/ISION OF ENVIRONMENTAL HEALTH:
I-SITE WASTEWATER SECTION

PROPERTY ID #: _____
COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

ER: _____ APPLICANT: _____
DRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
OPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
CATION OF SITE: _____ PROPERTY RECORDED: _____
ATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____
ALUATION METHOD: ☐ Auger Boring ☐ Pit ☐ Cut
PE OF WASTEWATER: ☐ Sewage ☐ Industrial Process ☐ Mixed

.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
	0-6							
	6-36							
	36+							
	0-21/30							
	21/30-49							
	0-9							
	9-33							
	33-49							

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
ilable Space (.1945)		
tem Type(s)		
: LTAR		

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