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: Knox OWNER: AGENT: PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 4/11/95
PROPOSED FACILITY: 3bdrm
PROPERTY SIZE: ____
LOCATION OF SITE: Lot 34
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		0-3	gr- sL	vfi fr					.4
		3-42	sbk - c	fi fi					.3
		42-48	wk sbk - cl	fi mfi					
2		0-3	gr- sL	fri					.4
		3-29	sbk/c	fi					.3
		29-44	wk sbk - cl	mfi vfi					
3		0-5	sbk- L						.4
		5-38	sbk- c (red)						.3
		38-47	wk sbk - c						
			Fe concretions throughout						
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: ____

EVALUATED BY: ____ OTHER(S) PRESENT: ____

COMMENTS: ____