SCANNED

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☐ Municipal Code 24.38 ☐ County Resolution Number 283206

HS000036

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☒ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 11 Range 5 Section 11 1/4 Section SW
   Block _____ Lot 19 Addition _____
   Parcel ID 05-11-300-005-000 (i.e. 99-99-999-999-999)
   Street Address 8300 W. Waverly rd. Malcolm, NE 68402

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System** ☐ septic tank ☒ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** replace lagoon line, house to lagoon, sludge out lagoon

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jakowlek, Raymond Contracting, Inc

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Jerry Kidder Address 8300 W Waverly rd Malcolm, NE 68402 Phone 402-796-2561
Applicant Signature (owner or lessee) Jerry Kidder

Please include the permit fee (~~$100~~ $160) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 11/01/07 REVIEW: ☒ Approved ☐ Disapproved By: Doug Simon

Site visits
Date 11/01/07 By D.S.
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 11/01/07 By Doug Simon

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 11/06/07 Amount 170.00 Check No. 6576 Initials LS

White - Division Copy Pink - Business Office Revised 9/00

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, NE 68510-1514

ON-SITE WASTE WATER SYSTEM
REPAIR PERMIT

No. HS000036

System Type: STANDARD

Situs: 8300 W WAVERLY RD-MALCOLM

Legal Description: T11N-R05E-S11-SW-Lot: 19

Owner: RIDDER, JERRY & MARGARET A
8300 W WAVERLY RD
MALCOLM NE
68402

Permit Fee:	$170.00
Total Fees:	$170.00
Issued:	11/06/2007
Expires	11/05/2008

Bruce D. Dart, PhD, