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

Sheet ____ of _____
PROPERTY ID #: _____
COUNTY: IREDELL

SOIL/SITE EVALUATION
for ON-SITE WASTEWATER SYSTEM 4778-68-6877

OWNER: BOB HADEN APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: 9-5-02 DATE EVALUATED: 10-3-02
PROPOSED FACILITY: 3BR D/W PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: 0.736
LOCATION OF SITE: ROCK GATE EST #31 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	PROFIL. CLASS & LTAR
1	L 10%	0-32	SBK C	FR SS/SP SEAP					PS 0.3
		32-48	SBK SC	FR SE/P					
2	L 15%	0-38	SBK C	FR SS/SP SEAP					PS 0.3
		38-48	SBK SC	FR SE/P					
3	W 12%	0-16	SBK SC	FR		4			4
		16+	ROCK						
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	PS	PS
System Type(s)	II	II
Site LTAR	0.3	0.3

OTHER FACTORS (.1946): NONE
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: S. HENDRICK
OTHER(S) PRESENT: BOB HADEN