


CHECK BOX AS APPLICABLE.

**SOIL EVALUATION
SITE MAP**


PROJECT NAME: _____

PROJECT ADDRESS: _____

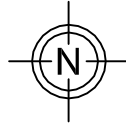
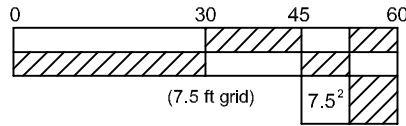
BM Symbol:  BM Elevation: _____ FT

BM Description: _____

Slope Gradient (%)
of Tested Area: _____

Well Symbol (if applicable): 

Scale: 1" = 30'



Indicate north by
drawing an arrow
on the appropriate line.

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**SYSTEM
PLOT PLAN**

DESIGN FLOW: _____ GPD

Attach design flow calculations for commercial plans.

Pipe Material / ASTM Standard (Tables 384.30-3 & 384.30-5)

Sanitary Sewer: _____ / _____

Force Main: _____ / _____

IMPORTANT:

Show ground elevation contours at suitable intervals.

