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: Bobby Kay OWNER: ____ AGENT: ____ PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 6-2-95
PROPOSED FACILITY: Repair to ____
PROPERTY SIZE: Ext ~1 Ac+ ____
LOCATION OF SITE: Mag Step Rd 2nd house on RT past Lounge Pool Shop ✓
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	1M SBK loamy ELG	1:1 / FR-MFI			PS		0.35
		36-48	SSBK C	1:1 / FR			PS		.3
2									
3									
4									
5									

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