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

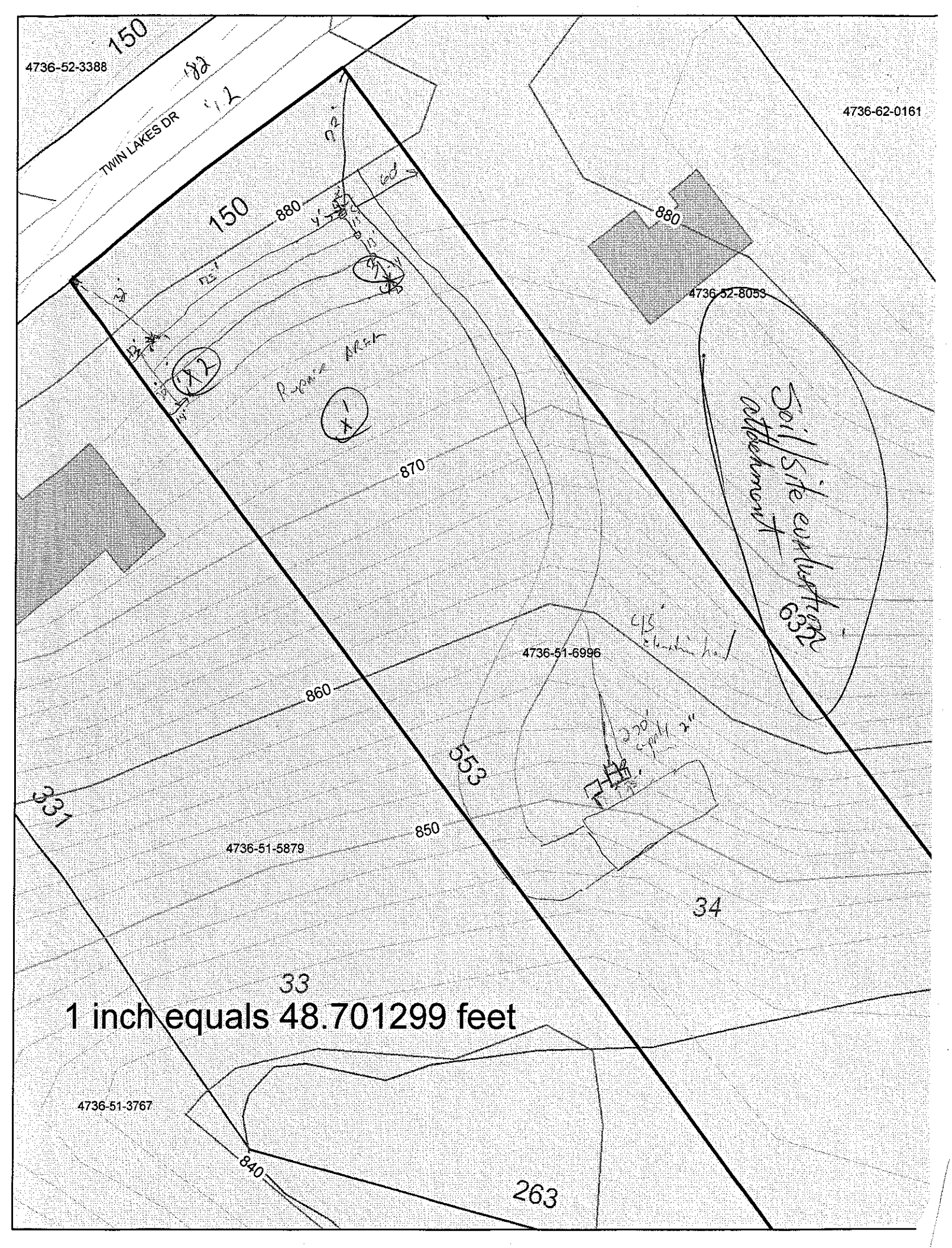
OWNER: Dobbs Farm Lot #3-1 _____ APPLICATION DATE _____
ADDRESS: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: _____ PROPERTY RECORDED: _____
WATER SUPPLY: ☐ Private ☒ Public ☐ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☒ 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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1	L 7%	0-11	gr L	vfr ssp	36"	>48	-	=	0.375 PS
		11-36	sbk C	fr sso					
		36-48+	wsbk SCL	fr sso					
2	L 7%	0-12	gr L	vfr ssp	>48	>48	=	-	0.3 PS
		12-40	sbk C	fr sso					
		40-48+	wabk C	fr sso					
3	L	0-9	gr L	vfr ssp	>48	>48	-	-	0.3 PS
		9-38	sbk C	fr ssp					
		38-48+	sbk C ssp	fr ssp					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	I 25% Red	II 25% Red
Site LTAR	0.3	0.375

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

COMMENTS: _____


4736-52-3388
TWIN LAKES DR
4736-62-0161
4736-52-8053
4736-51-6996
4736-51-5879
4736-51-3767
150
880
870
860
850
840
553
633
34
33
263
Soil/Site evaluation 632
1 inch equals 48.701299 feet