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

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

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: CRI APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 9-8-21
PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 3 bdrm 0 PROPERTY SIZE: _____
LOCATION OF SITE: Lot 108 Wilson Ln 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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR. HORIZ.	PROFILE CLASS & LTAR
1	FS-15	0-7	brn cL						
		7-34	gr. scL	vfr fr					
		34-45	mott - brn cL	vfr fr					
		45-48	Sch	RCL	vfr fr				
2	LSS ~4%	0-9	gr. SL	fr					
		9-31	brn cL	vfr fr					
		31-41	wksb cL	vfr fr					
		41-48	wksb cL/sandstone	fr					
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: _____