Sheet ___ of ___
PROPERTY ID #: _____
COUNTY: _____

DEPARTMENT OF ENVIRONMENT, HEALTH, AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH
ON-SITE WASTEWATER SECTION

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: [redacted] APPLICANT: _____ DATE EVALUATED 4-29-99
ADDRESS: _____ APPLICATION DATE: _____ PROPERTY SIZE: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY RECORDED: _____
LOCATION OF SITE: Lot 19 Sedgewood
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		0-4	brn sl						B .3 @ 44"
		4-28	SaBrc	Fsp					
		28-44	wk SaBk ynd	w Gryplus					
			hole stopped	lot = rock					
2		0-7	brn sl						B .3 @ 35"
		7-17	SaBrc	Fsp					
		17-35	wk SaBk ynd/L	w Gryplus					
			hole stopped, lot = rock						
3		0-4	brn sl	Fsp					.3 @ 30"
		4-18	SaBrc	Fsp					
		18-30	RCK	Fsp	fractured rock				
			hole stopped, lot = rock						
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: _____