

CEP-2/3 PART-C SITE EVALUATION DATA

Name of Applicant/Establishment/Development _____

Location/Address _____

Evaluator

Engineer
 Land Surveyor
 Soil Classifier
 Geologist
 PHESS (CEP-2 Only)

Method Used

Percolation
 Unified
 Mapping
 Morphology

Note: All percolation results shall be reported. All testing methods and results are subject to verification by the LHD and/or the ADPH.

**1. Unified / Morphology / Percolation Soil Boring Data
(Attach additional sheets if necessary)**

Hole No.	Layer ID/Horizon *	Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Redox, etc.	Texture*	Texture Group *	Other
Field Sizing _____ mpi @ _____ Depth (in.)			Restriction Depth (in.) _____	Restriction Type per Table 7 _____	Minimum Vertical Separation Distance per Table 7 _____ (in.)		

Hole No.	Layer ID/Horizon *	Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Redox, etc.	Texture*	Texture Group *	Other
Field Sizing _____ mpi @ _____ Depth (in.)			Restriction Depth (in.) _____	Restriction Type per Table 7 _____	Minimum Vertical Separation Distance per Table 7 _____ (in.)		

Hole No.	Layer ID/Horizon *	Depth of Upper/Lower Boundary	Dominant Color of Each Layer	Mottles, Redox, etc.	Texture*	Texture Group *	Other
Field Sizing _____ mpi @ _____ Depth (in.)			Restriction Depth (in.) _____	Restriction Type per Table 7 _____	Minimum Vertical Separation Distance per Table 7 _____ (in.)		

* Required for Unified / Morphology methods only.

2. Percolation Test Data (Attach additional sheets if necessary)

Extended Saturation Procedure Testing <input type="checkbox"/> No <input type="checkbox"/> Yes	Percolation Hole No.	Date of Percolation Tests	Beginning / End Time of Saturation	Beginning / End Time of Testing	Total Depth of Hole (in.)	Depth from Surface to Restriction (in.)	Stabilized Percolation Rate in Minutes per Inch

3. Professional Soil Classifier Mapping Data attached

SITE EVALUATOR

Primary EDF design is limited by the most restrictive test result as recorded for hole number _____.

I, _____, do hereby certify that the above and attached (if applicable) soil tests were conducted as specified in Rule 420-3-1 and are true and accurate as presented.

Signature _____ Date _____ Registration No. _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Firm Name _____ Address _____