DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Lakeview Shores D-1 PROPERTY RECORDED: _____
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		0-9	sc wsbk	Fr ss sp sap					PS LTP 0.075
		9-16	c sbk/abk	Fi sp sap					
		16-30	c ms sbk common f/d	Fi sp sap					
		30-48	cl sap						
2		0-14	sc wsbk	Fr ss sp sap					PS LTP 0.075
		14-29	c sbk/abk	Fi sp sap					
		29-48	Cl sap						
3		0-13	sc wsbk	Fr ss sp sap					PS 0.15-0.1
		13-38	c sbk/abk	Fi sp sap					
		38-48	cl sap						
4		0-12	sc wsbk	Fr ss sp					PS 0.15-0.1
		12-36	c sbk/abk	Fi sp					
		36-49	CL sap						

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____

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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
5		0-6	SL SLK	fr SP					
43		6-32	c Ak	fr VS p	Mottled				LS
		32-48	cl S p						
2		0-10	SL SLK	fr S p					
23		10-36	C AK	fr VS p	Mottled 20" chroma 2				LS
		36-48	CL SCL						
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
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EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____