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 Chapman OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 1-17-95
_____ PROPOSED FACILITY: 3 bedroom SFR as of 2/17/95
_____ PROPERTY SIZE:_____
LOCATION OF SITE: Lot 16, Wh. Woods
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		0-6	gr. SCL						≈ 3
		6-27	SBK C						
		27-42	SBK CL						
2		0-8	gr SCL						≈ 3
		8-32	SBK / CL						
		32-46	wSBK / CL						
3									
4									
5									

AVAILABLE SPACE (.1945)_____ SITE CLASSIFICATION (.1948):_____ SITE LONG-TERM ACCEPTANCE RATE: ≈ 3
EVALUATED BY: DWR OTHER(S) PRESENT: T Jacoby
COMMENTS:_____