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 794377 (PT)

OWNER: SCOTT CLINE APPLICANT: SAME
ADDRESS: P.O BOX 1651 STVL, NC 28687 APPLICATION DATE: 10-6-99 DATE EVALUATED: 10-22-99
PROPOSED FACILITY: 3BR D/W MH PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: 0.7 ACRE
LOCATION OF SITE: ROCK GATE I-77 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%	0-48+	SBK / c-cl	FR-FI / NEXP					PS 0.3
2	L 12%	0-48+	SBK / c-cl	FR-FI / NEXP					PS 0.3
3									
4									

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

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