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: Mary Spear APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 9-22-16
PROPOSED FACILITY: SFR PROPOSED DESIGN FLOW (.1949): 360 gpd PROPERTY SIZE: _____
LOCATION OF SITE: lot 47 Rocky Creek PROPERTY RECORDED: _____
WATER SUPPLY: ☒ Private ☐ Public ☒ Well ☐ Spring ☐ Other _____
EVALUATION METHOD: ☐ Auger Boring ☒ Pit ☐ Cut
TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	1940 LAND-SCAPE POSITION/ SLOPE %	HORI-ZON 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 4-6%	0-5	gr- l bk sl/sel	fr					.34
		5-20	SBK RC	fi sp fri					
		20-48	msbk RCL	fr ss,sp fri					
2	L 4-6%	0-5	gr- bk sl	fr					.34
		5-22	SBK RC	fi. fr sp-ss sp fi					
		22-55	sbk RCL	fr ss,sp					
3	L 4-6%	0-5	gr- l bk sl	fr					.34
		5-19	SBK RC	fi-fr sp fi					
		19-48	msbk RCL	fr ss,sp fi					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): _____

EVALUATED BY: _____
OTHER(S) PRESENT: _____