



Commonwealth of Massachusetts

City/Town of

Form 11 - Soil Suitability Assessment for On-Site Sewage Disposal

A. Facility Information

Owner Name

Street Address

Map/Lot #

City

State

Zip Code

B. Site Information

1. (Check one) [ ] New Construction [ ] Upgrade [ ] Repair

2. Published Soil Survey Available? [ ] Yes [ ] No If yes: Year Published Publication Scale Soil Map Unit

Soil Name

Soil Limitations

3. Surficial Geological Report Available? [ ] Yes [ ] No If yes: Year Published Publication Scale Map Unit

Geologic Material

Landform

4. Flood Rate Insurance Map

Above the 500-year flood boundary? [ ] Yes [ ] No Within the 100-year flood boundary? [ ] Yes [ ] No

Within the 500-year flood boundary? [ ] Yes [ ] No Within a velocity zone? [ ] Yes [ ] No

5. Wetland Area: National Wetland Inventory Map Map Unit Name

Wetlands Conservancy Program Map Map Unit Name

6. Current Water Resource Conditions (USGS): Month/Year Range: [ ] Above Normal [ ] Normal [ ] Below Normal

7. Other references reviewed:



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C. On-Site Review (minimum of two holes required at every proposed primary and reserved disposal area)

Deep Observation Hole Number: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Weather \_\_\_\_\_

1. Location

Ground Elevation at Surface of Hole: \_\_\_\_\_ Location (identify on plan): \_\_\_\_\_

2. Land Use (e.g., woodland, agricultural field, vacant lot, etc.) \_\_\_\_\_ Surface Stones \_\_\_\_\_ Slope (%) \_\_\_\_\_

Vegetation \_\_\_\_\_ Landform \_\_\_\_\_ Position on Landscape (attach sheet) \_\_\_\_\_

3. Distances from: Open Water Body \_\_\_\_\_ feet Drainage Way \_\_\_\_\_ feet Possible Wet Area \_\_\_\_\_ feet

Property Line \_\_\_\_\_ feet Drinking Water Well \_\_\_\_\_ feet Other \_\_\_\_\_ feet

4. Parent Material: \_\_\_\_\_ Unsuitable Materials Present:  Yes  No

If Yes:  Disturbed Soil  Fill Material  Impervious Layer(s)  Weathered/Fractured Rock  Bedrock

5. Groundwater Observed:  Yes  No If yes: Depth Weeping from Pit \_\_\_\_\_ Depth Standing Water in Hole \_\_\_\_\_

Estimated Depth to High Groundwater: \_\_\_\_\_ inches \_\_\_\_\_ elevation



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C. On-Site Review (continued)

Deep Observation Hole Number: \_\_\_\_\_

Depth (in.)	Soil Horizon/ Layer	Soil Matrix: Color- Moist (Munsell)	Redoximorphic Features (mottles)			Soil Texture (USDA)	Coarse Fragments % by Volume		Soil Structure	Soil Consistence (Moist)	Other
			Depth	Color	Percent		Gravel	Cobbles & Stones			

Additional Notes:

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C. On-Site Review (continued)

Deep Observation Hole Number: \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ Weather \_\_\_\_\_

1. Location

Ground Elevation at Surface of Hole: \_\_\_\_\_ Location (identify on plan): \_\_\_\_\_

2. Land Use \_\_\_\_\_ (e.g., woodland, agricultural field, vacant lot, etc.) Surface Stones \_\_\_\_\_ Slope (%) \_\_\_\_\_

Vegetation \_\_\_\_\_ Landform \_\_\_\_\_ Position on Landscape (attach sheet) \_\_\_\_\_

3. Distances from: Open Water Body \_\_\_\_\_ feet Drainage Way \_\_\_\_\_ feet Possible Wet Area \_\_\_\_\_ feet

Property Line \_\_\_\_\_ feet Drinking Water Well \_\_\_\_\_ feet Other \_\_\_\_\_ feet

4. Parent Material: \_\_\_\_\_ Unsuitable Materials Present:  Yes  No

If Yes:  Disturbed Soil  Fill Material  Impervious Layer(s)  Weathered/Fractured Rock  Bedrock

5. Groundwater Observed:  Yes  No If yes: Depth Weeping from Pit \_\_\_\_\_ Depth Standing Water in Hole \_\_\_\_\_

Estimated Depth to High Groundwater: \_\_\_\_\_ inches \_\_\_\_\_ elevation



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**C. On-Site Review** (continued)

Deep Observation Hole Number: \_\_\_\_\_

Depth (in.)	Soil Horizon/ Layer	Soil Matrix: Color- Moist (Munsell)	Redoximorphic Features (mottles)			Soil Texture (USDA)	Coarse Fragments % by Volume		Soil Structure	Soil Consistence (Moist)	Other
			Depth	Color	Percent		Gravel	Cobbles & Stones			

Additional Notes:

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D. Determination of High Groundwater Elevation

1. Method Used:

- Depth observed standing water in observation hole      A. \_\_\_\_\_ inches      B. \_\_\_\_\_ inches
- Depth weeping from side of observation hole      A. \_\_\_\_\_ inches      B. \_\_\_\_\_ inches
- Depth to soil redoximorphic features (mottles)      A. \_\_\_\_\_ inches      B. \_\_\_\_\_ inches
- Groundwater adjustment (USGS methodology)      A. \_\_\_\_\_ inches      B. \_\_\_\_\_ inches

2.

Index Well Number	Reading Date	Index Well Level
Adjustment Factor	Adjusted Groundwater Level	

E. Depth of Pervious Material

1. Depth of Naturally Occurring Pervious Material

a. Does at least four feet of naturally occurring pervious material exist in all areas observed throughout the area proposed for the soil absorption system?

- Yes       No

b. If yes, at what depth was it observed?      Upper boundary: \_\_\_\_\_ inches      Lower boundary: \_\_\_\_\_ inches



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**F. Certification**

I certify that I am currently approved by the Department of Environmental Protection pursuant to 310 CMR 15.017 to conduct soil evaluations and that the above analysis has been performed by me consistent with the required training, expertise and experience described in 310 CMR 15.017. I further certify that the results of my soil evaluation, as indicated in the attached Soil Evaluation Form, are accurate and in accordance with 310 CMR 15.100 through 15.107.

\_\_\_\_\_  
Signature of Soil Evaluator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name of Soil Evaluator / License #

\_\_\_\_\_  
Date of Soil Evaluator Exam

\_\_\_\_\_  
Name of Board of Health Witness

\_\_\_\_\_  
Board of Health

**Note:** In accordance with 310 CMR 15.018(2) this form must be submitted to the approving authority within 60 days of the date of field testing, and to the designer and the property owner with [Percolation Test Form 12](#).



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## **Field Diagrams**

Use this sheet for field diagrams: