DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

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

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Robert Little
ADDRESS: _____ APPLICANT: _____
PROPOSED FACILITY: _____ APPLICATION DATE: _____ DATE EVALUATED: 6/16/19
LOCATION OF SITE: Flower House Loop PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
WATER SUPPLY: ☒ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
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	LL 2-6%	0-26"	CL Rf MH SBK SS SPR FI Fr						.3 40 26" PS
		Some	SAP inclusions						
		26-36"	CL SAP & Weath Rock, Fr						
2	LL 2-6%	0-14"	RL-R thin/fr MH SBK SS SPR Fr						.3 PS
		14-45"	RL-R CL Rf SBK SS SPR Fr						
		45-48"	RL-R CL & CL SAP mix						
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: _____