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: Heart Prepatos Elmo APPLICANT: ___
ADDRESS: ___ APPLICATION DATE: ___ DATE EVALUATED: 2-16-05
PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 4BR gpd PROPERTY SIZE: ___
LOCATION OF SITE: lot 59 Bay Crossing 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	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	LE/D S	0-6							
		6-29							.3
		29-43							
		43-62							
2		0-6							
		6-29							.3
		29-48							
		48-53							
3	SP/S	0-6							
		6-24							.25-.3
		24-54							
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Gravity 25% Red	Same
Site LTAR	.3	.25-.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: [illegible] RS
OTHER(S) PRESENT: Kathleen J TCS