Department of Environment, Health and Natural Resources Division of Environmental Health On-Site Wastewater Section

Sheet: Property ID: Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

Applicant:

Owner:

Description

Site LTAR

Available Space (.1945) System Type(s)

Initial

System

CLV

Repair System

CLAV

Owner: Applica Address: Proposed Facility: Location of Site: Water Supply: Evaluation Method: Type of Wastewater:		Date Desi	oring \square	al 🛮 Well Pit 🔲 Cut	✓ Well ☐ Spring ☐ Other					
P R O F I L E	.1940 Landscape Position/ Slope %	Horizon Depth (In.)	.1941 Structure/ Texture	IORPHOLOGY .1941 .1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	OTHER PROFILE FACTO .1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR	
	15	0-98	SBK/C	F:SP					15.3	
		28+	SAP							_
		. 21	504/ 0	6.0						
		46-6	sulc sal	F.SP					PS.3	
		1(+	1/1							
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Other Factors (.1946):

Site Classification (.1948): 1 67
Evaluated By: 1 67

Others Present: