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: Jack Burdens APPLICANT: Jack Burdens
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 2/22/01
PROPOSED FACILITY: 3BR House/Comm PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: .43
LOCATION OF SITE: Willow Creek Lot #24 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	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL. CLASS & LTAR
1	2% Linear	0-12	scr wsbk	Fr SSS/ SEP					PS .3
		12-48	scl/c msbk	Fi Sp SEP					
2	4% Linear	0-14	L	Fi					PS .3
		14-28	L sme	Fi					
		28-48	scl/c mica typ	Fr					
3	Linear <2% Repair	0-12	Scr wsbk	Fr Sp/ SEP					PS .3
		12-48	scl/c msbk	Fi Sp St.					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	Gravity 3BR	Pump 3BR
Site LTAR	.3	.3

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