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

SITE/SOIL EVALUATION for ON-SITE WASTEWATER SYSTEMS

Sheet ____ of ____
PROPERTY ID # ____

OWNER: Eddie Nantz APPLICANT: Same
ADDRESS: 528 Shepherd Rd Trout APPLICATION DATE: 10/8/14 DATE EVALUATED: 10/31/14
PROPOSED FACILITY: 2BR+ workshop PROPOSED DESIGN FLOW (.1949): ____ PROPERTY SIZE: ____
LOCATION OF SITE: ____ PROPERTY RECORDED: ____
WATER SUPPLY: ☑ Private ☐ Public ☑ Well ☐ Spring ☐ Other ____
EVALUATION METHOD: ☑ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed
drainfield relocation to build a workshop/garage

PROFILE	1940 LANDSCP POS. / SLOPE %	HORIZON DEPTH (IN)	SOIL MORPHOLOGY .1941 (a)(1) TEXTURE	(a)(2) STRUCTURE	(a)(3) MINERALOGY CONSISTENCE	SOIL MATRIX COLOR	SOIL MOTTLE COLOR	OTHER PROFILE FACTORS	
1		0-12	C	SB	Fi SE			.1942 WETNESS CONDITION	
		12-48	C+SAP	WBK	Fi SE			.1941 SOIL STRUCTURE	
								.1945 SOIL DEPTH/ .1956 SAP ROUTE	
								.1944 RESTRICTIVE HORIZON	
								.1947 PROFILE CLASSIF.	
								PROFILE LTAR	.25
2		0-12	C	SB	Fi SE			1942 WETNESS CONDITION	
		12-26	C+SAP	WBK	Fi SE			.1941 SOIL STRUCTURE	
		26+	SAP (CL)	M	Fr avid			1945 SOIL DEPTH/ 1956 SAP ROUTE	
								1944 RESTRICTIVE HORIZON	
								PROFILE CLASSIF.	
								PROFILE LTAR	.25
3		0-18	C	SB	Fi SE			1942 WETNESS CONDITION	
		18-25	C+SAP	AB	Fr SE			.1941 SOIL STRUCTURE	
		25+	SAP (CL)	M	Fr avid SE			1945 SOIL DEPTH/ 1956 SAP ROUTE	
								1944 RESTRICTIVE HORIZON	
								PROFILE CLASSIF.	
								PROFILE LTAR	.25
4								1942 WETNESS CONDITION	
								.1941 SOIL STRUCTURE	
								1945 SOIL DEPTH/ 1956 SAP ROUTE	
								1944 RESTRICTIVE HORIZON	
								PROFILE CLASSIF.	
								PROFILE LTAR	

COMMENTS ____

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	5	5
System Type(s)	PIM deposit 25% reduct	serial deep 25% reduct
Site LTAR	.25	.25

OTHER FACTORS (.1946): ____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: Jarvis
OTHER(S) PRESENT: Eddie Nantz

IREDELL COUNTY HEALTH DEPARTMENT

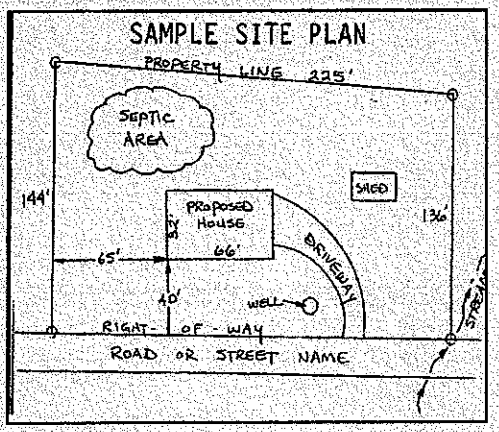
ENVIRONMENTAL HEALTH DIVISION

PAGE 2: ***SITE PLAN WORKSHEET***

SEE THE "SAMPLE SITE PLAN" BELOW. ***INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!***

Place an (X) beside each item as you complete the site plan:

- (✓) **Property Line measurements are clearly identified**
- (✓) **All proposed structures are indicated**
- (✓) **Front and side setbacks from property line**
- ( ) **Preferred driveway location and well location**
- ( ) **Area you prefer your septic system to be placed**
- (✓) **North arrow, or other sufficient indicator of direction**

