



To Protect and Promote the Health and the Environment of the People of Kittitas County

### Application for Site Evaluation

**REQUESTED BY:**

Property Owners Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Requested By: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Designers Name: \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Signature of owner or agent: \_\_\_\_\_

Designer E-mail: \_\_\_\_\_

**SITE:**

Map Parcel Number \_\_\_-\_\_\_-\_\_\_-\_\_\_ Lot #: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Gate Code: \_\_\_\_\_ Acreage Size: \_\_\_\_\_

Directions to site: \_\_\_\_\_

**Parcel Map must be attached**

Test holes are dug  Will call when holes are dug

**STRUCTURE (CHECK ALL THAT APPLY):**

Proposed OR  Existing (Repair or Alteration)

Single Family Residence OR  Commercial Application

Number of bedrooms: \_\_\_\_\_ Number of permanent occupants: \_\_\_\_\_

Other (Specify) \_\_\_\_\_ Expected Daily Design Flow \_\_\_\_\_

**WATER SUPPLY:**

Public Water System - Name of system: \_\_\_\_\_

Private well  Well is drilled and located on attached Map  Well not drilled

Cistern

**Date** **Fee** **Receipt #**  
\$535.00 Site Evaluation Fee is non-refundable after service has been provided  
Site Evaluation is valid for five years

Kittitas County  
Public Health Department  
507 N. Nanum Street, Suite 102  
Ellensburg, WA 98926  
T: 509.962.7515  
F: 509.962.7581



[www.co.kittitas.wa.us/health/](http://www.co.kittitas.wa.us/health/)

Environmental  
Health Services  
507 N. Nanum Street, Suite 102  
Ellensburg, WA 98926  
T: 509.933.8262  
F: 509.962.7581

OSS SITE EVALUATION - TEST HOLE DATA & PARCEL INFORMATION

TIME IN: \_\_\_\_\_ TIME OUT: \_\_\_\_\_


File Last Name: \_\_\_\_\_ Parcel Number: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Soil Profile</b>
C = Clay
S = Sand
Si = Silt
L = Loam
GR = Gravel
CO = Cobbles
BKR = Broken Rock
HP = Hard Pan
H2O = Water
MOT = Mottling
RL = Root Line

Restrict. Layer: \_\_\_\_\_  
\_\_\_\_\_

SOIL LOG # PRIMARY			
Depth	Texture	Structure	Color
Feet			
1-			
-			
2-			
-			
3-			
-			
4-			
-			
5-			
-			
6-			

SOIL LOG # RESERVE			
Depth	Texture	Structure	Color
Feet			
1-			
-			
2-			
-			
3-			
-			
4-			
-			
5-			
-			
6-			

Field Observations:	Minimum Setbacks:	System Approved:	Parcel Map/Soil log Location
	<input type="checkbox"/> Surface Water (100') <input type="checkbox"/> Wells (100') <input type="checkbox"/> Water Lines (10') <input type="checkbox"/> Cut banks (25' + 5' or 50' +5') <input type="checkbox"/> Interceptor Ditches (10' up or 30') <input type="checkbox"/> Property Lines (5') <input type="checkbox"/> Buildings (10') <input type="checkbox"/> Cuts or fills? Slope: _____ (Percent & Direction)	APP Rate: <input type="checkbox"/> .2 <input type="checkbox"/> .4 <input type="checkbox"/> .6 <input type="checkbox"/> .8 <input type="checkbox"/> 1.0 <input type="checkbox"/> Gravity <input type="checkbox"/> Pressure <input type="checkbox"/> Pressure with Sand Lined Trenches <input type="checkbox"/> Alternative <input type="checkbox"/> Other: _____ _____ _____ <input type="checkbox"/> Unsuitable	

Comments or Waivers Needed: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Designer Signature: \_\_\_\_\_

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