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: RM Hazelwood
ADDRESS: ____ OWNER: __ AGENT: __ PHONE: ____
APPLICATION DATE: ____ DATE EVALUATED: 5/23/94
PROPOSED FACILITY: 3 bedroom SF dwelling
PROPERTY SIZE: ____
LOCATION OF SITE: Lot 17 Queens Cove
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	LS 4&8%	0-17	SAB / CL	1:1 / fr			PS		.5
		17-48	SAB / C	1:1 / fi-vfi					.3
2	LS 2&4%	0-16	SAB / CL	1:1 / fr-fi			PS		.5
		16-46	SAB / C	1:1 / fi-vfi					.3
3									
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: .3
EVALUATED BY: ____ OTHER(S) PRESENT: ____
COMMENTS: ____