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: Kelly Welborn APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: _____
PROPOSED FACILITY: _____ PROPOSED DESIGN FLOW (.1949): 360 PROPERTY SIZE: _____
LOCATION OF SITE: _____ 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	8% L	0-12"	scl, wk, gr	fr, ns, sp, mpl		>48"			PS .5
		12-24"	cl, med, sbk	fr, s, sp, mpl					
		24-48"	c, med, sbk	fi, s, sp, mpl					
2	8% L	0-12"	scl, wk, gr	fr, ns, sp, mpl	18-24" mottles	>48"			PS .5
		12-24"	cl, med, sbk	fr, s, sp, mpl					
		24-48"	c, med, sbk	fi, s, sp, mpl					
3	8% L	0-12"	scl, wk, gr	fr, ns, sp, mpl	18-24" mottles	>48"			PS .5
		12-22"	cl, med, sbk	fr, s, sp, mpl					
		22-48"	c, med, sbk	fi, s, sp, mpl					
4									

DESCRIPTION	INITIAL SYSTEM	REPAIR SYSTEM
Available Space (.1945)	Yes	Yes
System Type(s)	Conv Conv	Conv 5% R
Site LTAR		

OTHER FACTORS (.1946): _____
SITE CLASSIFICATION (.1948): PS
EVALUATED BY: L. Cecil
OTHER(S) PRESENT: L. Cole / Rural