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:_____OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____APPLICATION DATE:_____DATE EVALUATED:_____
_____PROPOSED FACILITY:_____
_____PROPERTY SIZE:_____
LOCATION OF SITE: NORTHSHORE LOT 61
WATER SUPPLY: On-Site Well____Comm. Well__Public___Other_____EVAL.

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		0-10	SC GR	FRI SSSP					
		10-36	SC MASS	FI SSP					
		36-48	CL MSBK	FRI SSSP					
2		0-7	S GR	FRI SSSP					
		7-30	Compacted C	FI - Road Bed					
		30-40	CL Slightly	Compacted MF SSP					
		40-48	CL MSBK	FRI SSSP					
3									
4									
5									

AVAILABLE SPACE (.1945)_____SITE CLASSIFICATION (.1948):_____SITE LONG-TERM ACCEPTANCE RATE:_____

EVALUATED BY:_____OTHER(S) PRESENT:_____

COMMENTS:_____