



**THE PROPERTY LINES
SHOWN ARE APPROXIMATED
FROM A VERY OLD SURVEY
PLAT. NO CORNER PINS
WERE LOCATED.**

DALLY CREEK ROAD

Additional Comments and Notes

Code A: (should work)

SUITABILITY CODE: Soil series should have ability to function as suitable absorption field with proper design, installation, and maintenance.

Code I: (variable rock depth)

SUITABILITY CODE: Depth to bedrock is generally not sufficient to accommodate a septic system. However, soils with bedrock depths 36" or greater or inclusions of other soils with sufficient depth may be suitable; Test borings, pits, and possibly percolation tests may be needed to determine this. These areas should have the ability to function for drip-emitter systems.

*Cut and/or fill of acceptable soils voids this report.

*Boundaries and borings are located from ground measurements taken from readings by a Trimble PRO XRS GPS and slope readings are from a Suunto Clinometer. Holes are marked by survey ribbon or wire flags.

*Please note that all findings reported are based on professional opinion and do not imply approval or disapproval for permitting. Decisions and permitting is the responsibility of the local environmental health department.

*Due to the variances in natural soil conditions and effects of uncontrolled construction practices, a positive report does not guarantee the future performance of septic system.

Riverbend Soil Consulting, Inc.

P.O. Box 2879
Rome, GA 30164-2879
Phone (706) 234-9444
FAX (706) 291-2914

Soil Analysis Report

Client: Jason Kimmerling Phone #: _____
Client Address: 720 Plainville Road SW Plainville, GA 30733 Cell/Pager #: _____
Site Location: Dally Cove Road County: Gordon
Level of Study: 3 (1-Reconnaissance, 2-Preliminary, 3-High Intensity, 3a-Special Study) Job Number: 5148

SERIES DESCRIPTIONS

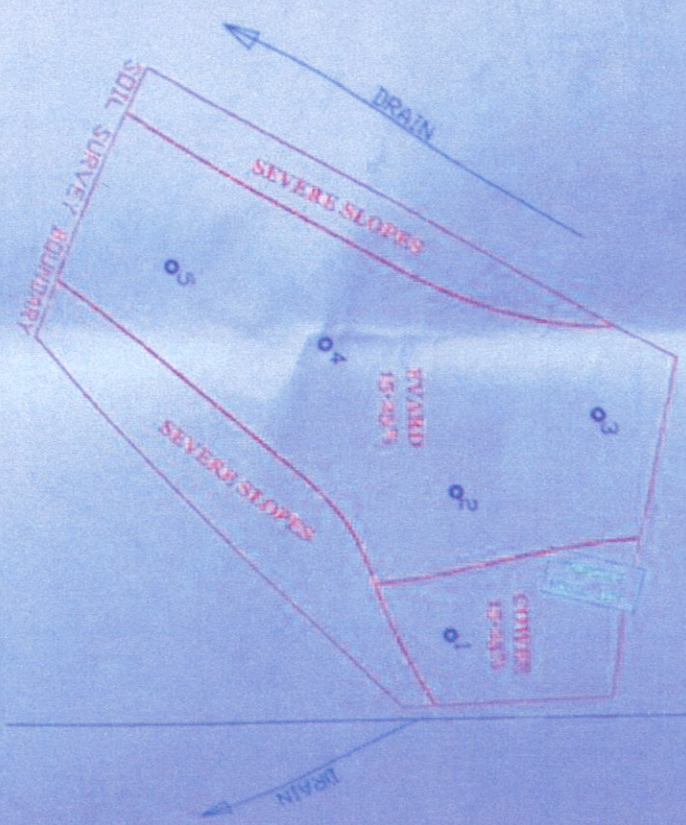
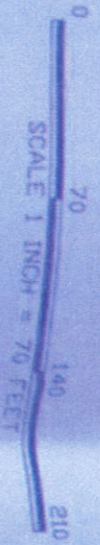
Date Evaluated: July 10, 2017

Test Hole Number	#1	#2	#3	#4	#5	#6
Series Name	Cowee	Evard	Evard	Evard	Evard	
Slope (Percent)	25%	18%	22%	19%	20%	
Bedrock Depth (inches)	28"	49"	48"	>60"	>60"	
Seasonal High Water Table	>28"	>49"	>48"	>60"	>60"	
Suitability Code	I	A	A	A	A	
Estimated Percolation Rate	N/A	60	60	60	60	
Optimum Percolation Depth	8" drip	24"	24"	24-36"	24-36"	
Hydraulic Loading Rate	0.15					

Additional Comments: _____

Soil Classifier: _____
[Signature]





LEVEL 3 SOILS ANALYSIS FOR:
 JASON KIMMERLING
 SINGLE HOME ON 14 ACRES
 DAILY COVE ROAD
 GORDON COUNTY, GA
 07-10-17
 JOB# 5148



RIVERBEND SOIL CONSULTING
 P.O. BOX 2879
 ROME, GA 30164-2879
 706-234-9444

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/04/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES ISSUED BY THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

INSURER
Riverbond Soil Consulting, Inc.
1850 Redmond Circle, Ste 800
Rome, GA 30165

CONTACT NAME: Marshall Irwin
PHONE: 706-295-3711
FAX: 706-802-0024
EMAIL: mirwin@comcast.net
ADDRESS:

INSURER AFFORDING COVERAGE
INSURER A: Continental Casualty Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:
INSURER F:

INSURED
Riverbond Soil Consulting, Inc.
P O BOX 2879
ROME, GA 301642879

COVERAGES: _____ CERTIFICATE NUMBER: _____ REVISION NUMBER: _____

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

LINE	TYPE OF INSURANCE	ACORD SUBR (2015-2012)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE: <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Professional Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> INC <input type="checkbox"/> LOC	X	EEH254081859	10/10/16	10/10/17	EACH OCCURRENCE \$ 100000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 50000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 5000000 PRODUCTS - COMPOD AGG \$ 1000000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> UMBRELLA LINE <input type="checkbox"/> EXCESS LINE SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS OCCUR CLAIMS MADE N/A					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER
GA Dept of Public Health
Two Peachtree St SW
13th Floor
Atlanta, GA 30303

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE
Marshall Irwin