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: F. P. Wright APPLICANT: Same
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 5/10
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: Yes
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL. CLASS & LTAR
1	Ridge 20%	0-20	cl w/some mica	SH SE					PS .3
		20-25	cl w/mica	SH SE					
		25-48	cl w/mica wsbk	SH					
2	Linear 6%	0-4	cl	SH	Ykbrn				PS .30
		4-16	C w/mica	SH SH					
		16-35	vfr sl w/mica	SH					
		35+	Sap gravel cl						
3	6% Linear	0-3	cl wsbk	SH SE					PS .30
		3-17	cl	SH SH					
		17-25	cl w/sap	SH SH					
		25-48	Sap (gravel)	SH					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Conv 20%	Conv 50%
Site LTAR	.30	.30

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Lee Johnson
OTHER(S) PRESENT: _____