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: Bob Eblin OWNER:__AGENT:__ PHONE:_____
ADDRESS:_____ APPLICATION DATE:_____ DATE EVALUATED: 10/2/95
PROPOSED FACILITY:_____
PROPERTY SIZE:_____
LOCATION OF SITE: lot 15, St Andrews Village
WATER SUPPLY: On-Site Well____Comm. Well___Public___Other_____ EVAL. METHOD: Auger Boring 6 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 6-8%	0-9	msscl heavy ecol	fr, s, p					= 3
		9-30	mssicl c/g c	fi, s, p					
		30-48	m-wksbk c/g cl	fr, ss, sp					
2	LS 6-8%	0-2	loamy cl						= 5
		2-26	mssicl RC	fi, s, p					
		26-48	m-wksbk c/g cl	fr, ss, sp					
3									
4									
5									

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