** Somerset County Health Department**

 8928 Sign Post Road, Suite 2, Westover, Maryland 21871

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 Health Officer Lori Brewster, MS, APRN/BC, LCADC

**$300 FEE IS DUE AND PAYABLE AT TIME OF APPLICATION.**

**THIS IS A NON-REFUNDABLE FILING AND PROCESSING FEE.**

**SOIL EVALUATION APPLICATION**

\*\*Please fill out shaded area. DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

OWNER APPLICANT

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TAX MAP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BLOCK \_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARCEL \_\_\_\_\_\_\_\_\_\_\_\_\_\_ LOT \_\_\_\_\_\_\_\_\_\_

PROPERTY LOCATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LOT SIZE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SINGLE LOT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SUBDIVISION \_\_\_\_\_\_\_\_\_\_\_\_\_

RESIDENTIAL \_\_\_\_\_\_\_\_\_\_\_\_\_ COMMERCIAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PERCOLATION TEST**

SOIL TYPE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MAN. AREA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DEPTH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WATER TABLE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WATER ADDED \_\_\_\_\_\_\_\_\_\_\_\_\_

TIME FIRST INCH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ HOLE DIAMETER/SIZE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TIME SECOND INCH \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONVERTED RATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SOIL PROFILE**

DEPTH COLOR DESCRIPTION

TEST CONDUCTED BY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

APPROVED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DISAPPROVED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_