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: Joe Nawrocki OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 4/5/97
PROPOSED FACILITY: 4BD - 4.5BA
PROPERTY SIZE: ~.8 Ac

LOCATION OF SITE:_____
WATER SUPPLY: On-Site Well____Comm. Well__X__Public____Other_____ EVAL. METHOD: Augered ✓

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	~CV L 670 Top	0-7	wk / cl	1:1 FI SPS				<CH2	
		8-15	wkSbk / c	1:1 FI PS				RELIC	
		16-25	sbk / cl	1:1 FI PS				↕	
		26-51	sbk / cl	1:1 FR SP S					.3
		32-47	GR / cl SAP	1:1 VFR SP SS					
2	~CV L Bottom	0-8	wk / hcl	1:1 FI PS				Relic <CH2	
		9-15	Sbk / c	FI PS					
		16-24	GR / cl	FR NS SS					.25
		25-46	GR / l SAP	1:1 VFR NP NS					
3									
4									
5									

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

EVALUATED BY:_____ OTHER(S) PRESENT:_____

COMMENTS:_____