DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Crescent Resources APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 9/2/09
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Beacon Pt II Lot #8 PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .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		0-12"	Rd/Brn m SBK CS	SS, SP, FI, FR					PS .3
		12-48"	Rd/Brn m SBK CS	SS, SP, FI					
			w/Few SAP Inc						
2		0-29"	Rd/Yel C/G m SBK FI S, P	w/Few Com Prom Sesq Yel/Brn Mottles					PS .25
		29-54"	Yel/Rd C w/Few Yel/Brn Mottles						
			SS, SP						
3		0-20	Brn SL, FR GR						PS .3
		20-44	Rd/Brn C m SBK	SS, SP, FI, FR w/Few SAP Inc S					
		44-48	L SAP						
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____