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: Mike Knox — APPLICANT: ___ — 9-22-96
ADDRESS: ___ — APPLICATION DATE: ___ — DATE EVALUATED: ___
PROPOSED FACILITY: SFR — PROPOSED DESIGN FLOW (.1949): 360 — PROPERTY SIZE: ___
LOCATION OF SITE: Lot 49 — 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	LSS 15-20%	0-8	mSaSbk RCL	fr	NA	NA	NA	NA	
		8-48	SaSbk RC	FI SP				.5	
2		0-8	WSBK RCL	FI SS,SP					
		8-36	SBK RC	FI SP				.3	
		36-45	WSBK Red Mottled CL	FI,FR SS,SP					
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: ___