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: Mike Knox OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 3/10/95
PROPOSED FACILITY:_____
PROPERTY SIZE:_____
LOCATION OF SITE: Lot 20 Hicks Farm West
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"	wksbk-L						.3
		6-19	ssbk-c						
		19-48	wksbk-cL						
2		0-7"	gr/wksbk L						.4 / .3
		7-36	ssbk-c						
		36-48	wksbk-cL						
3		0-8	sbk-L						.4 / .3
		8-33	ssbk-C						
		33-48	wksbk-cL						
4									
5									

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

EVALUATED BY:_____ OTHER(S) PRESENT:_____

COMMENTS:_____