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: RI Homes OWNER:__AGENT:__ PHONE:____
ADDRESS:____ APPLICATION DATE:____ DATE EVALUATED: 10/20/94
PROPOSED FACILITY: 400 gpd 4 bedroom SF dwelling
PROPERTY SIZE:____
LOCATION OF SITE: Lot 29, North Shore 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	LS	0-14	gr - sl	1:1 / fi(d)	—	PS	PS		.6
		14-22	SAB - scl	1:1 / ff-vfi			PS		.4
		22-45+	wk SAB - sc/sd	1:1 / fi-vfi			PS		.3
2									
3									
4									
5									

AVAILABLE SPACE (.1945) PS SITE CLASSIFICATION (.1948) PS SITE LONG-TERM ACCEPTANCE RATE: .3
EVALUATED BY: DC Hinnant OTHER(S) PRESENT: Jim Warren
COMMENTS: System will require fuse & pump