EPARTMENT OF ENVIRONMENT,
EALTH, & NATURAL RESOURCES
VISION OF ENVIRONMENTAL HEALTH

SHEET ____ OF ____
PROPERTY I.D.#: ____
PROPERTY RECORDED: ____
COUNTY: ____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

PLICANT: Todd Ellis OWNER: AGENT: PHONE: ____
DDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: ____
PROPOSED FACILITY: ____
PROPERTY SIZE: ____
CATION OF SITE: Corner Scotts Creek & Alt 115 N
ATER SUPPLY: On-Site Well ___ Comm. Well ___ Public ___ Other ___ EVAL. METHOD: Auger Boring ___ Pit ___ Cut ___

PROFILE #	.1940 LANDSCP POS. (%)	HORIZON DEPTH (IN.)	.1941 STRUCTURE/TEXTURE	.1941 MINERALOGY/ CONSISTENCE	.1942 WETNESS COND.	.1944 RESTRICT HORIZONS	.1948 CLASS OF HORIZ	1943/ 1956 SAPRLT CLASS.	HORIZON LTAR
1	linear 690	0 to 48	C						.3
2	linear 690	0 to 48	C						.3
3									
4									
5									

ILABLE SPACE (.1945) yes SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: .3
VALUATED BY: C. C. Moore OTHER(S) PRESENT: ____
OMMENTS: ____