ISION OF ENVIRONMENTAL HEALTH
ITE WASTEWATER SECTION

COUNTY: _____

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM

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

	.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	linear H90	0to48	C	SbK	Fi	SSAP 3SSP	48" +		PS .3
2	linear H90	0to48	C	SbK	Fi	SSAP 3SSP	48" +		PS .3
3									
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)		
System Type(s)		

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