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: Donna Moffett OWNER:__ AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 12/2/94
PROPOSED FACILITY: 3 bedroom SF dwelling
PROPERTY SIZE:_____
LOCATION OF SITE: Lot 98 Rising Woods Trail
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 ~450' to lake		0-3	gr - scL			u			
		3-12	vfr sbk c eqp mottles						
		12-48+	structureless vfr sbk cL sapprock						
2 ~700' to lake		0-24"	EXP Hay mmmm cchz mottles			u			
3		0-2"	cL						.3
		2-29	sbk c	vfi					
		29-47+	wk sbk - cL						
4		0-5	gr - cL						
		5-12	wk sbk scL		28" cchz eqp dkgymd				
		12-28	vfwk sbk scL w/ sap incl						
5		0-2"	cL						
		2-15	sbk c						
		15-30	wk sbk - cL structureless silty/sal						
		Stopped @ 30" due to wet							

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

EVALUATED BY:_____ OTHER(S) PRESENT:_____

COMMENTS:_____

DEPARTMENT OF ENVIRONMENT,
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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: 1/23/13
PROPOSED FACILITY: _____
PROPERTY SIZE: _____
LOCATION OF SITE: +/- 1/7 Scott Creek
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		0-8	Sandy L						1.3
		8-35	Sandy C						
		35-47	Sandy L						
2									
3									
4									
5									

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

EVALUATED BY: _____ OTHER(S) PRESENT: _____

COMMENTS: _____

DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: John Moffett — APPLICANT: _____
ADDRESS: _____ — APPLICATION DATE: _____ — DATE EVALUATED: 5-21-96
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): _____ — PROPERTY SIZE: _____
LOCATION OF SITE: Kings Neck TR - Sewer easement area — 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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR. HORIZ.	PROFILE CLASS & LTAR
1	L ~2%	0-9	g-sdy loam s2 fr						.3
		9-20	sdy clay CL fr ss,sp 1:1						
		20-38	sdy clay RC	fi sp 1:1					
		38-47	sdy clay RCL	fr ss,sp 1:1					
2									
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____