ISION OF ENVIRONMENTAL HEALTH
SITE WASTEWATER SECTION

PROPERTY ID #: ____
COUNTY: ____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: ____ APPLICANT: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 5-12-06
PROPOSED FACILITY: ____ PROPOSED DESIGN FLOW (.1949): ____ PROPERTY SIZE: ____
LOCATION OF SITE: Lot 17 Devonshire PROPERTY RECORDED: ____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other ____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

		SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				
.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON DEPTH (IN.)	.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR. HORIZ.	PROFILE CLASS & LTAR
(1)	0-4	brwsl fr						
	4-34	SaLg sbkwk fi fr SSSP						.3
	34-55	wk sbk/fgr R4yR L few comm mn		Stp	fr SSSP			
(2)	0-37	SaLo wk sbk hard/x	fr SSSP					
	37-52	wk sbk L	fr SSSP	few mn stp				.3
(3)	0-5	LS SCL	FrVfr	SSSP				PS .25
	5-58	SDK	BRC/Hyd FrL SD	- few Mang coats				
(4)	0-19	RCL	WSBK FrFi	SSSP				PS .3
	19-60	YRL	WSBK FrFi	SSSP	common	STP		

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		

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