DEPARTMENT OF ENVIRONMENT 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: Newman McDade
ADDRESS: _____ APPLICATION DATE _____
PROPOSED FACILITY: Residential PROPOSED DESIGN FLOW (.1949): 360 gpd DATE EVALUATED: 5-12-06
LOCATION OF SITE: 547 Autumn Leaf Dr. PROPERTY SIZE: _____
WATER SUPPLY: ☐ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☑ Sewage ☐ Industrial Process ☐ Mixed

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	PROFILE CLASS & LTAR
1	6% linear	0-12	1sbk cl						PS .3
		12-45	1sbKC	yellow hr fr ss/sp SE mottles	→ 10 YR 7/2	45			
		45							
2		0-12	1 sbK cl						.3
		12-30	1sbKSCl	few yellow hr fr					
		30-48	1sbKCl	fr ss/sp SE		48			
3		0-24	1sbKC	fr ss/sp SE					.3
		24-48	1sbKCl			48			
4		0-20	1sbKC	fr ss/sp SE					.3
		20-40	1sbKCl	Redoxymorphic	→ 10YR 7/2 Chroma 2	40			
		40							

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Yes	Yes
System Type(s)	25% red gravity	25% red.
Site LTAR	.3	.3

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

COMMENTS: Interceptor to catch lateral water