DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Jenny Tucker — APPLICANT: _____
ADDRESS: _____ — APPLICATION DATE: _____ — DATE EVALUATED: _____
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 4 Bdrm — PROPERTY SIZE: 115'x214'
LOCATION OF SITE: Lot 16, Herbarium Sect III — 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) STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 2-4%	0-5	gr brn sl/scl	fr					= 34
		5-30	SAB rc	+/- sp 1:1					
		30-54	mod SAB RCL	fr SS sp 1:1					
			mod sc gravelly fol bgn 20"+						
2	L 2-4%	0-7	gr brn SL	fr					= 34
		7-12	SAB D-black	fr 1:1					
		12-30	SAB RC	fr 1:1					
		30-54	mod SAB RCL	fr 1:1					
			few gravelly sandstone						
3	L 2-4%	0-5	gr brn SL	fr					= 34
		5-10	SAB RCL	fr					
		10-28	SAB RC	fr 1:1					
		28-54	mod SAB RCL	fr 1:1					
			few gravelly sandstone						
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: _____