DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Eagle T Enterprise
ADDRESS: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____
LOCATION OF SITE: Knox Haven #5
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut

APPLICATION DATE _____
DATE EVALUATED: 6/16/07
PROPERTY SIZE: _____
PROPERTY RECORDED: _____
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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	P,T	0-5	Rd/Brn SCL w/	SBK	SS,SP,SE				PS .3
		5-30	Rd C	m-w ABK-SBK	SS,SP,SE,		FI-FR		
		30-48	Rd C/CL	w/SBK	SS,SP,SE,		FR	w	
			Some	Mica					
2	AH	0-5	Rd/Brn SCL	w/SBK	SS,SP,SE				PS .3
		5-48	Rd C/CL	m-w SBK	SS,SP,SE,		FR		
				w/ Some	Mica				
3									
4									

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

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: _____
OTHER(S) PRESENT: _____

COMMENTS: _____