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: Todd Rankin
ADDRESS: _____
APPLICATION DATE 3.6.08
DATE EVALUATED: 3.28.08
PROPOSED FACILITY: 3br house/no bsmt. PROPOSED DESIGN FLOW (.1949): 360gl
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) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	OTHER PROFILE FACTORS .1943 SOIL DEPTH	OTHER PROFILE FACTORS .1956 SAPRO CLASS	OTHER PROFILE FACTORS .1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 4%	0-14	wSSK / CL	fr / sst	>48	>48	-	-	PS 0.3
		14-48+	SSK / C	fi / sst					
2	L 6%	0-11	cv / L	vfr / sst	>48	>48	-	-	PS 0.3
		11-48+	SSK / C	fi / sst					
3	L 8%	0-9	cv / L	vfr / sst	>48	>48	-	-	PS 0.3
		9-48	SSK / C	fi / sst					
4					-				

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	TR 2250	TR 2250
Site LTAR	0.3	0.3

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

COMMENTS: _____