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: Fay Marlowe APPLICANT: Same
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 5/13/02
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: 23 Acres
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

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	10% Linear	0-12	L	VFr NSNP NESP	Dr BRN				PS .35
		12-48	scl w SBk	fr SS SP SESP	Med Brn				
2	11% Linear	0-13	L	fr NS NP NESP	Dr BRN				PS .35
		13-48	scl SBk	fr SS SP SESP	Med BRN				
3	14% Linear	0-8	scl	fr	SESP				PS .30
		8-24	cl	fi	SESP				
		24-48	cl w Rep	fr	SESP				
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Gravity Conv	Pump Conv
Site LTAR	.35	.30

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____
EVALUATED BY: Bill John
OTHER(S) PRESENT: Fay Marlowe