

Name _____ Site Number _____

Contestant Number _____

County/School _____

PART 1	PART 2				
	Planned Use - One-Family Dwelling				
SITE FACTORS	Degree of Limitation	Foundations with Basement	Lawns, Shrubs and Gardens	Septic System	Ponds and Lagoon Sewage
A. Surface Texture <input type="checkbox"/> Clayey = Fine <input type="checkbox"/> Loamy = Medium <input type="checkbox"/> Sandy = Coarse	Slight Moderate Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
B. Permeability <input type="checkbox"/> Very Slow <input type="checkbox"/> Slow <input type="checkbox"/> Moderate <input type="checkbox"/> Rapid	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
C. Soil Depth <input type="checkbox"/> Very Deep <input type="checkbox"/> Deep <input type="checkbox"/> Moderately Deep <input type="checkbox"/> Shallow <input type="checkbox"/> Very Shallow	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
D. Slope <input type="checkbox"/> Nearly Level <input type="checkbox"/> Gently Sloping <input type="checkbox"/> Moderately Sloping <input type="checkbox"/> Strongly Sloping <input type="checkbox"/> Steep <input type="checkbox"/> Very Steep	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
E. Erosion Hazard <input type="checkbox"/> None / Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/> Very Severe	Slight Moderate Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
F. Surface Runoff <input type="checkbox"/> Very Slow <input type="checkbox"/> Slow <input type="checkbox"/> Moderate <input type="checkbox"/> Rapid	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
G. Shrink - Swell <input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High	Slight Moderate Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H. Water Table <input type="checkbox"/> Deep <input type="checkbox"/> Moderately Deep <input type="checkbox"/> Shallow	Slight Moderate Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
I. Flooding <input type="checkbox"/> None <input type="checkbox"/> Occasional <input type="checkbox"/> Frequent	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Final Evaluation All factors slight One or more factors moderate, none severe One or more factors severe, none very severe One or more factors very severe	Slight Moderate Severe Very Severe	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

SCORE PART 1 _____
(Possible 36)

SCORE PART 2 _____
(Possible 76 for each use)

PARTS 1 AND 2--TOTAL SCORE _____
(Possible 112)