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: Ron Puckett OWNER:__ AGENT:__ PHONE:____
ADDRESS:____ APPLICATION DATE:____ DATE EVALUATED: 9/19/95
PROPOSED FACILITY: 2 bedroom MH
PROPERTY SIZE:____
LOCATION OF SITE: 435 Dawley Dr. Mocksville
WATER SUPPLY: On-Site Well___ Comm. Well___ Public___ Other____ EVAL. METHOD: Auger Boring ✓ 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		0-20	SAB- heavy CL	mfi FR					.3
		20-46	m-wksbk cl						
2									
3									
4									
5									

AVAILABLE SPACE (.1945)____ SITE CLASSIFICATION (.1948):____ SITE LONG-TERM ACCEPTANCE RATE:____

EVALUATED BY:____ OTHER(S) PRESENT:____

COMMENTS:____