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

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4752857123

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

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

OWNER: Debbie Jakielski
ADDRESS: 23 Winding Arbor Circle
PROPOSED FACILITY: House
PROPOSED DESIGN FLOW (.1949): 360
LOCATION OF SITE: Shelar Church - (R) Clements (L) Oakhill Cedar
APPLICATION DATE _____
DATE EVALUATED: _____
PROPERTY SIZE: .622
PROPERTY RECORDED: _____
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	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
1		0-7	SC wSBk	SSSPeFr					.25
		7-48	C MSBk	SSSPSeFr					
2		0-10	C wSBk	SSSPSeFr	mica inclusions				.25
		10-48	C wSBk	SSSPSeFr					
3		0-48	C mSBk	SSSPSeFr					.25
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	440/360	
System Type(s)		
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: [illegible]
OTHER(S) PRESENT: _____

COMMENTS: _____