COUNTY: _____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

APPLICANT: Brenda Ellisor OWNER: _____ AGENT: _____ PHONE: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____
PROPERTY SIZE: _____
LOCATION OF SITE: _____
WATER SUPPLY: On-Site Well ___ Comm. Well ___ Public ___ Other _____ EVAL. METHOD: Auger Boring ___ Pit ___ Cut

PROFILE #	.1940 LANDSCP POS. (2)	HORIZON DEPTH (IN.)	.1941 STRUCTURE/TEXTURE	.1941 MINERALOGY/ CONSISTENCE	.1942 WETNESS COND.	.1944 RESTRICT HORIZONS	.1948 CLASS OF HORIZ	1943/ 1956 SAPRLT CLASS.	HORIZ LTAR
1	linear 10%	0 to 4	L GR		PS	PS	PS	N/A	.32
		4 to 30	C SBK	SEAP SS SP					
		30 to 48	C SBK	WEAP NS NP					
2	linear 10%	0 to 4	L GR		PS	PS	PS	N/A	.3
		4 to 48	C SBK	SEAP SS SP					
3									
4									
5									

AVAILABLE SPACE (.1948): Yes SITE CLASSIFICATION (.1948): PS SITE LONG-TERM ACCEPTANCE RATE: .3
EVALUATED BY: R.E. Moore OTHER(S) PRESENT: _____
COMMENTS: _____