DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: Lot 1 Brook Glen PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON 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		0-22	RBSCL GR	FRI SSSP					PS .25
		22-40	RBC SBK/MSBK	FI SP	YB Mottles Chroma 3				
		40-57	RBCL MSBK	FRI SSSP	Base of SHWT				
		57-60	SCL SAP MBK	FRI SSNP					
2		0-14	RBSCL GR	FRI SSSP					PS .25
		14-40	RBRBC SBK/MSBK	FI SP	YB Mottles Chroma 3 @ the depth of ~ Seasonal				
		40-62	SL/L MSBK	FRI SSSP					
3		0-8	RBSCL GR	FRI SSSP					PS .3
		8-18	RCL SBK	FI SP					
		18-40	CL MSBK	FRI SSSP					
		40-64	L MSBK	FRI SSSP					
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: _____