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: JOHN JONES APPLICANT: _____
ADDRESS: _____ APPLICATION DATE: _____ DATE EVALUATED: 2/5/01
PROPOSED FACILITY: 3 BR ITSE 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) STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFIL. CLASS & LTAR
1		0-4	SCL WSBK	VFr NS NP	≥ 48"	≥ 48"	N/A	N/A	PS .30
		4-18	SC WSBK	Fr SS SP					
		18-40	C MSBK	Fi S ?					
		40-48	C/SAP						
2		0-4	SCL VWSBK	VFr NS NP	≥ 48"	≥ 48"	N/A	N/A	PS .30
		4-10	SC WSBK	Fr SS SP					
		10-38	C MSBK	Fi S ?					
		38-48	C/SAP						
3		0-6	SCL VWSBK	Fr NS NP	≥ 42"	≥ 42"	N/A	N/A	PS .30
		6-12	SC WSBK	Fr SS SP					
		12-36	C MSBK	Fi S ?					
		36-42	C/SAP						
		42-48	SAP						
4									

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

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