



**STATE OF RHODE ISLAND**  
 Department of Environmental Management  
 Office of Water Resources  
 Email: dem.OWTS@dem.ri.gov  
 Site Evaluation Form



**Part A – Soil Profile Description**      Application Number \_\_\_\_\_

Property Owner: \_\_\_\_\_  
 Property Location: \_\_\_\_\_ Plat: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Date of Test Hole: \_\_\_\_\_ Weather: \_\_\_\_\_ Shaded: Yes  No  Time: \_\_\_\_\_  
 Soil Evaluator: \_\_\_\_\_ License Number: \_\_\_\_\_  
 Soil Evaluator email address: \_\_\_\_\_

TH Horizon	Depth	Horizon Boundaries		Soil Colors		Re-Dox			Texture	Structure	Consistence	Soil Category
		Dist	Topo	Matrix	Re-Dox Features	Ab.	S.	Contr.				

TH \_\_\_\_\_ Soil Class \_\_\_\_\_ Total Depth \_\_\_\_\_ Impervious/Limiting Layer Depth \_\_\_\_\_ (og) GW Seepage Depth \_\_\_\_\_ SHWT \_\_\_\_\_ (og)  
 TH \_\_\_\_\_ Soil Class \_\_\_\_\_ Total Depth \_\_\_\_\_ Impervious/Limiting Layer Depth \_\_\_\_\_ (og) GW Seepage Depth \_\_\_\_\_ SHWT \_\_\_\_\_ (og)

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_





**Part B**

**Site Evaluation** – to be completed by Soil Evaluator or Class II or III Designer

**Please use the area below to locate:**

1. Test holes and bedrock test holes,
2. Approximate direction of due north
3. Offsets from test holes to fixed points such as street, utility pole, or other permanent, marked object\*

**\*OFFSETS MUST BE SHOWN**

Key:	
	Approximate location of test holes
	Approximate location of bedrock test holes
	Estimated gradient and direction of slope
	Approximate direction of due north

1. Relief and Slope: \_\_\_\_\_
2. Presence of any watercourse, wetlands or surface water bodies, within 200 feet of test holes: NO  YES
3. Restrictive Layer or Bedrock within 4' below original ground within 25 feet of test hole. Provide all test hole locations & depths above. NO YES
4. Presence of existing or proposed private drinking water wells within 200 feet of test holes? If yes, locate on above sketch. NO  YES
5. Public drinking water wells within 500 feet of test holes? If yes, locate on above sketch. NO  YES
6. Is site within the watershed of a public drinking water reservoir or other critical area defined in Rule 6.42? NO  YES
7. Has soil been excavated from or fill deposited on site? If yes, locate on above sketch. NO  YES
8. Site's potential for flooding or ponding: NONE  SLIGHT  MODERATE  SEVERE
9. Landscape position: \_\_\_\_\_
10. Vegetation: \_\_\_\_\_
11. Indicate approximate location of property lines and roadways.
12. Additional comments, site constraints or additional information regarding site: \_\_\_\_\_

**Certification**

The undersigned hereby certifies that all information on this application and accompanying forms, submittals and sketches are true and accurate and that I have been authorized by the owner(s) to conduct these necessary field investigations and submit this request.

Part A prepared by: \_\_\_\_\_ Signature \_\_\_\_\_ License # \_\_\_\_\_ Part B prepared by: \_\_\_\_\_ Signature \_\_\_\_\_

**DO NOT WRITE IN THIS SPACE**

<b>Witnessed Soil Evaluation Decision:</b>	Concur	Inconclusive	Disclaim
<b>Unwitnessed Soil Evaluation Decision:</b>	Accept	Inconclusive	Disclaim

**Wet Season Determination required**                      **Additional Field Review Required**

Explanatoin: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signature Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_