DEPARTMENT OF ENVIRONMENT,
HEALTH, & NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

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

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

APPLICANT: Bob Limbaugh/Realtor OWNER: AGENT: X PHONE: ____
ADDRESS: ____ APPLICATION DATE: ____ DATE EVALUATED: 3/ ____
PROPOSED FACILITY: ____
PROPERTY SIZE: ____
LOCATION OF SITE: Lot 9 Carlyle Farms (New Section)
WATER SUPPLY: On-Site Well X Comm. Well ___ Public ___ Other ____ EVAL. METHOD: Auger Boring X 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 ABOVE RUN	LS SLO L→R	0-9	GR sl	FR NS NP	PS				
		10-28	SBK Mcl	~FR SS SP	PS				.3
		29-	FI SBK Hcl	FR SS NP	PS				.35
2 BELOW RUN		0-8	FR GR sl	VFR NS NP					
		9-13	SBK Hsc l	FR SS SP					
		14-	SBK STRUC cl	FR S P					
		24	Rocks		DNF				
3 Below Loop		0-10	GR sl	VFR NS NP					
		11-15	SBK Sc l	FR SS SP					
		16-32	SBK C	FR S P					.3
		33-47	SBK cl	FI/FR SS SP					.35
4									
5									

AVAILABLE SPACE (.1945) ____ SITE CLASSIFICATION (.1948): ____ SITE LONG-TERM ACCEPTANCE RATE: ____
EVALUATED BY: ____ OTHER(S) PRESENT: ____
COMMENTS: No Show