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: Dena Kay Hinson OWNER: X AGENT: ___ PHONE: 664-6282
ADDRESS: 1348 Bi Sch Rd. APPLICATION DATE: ___ DATE EVALUATED: 10/31/95
PROPOSED FACILITY: 3BD - 2BA 24'x64' DW MH
PROPERTY SIZE: .51 Ac
LOCATION OF SITE: Pam Meadows Ln.
WATER SUPPLY: On-Site Well X Comm. Well ___ Public ___ Other ___ EVAL. METHOD: Auger Boring X 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	L 4%	0 - 4	GR / cl	1:1 / FR SS SP	S	S	S		.35
		5 - 26	SBK / M cl	1:1 / FR SS SP	PS	S	PS		.3
		27 - 46	M SBK / cl	1:1 / FR SS SP	PS	S	PS		.3
		41 - 49	SBK-GR / H cl	1:1 / VFR SS SP					.3
2									
3									
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: ____

EVALUATED BY: ____ OTHER(S) PRESENT: ____

COMMENTS: ____