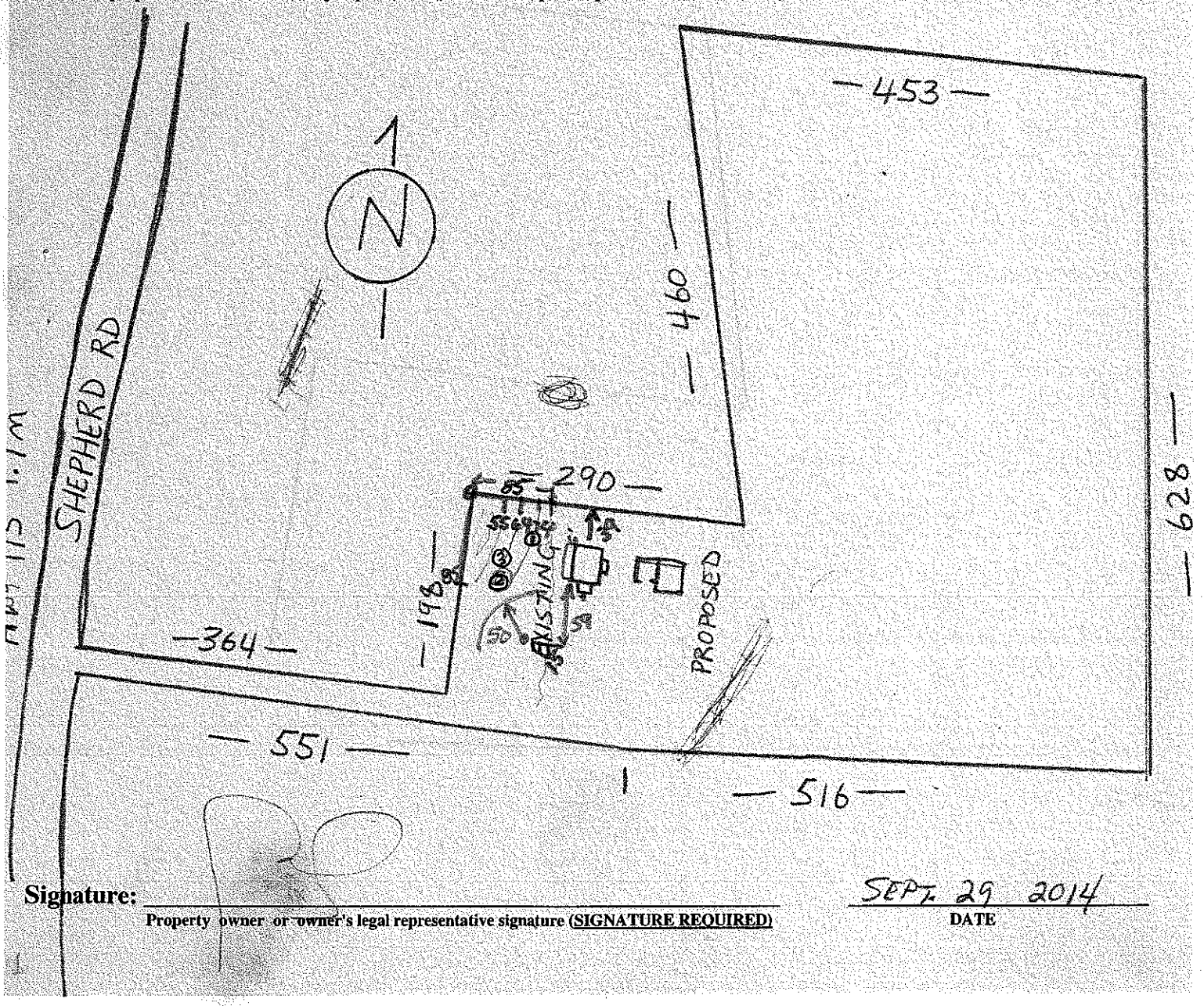


Circle N/A on the following if appropriate:

Location of septic systems and wells within 100' of your property (N/A)
Location of easements and rights of ways on your property (N/A)
Location of any designated wetlands on the property (N/A)

