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: Tamara Sweeney OWNER: __ AGENT: __ PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 5/3/95
PROPOSED FACILITY: 2 bedroom HH
PROPERTY SIZE: ____
LOCATION OF SITE: Trafford Hill a 1/2 mi on left
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		0-36	wSbk-cL						.35
		36-48	Sbk-c						
2		0-8	gr-scL						.3
		8-36	Sbk-C						
		36-48	wk sbk-cL						
3									
4									
5									

AVAILABLE SPACE (.1945): 45 SITE CLASSIFICATION (.1948): 45 SITE LONG-TERM ACCEPTANCE RATE: .3
EVALUATED BY: [signature] OTHER(S) PRESENT: ____
COMMENTS: ____