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: A J. Barbee Co APPLICANT: Same
ADDRESS: ___ APPLICATION DATE: 11-7-01 DATE EVALUATED: 12/11/01
PROPOSED FACILITY: 3BR House PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: .65 Ac.
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
Cont 160 Percolor

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTAF
1	4% Linear	0-16							V5 .3
		16-34							
		34-48							
2	5% Linear Report	0-14	See comm						.5 .3
		14-48							
3	4% Linear	0-5							.5 .3
		5-24							
		24-43							
		43-48							
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	95	95
System Type(s)	Conv	Conv
Site LTAR	.3	.3

OTHER FACTORS (.1946): ___
SITE CLASSIFICATION (.1948): ___
EVALUATED BY: [illegible]
OTHER(S) PRESENT: ___