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: Jon Griggsmon OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____APPLICATION DATE:_____DATE EVALUATED: 1-12-95
_____PROPOSED FACILITY:_____
_____PROPERTY SIZE:_____
LOCATION OF SITE: Lot 15 Wk Woods 2
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		0-2	sa-scl						.4
		2-26	sbk cl						
		26-48	wk sbk fscl						
2		0-4	gr sl						.3
		4-15	sbk c						
		15-26	wk sbk cl						
		26-45	wk sbk cl						
3									
4									
5									

AVAILABLE SPACE (.1945)_____SITE CLASSIFICATION (.1948):_____SITE LONG-TERM ACCEPTANCE RATE:_____
EVALUATED BY:_____OTHER(S) PRESENT:_____
COMMENTS: 1 of Soil with cmtz