

**SOIL/SITE EVALUATION
 for ON-SITE WASTEWATER SYSTEM**

Owner: _____ Applicant: _____
 Address: _____
 Proposed Facility: _____
 Location of Site: _____
 Water Supply: _____
 Evaluation Method: _____
 Type of Wastewater: _____

Date Evaluated: 2/10/2010
 Design Flow (.1949): _____
 Property Recorded: _____

Property Size: _____
 Spring Other

- Public Individual Well Spring Other
 Auger Boring Pit Cut
 Sewage Industrial Process Mixed

PROFILE #	.1940 Landscape Position/Slope %	Horizon Depth (in.)	SOIL MORPHOLOGY .1941		OTHER PROFILE FACTORS				Profile Class & LTA
			.1941 Structure/Texture	.1941 Consistence/Mineralogy	.1942 Soil Wetness/Color	.1943 Soil Depth (IN.)	.1956 Sapre Class	.1944 Root Horiz	
	15 51-	0-48	C-1LS	UG NS, NP					5.8
		0-48	C-1LS	UG NS, NP					5.8
		0-48	C-1LS	UG NS, NP					5.8

Description	Initial System	Repair System
Available Space (.1945)		
System Type(s)		
Site LTA		

Other Factors (.1946): _____
 Site Classification (.1948): 5
 Evaluated By: [Signature]
 Others Present: _____