DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

Sheet 1 of 1
PROPERTY ID #:
COUNTY: Iredell

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: _____ APPLICANT: Land Dev. Service
ADDRESS: Box 5602 Statesville NC APPLICATION DATE: 7 30 99 DATE EVALUATED: 8/16/99
PROPOSED FACILITY: 3 Bdrm House PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: .68
LOCATION OF SITE: Lot 9 Stonecrest ddn Rd Start (R) Caption Ln (R) SR 2730 PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other Irrigation on Right
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	PROFILE CLASS & LTAR
1	L 3.6%	0-36	SBK C	FI FR SI SP					PS .3
		36-49	SBK C SAP/Inclus	FR					
2	L 3.5%	0-36	SBK C	FI FR SI SP REXO					PS .3
		36-49	SBK C SAP/Inclus	FR					
		49+	Sap/C	VFR					
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	1200	1200
System Type(s)	Conv Gravity	25% Red Conv
Site LTAR	.3	.3

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