DEPARTMENT OF ENVIRONMENT 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: _____
ADDRESS: _____ APPLICATION DATE _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ DATE EVALUATED: 03/11/2008
LOCATION OF SITE: GA Mills S/D PROPERTY SIZE: _____
WATER SUPPLY: ☐ Private ☐ Public ☐ Well ☐ Spring ☐ Other _____ PROPERTY RECORDED: _____
EVALUATION METHOD: ☒ Auger Boring ☐ Pit ☐ Cut TYPE OF WASTEWATER: ☒ Sewage ☐ Industrial Process ☐ Mixed

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941)		OTHER PROFILE FACTORS				PROFILE CLASS & LTAR
			.1941 STRUCTURE/ TEXTURE	.1941 CONSISTENCE/ MINERALOGY	.1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	
1	E	0-10	WK/mo SBK CL	FR SS/SP	Red				0.30
		10-13	Mo GR SL	FR SS/SP	Br (Buried A)				
		13-48	WK SBK SCL	FR SS/SP	Lt Red				
2									
3	C	0-5	wsbk scl	SS SP Fr	Br				.3
		5-24	wsbk cl	SS SP Fr	R	FSP			
		24-29	wsbk scl	SS SP Fr	RBr	C to M SaP			.35
		29-48	mass lSap	NS NP Fr	mult;				
4	D	0-12	wgr scl	SS SP Fr	Br				.3
		12-38	wsbk sc	SS SP Fr	Lt Red				
		38-48	wsbk scl	SS SP Fr	Lt Red	FSap			

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
vailable Space (.1945)		
ystem Type(s)		
te LTAR		

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

MMENTS: _____