SOIL/SITE EVALUATION

(Continuation Sheet)

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DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

PROPERTY ID #: ____________
DATE OF EVALUATION: ____________
COUNTY: ____________

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
P9	Linear	0-12	BCL FWABK	FRI SS SP SEXP	N/A	38"	U	38"	PS
	12%	12-38	RC SAP.INC A/SBK	FRI SS P SEXP MANG.					
		38-48	CLSAP MASS	S P FI C LENSES					.225 GPD/FTSQ TO 38"
				VERIGATED					
					Soil notes approved 9/10/09 W Sparks RS.				

COMMENTS: ____