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

ural Resources

et: Property ID:

Lot #: File #: Code:

SOIL/SITE EVALUATION for ON-SITE WASTEWATER SYSTEM

System Type(s)
Site LTAR

Water S Evaluati	: d Facility: n of Site:	: 💆	Design	valuated: Flow (.1949): y Recorded:	Process Mixed					
P R O F I	.1940 Landscape Position/ Slope %			RPHOLOGY	P					
I L E #		Horizon Depth (ln.)	.1941 Structure/	.1941 Consistence Mineralogy	.1942 Soil Wetness/ Color	.1943 Soil Depth (IN.)	.1956 Sapro Class	.1944 Restr Horiz	Profile Class & LTAR	
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		18-26	10/ (sc/	CV-NSNP	Towe + Ast 36					
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	ntion ole Space (.19 Type(s)	S	ystem	pair System	Other Factors (.1946): Site Classification (.1948) Evaluated By Others Present:	i. PS				

COMMENTS: ____

LANDSCAPE POSITIONS	GROUP	TEXTURES	1955 LTAR	CONSISTENCE MOIST	Wer			
R-RIDGE S-SHOULDER SLOPE	I	S-SAND	1.2 - 0.8		WET			
L-LINEAR SLOPE		LS-LOAMY SAND		VFR-VERY FRIABLE	NS-NON-STICKY			
F3-FOOT SLOPE N-NOSE SLOPE	П	SL-SANDY LOAM L-LOAM	0.8 - 0.6	FR-FRIABLE FI-FIRM	SS-SLIGHTY STICKY S-STICKY			
H-HEAD SLOPE CC-CONCLAVE SLOPE	ш	SI-SILT	24.22	VFI-VERY FIRM EFI-EXTREMELY FIRM	VS-VERY STICKY NP-NON-PLASTIC			
CV-CONVEX SLOPE T-TERRACE		SIL-SILT LOAM CL-CLAY LOAM	0.6 - 0.3		SP-SLIGHTLY STICKY P-PLASTIC			
FP-FLOOD PLAN		SCL-SANDY CLAY LOAM			VP-VERY PLASTIC			

0.4 - 0.1

STRUCTURE
SG-SINGLE GRAIN
M- MASSIVE
CR-CRUMB
GR-GRANULAR
SBK-SUBANGULAR BLOCKY
ABK-ANGULAR BLOCKY
PL-PLATY
PR-PRISMATIC

MINERALOGY SLIGHTLY EXPANSIVE

SIC-SILTY CLAY

EXPANSIVE

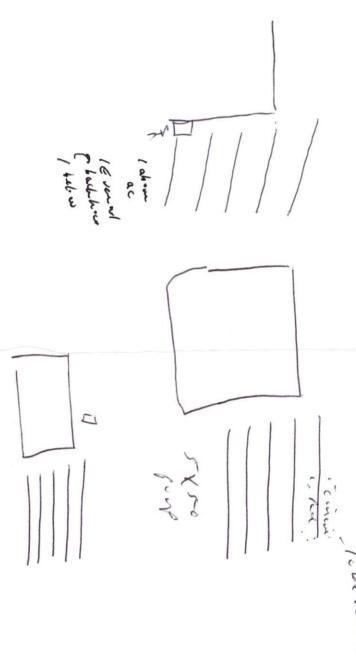
C-CLAY SC-SANDY CLAY

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HOMEOWNER INTERVIEW FORM

It is important that you answer the following questions for our inspectors. Please do not leave any blanks if possible and answer all questions to the best of your ability. Thank you.
Have you received a letter for a failing septic system from our office? [] YES [] NO
Also, within the last 5 years have you completed an application for repair for this site? [] YES [] NO
Installer of system
Septic Tank Pumper Designer of System
1. Number of people who live in house? 2 # adults 3 # children 5 # total
2. What is your average estimated daily water usage? gallons/month or day county water If HCPU please give the name that the water bill is listed in?
3. If you have a garbage disposal, how often is used? [] daily [] weekly [] monthly
4. When was the septic tank last pumped? (Mder / yeafen do you have it pumped?
3. If you have a dishwasher, how often do you use it? [] daily [] every other day [] weekly
6. If you have a washing machine, how often do you use it? [] daily [] every other day [] weekly [] monthly
7. Do you have a water softener or treatment system? [] YES [NO Where does it drain?
8. Do you use an "in tank" toilet bowl sanitizer? [] YES [] NO
 Are you or any member in your family using long term prescription drug(s), antibiotics or chemotherapy? YES [] NO If yes, please list
10. Do you put household cleaning chemicals down the drain? [] YES [] NO If so, what kind?
11. Have you put any chemicals (paints, thinners, etc.) down the drain? []YES [] NO If yes, what kind?
12. Have you installed any water fixtures since your system has been installed? [] YES [] NO If yes, please list any additions including any spas, whirlpools, sinks, lavatories, bath/showers, toilets.
13. Do you have an underground lawn watering system? [] YES NO
14. Has any work been done to your structure since your initial move, such a roof, gutter drains, basement foundation drains, landscaping, etc? [] YES J NO If yes, please list
15. Are there any underground utilities on your lot? [YES [] NO Please check all that apply [] Power [] Phone [] Cable [Gas [Water
16. Describe what is happening when you have problems with your septic system and when was it first noticed.
17. Do you notice the problem as being patterned or linked to a specific event (i.e., wash clothes, heavy rains, household guests)? [] YES [] NO If yes, please list



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