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: 11-8-85
PROPOSED FACILITY: 4 bed gpd — Ground Sp.
PROPERTY SIZE: ____
LOCATION OF SITE: Lot 8 11 St
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 nbp	0-3	gr-mbk s-bkn sl	fr					.3
		3-24	m-s sbk ss	fr ss, ps					
		24-48	m-mbk RR	mfr ss, ps					
2	LS nbp	0-8	gr-bkn sl	fr					.3
		8-30	sbk ss	fr ss, ps					
		30-48	mbk-mas	fr ss, ps					
3									
4									
5									

AVAILABLE SPACE (.1945): ____ SITE CLASSIFICATION (.1948): Sp. 1956 SITE LONG-TERM ACCEPTANCE RATE: .3
EVALUATED BY: ____ OTHER(S) PRESENT: ____
COMMENTS: Space sufficient for infiltration and future repair