DEPARTMENT OF ENVIRONMENT,
HEALTH, & NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SHEET ____ OF ____

PROPERTY I.D.#: _____
PROPERTY RECORDED: _____
COUNTY: _____

SOIL/SITE EVALUATION
FOR
ON-SITE WASTEWATER SYSTEM

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

PROFILE #	.1940 LANDSCP POS. (%)	HORIZON DEPTH (IN.)	.1941 STRUCTURE/TEXTURE	.1941 MINERALOGY/ CONSISTENCE	.1942 WETNESS COND.	.1944 RESTRICT HORIZONS	.1948 CLASS OF HORIZ	1943/ 1956 SAPRLT CLASS.	HORIZON LTAR
1	(3)	0-8							(3)
		8-22							
2	(2)	0-8				Rc. H			(4)
		8-18							
		18-							
3	(5)	0-8							
		8-30							
		30-48							
~~3~~ 4	(1)	0-8							PS
		8-30							
		30-							
5	(5)	0-7							PS
		7-20							10
		20-27							40
		27-30							20 -
		30-48							

AVAILABLE SPACE (.1945) _____ SITE CLASSIFICATION (.1948): _____ SITE LONG-TERM ACCEPTANCE RATE: _____
EVALUATED BY: _____ OTHER(S) PRESENT: _____
COMMENTS: _____