COUNTY: _____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

APPLICANT: C. Davidson OWNER: AGENT: PHONE:
ADDRESS: APPLICATION DATE: DATE EVALUATED: 2-5-97
PROPOSED FACILITY:
PROPERTY SIZE:
LOCATION OF SITE: Lot 13
WATER SUPPLY: On-Site Well ___ Comm. Well ___ Public ___ Other ___ EVAL. METHOD: Auger Boring X Pit ___ Cut ___

2/5 silt muddy - well dry up

PROFILE #	.1940 LANDSCP POS. (9)	HORIZON DEPTH (")	.1941 STRUCTURE/TEXTURE	.1941 MINERALOGY/ CONSISTENCE	.1942 WETNESS COND.	.1944 RESTRICT HORIZONS	.1948 CLASS OF HORIZ	1943/ 1956 SAPRLT CLASS.	HORIZON LTAR
1	Lineal	0-17	WSBk SCL	Fr SSS P					
		17-36	WSBk C/Rocky	Fr SS SP					
		H.I	Rock						
2		0-6	SCL						
		6-36	C						
		36-44	C/CL						
		44-48	CL mix SaP						
3		0-4	SCL						
		4-42	C						
		42-48	CL/ICL mix						
4	Regn'l Area	0-30	C						
		30-36	C/mix						
		36-48	SaP						
5	Regn'l	0-33	C						
		33-38	C/mix						
		38-48	SL						

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