USE THIS SPACE TO DRAW YOUR SITE PLAN

Show: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site

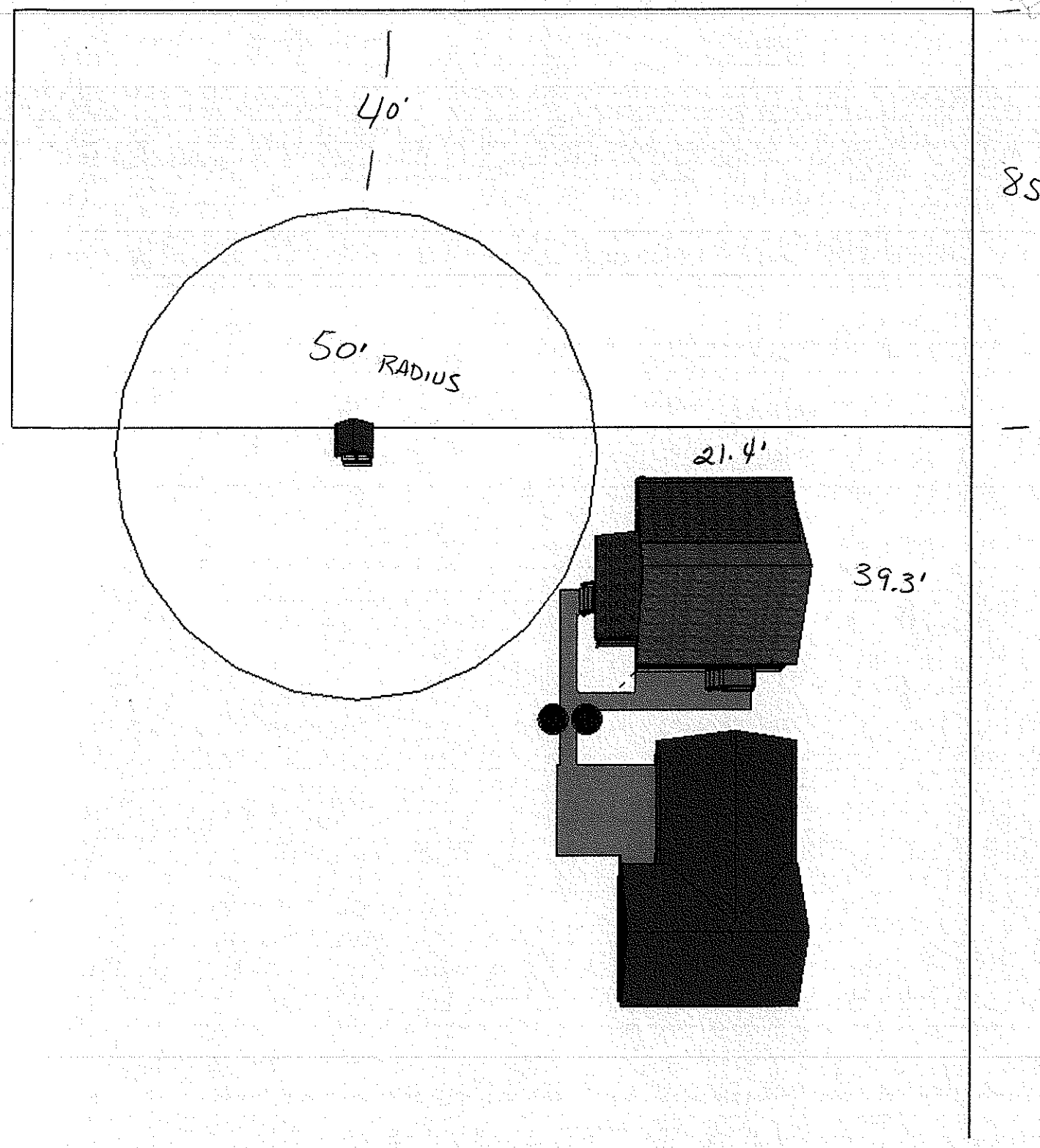


Signature: _____

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

SEPT. 29 2014

DATE


40'
85'
50' RADIUS
21.4'
39.3'