DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Iredell County Rec APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 3/21/20
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Ropes Course 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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-8"	Brn SCL	wSBK SS, SP, SE		FR	FI-FR		PS .3
		8"-48"	Red/Brn C/SCL	m-wSBK SS-SS, SP, SE					
			w/ some	Yel/Brn mottles					
2		0-18"	Brn Brn SCL	wSBK SS, SP, SE		FR	FI-FR		PS .25 to .3
		18-36"	Red/Brn C/SCL	m-wSBK SS-SS, SP, SE					
		36-48"	Red/Brn	C/SCL wSBK SS, SP, SE		FR w/ few			
				too many SAP		Tools			
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: _____