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: _____ APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
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	4% Linear	0-3"	scl, wk, gr	fi, ns, np, ocs,		>48"			
		3-36"	cl, mod, sbk	fi, ss, sp, sep					
		36-48"	c, mod, sbk	fi, ss, sp, sep					
2	3% Linear	0-6"	scl, wk, gr	fi, ns, np, ocs, p		>48"			
		6-32"	cl, mod, sbk	fi, ss, sp, sep					
		32-48"	c, mod, sbk	fi, ss, sp, sep					
3	4%	0-4"	scl, wk, gr	fi, ns, np, ocs, p		>48"			
		4-34"	cl, mod, sbk	fi, ss, sp, sep					
		34-48"	c, mod, sbk	fi, ss, sp, sep					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	YES	YES
System Type(s)	Conv Gravity	Conv Gravity
Site LTAR	.3	.3

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: K. Cole
OTHER(S) PRESENT: _____