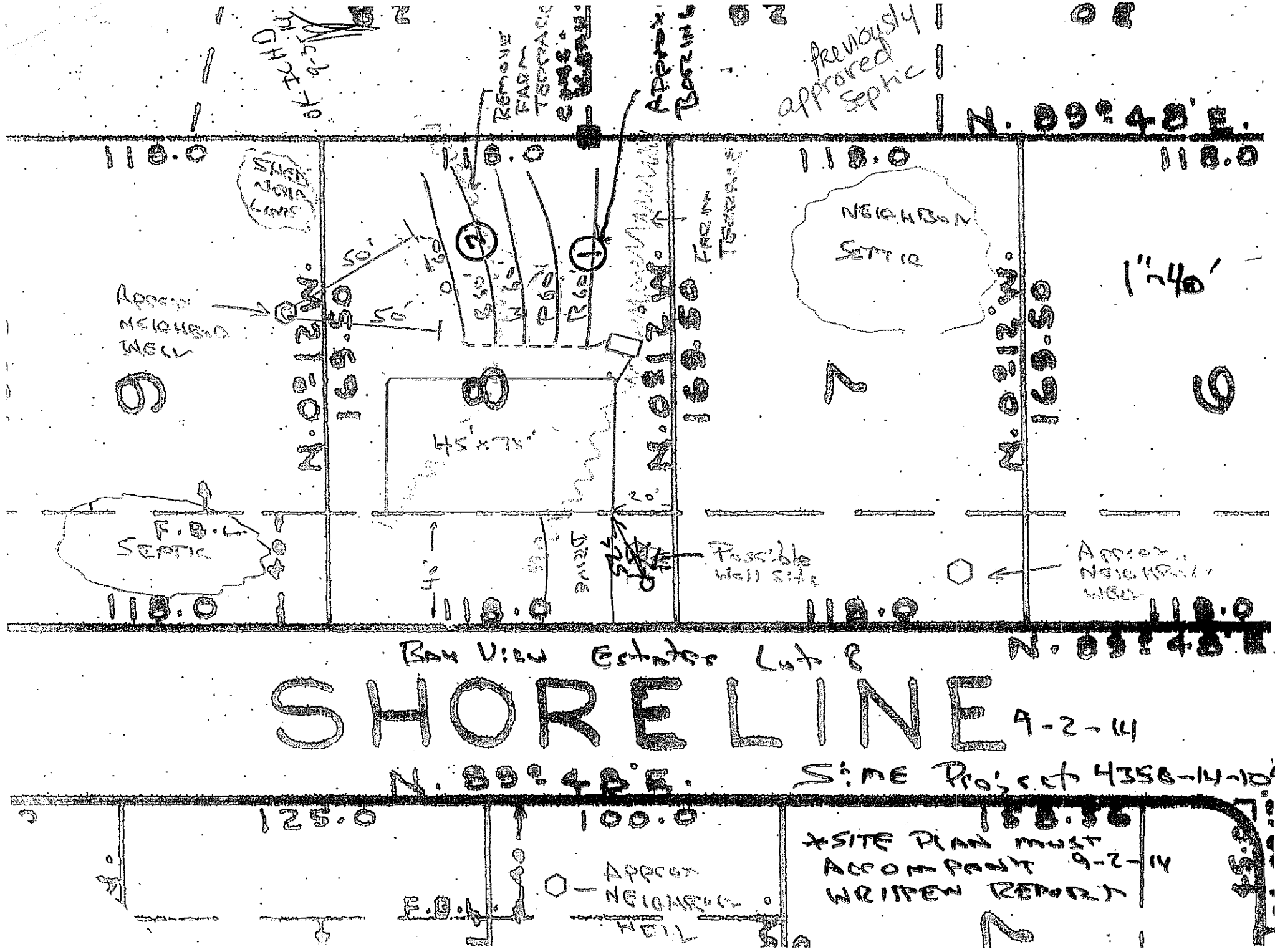
APP.
OWNER: Kromrich LLC — APPLICATION DATE 9/3/14
ADDRESS: 142 Shoreline Dr — DATE EVALUATED: 8/29/14
PROPOSED FACILITY: 3 bk — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: _____
LOCATION OF SITE: Lot 9 Bay View East. — PROPERTY RECORDED: 17.5
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ 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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L/ TERRACE ~10%	0-8	WSBK/GR	FR SS/SP	L-				PS .2
		8-49	MSBK/C	FR SS/SP	mott				
						(48)	-	-	
2	Toe Slope ~10%	0-42	WSBK/GR	FR SS/SP	red br - mix		A/E	on Terrace	PS .3
		42-60	WSBK/C	FR SS/SP	red				
		60-90	MSBK/GR	FR SS/SP	red C	mica	Hydric		
						(90)	-	-	
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	Expan PS
System Type(s)	2 ft Trench	Elevated Trench
Site LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: P&O - must be OK ICHD 9-3-14
OTHER(S) PRESENT: Approved by ICHD

COMMENTS: _____


previously approved Septic
N. 89° 48' E.
118.0
NEIGHBOR SEPTIC
1"=40'
Approx NEIGHBOR WELL
50'
45'x75'
F.B.L.
SEPTIC
Possible Well Site
Approx NEIGHBOR WELL
Bay View Estates Lot 8
SHORELINE
9-2-14
N. 89° 48' E.
Site Project #358-14-109
125.0
100.0
Approx NEIGHBOR WELL
F.B.L.
*SITE PLAN must accompany 9-2-14 WRITTEN REPORT