DEPARTMENT OF ENVIRONMENT, HEALTH, 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: David Stikeleather APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): _____ PROPERTY SIZE: _____
LOCATION OF SITE: lot 26 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	.1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL CLASS & LTAR
1	V H 90	18	Clay						133
		18+48	SCL						
2	V V 90	18	Clay						133
		18+48	SCL						
3									
4									

DESC	N	INITIAL SYSTEM	REPAIR SYSTEM
Available S	945)		
System Ty			
Site LTAR			

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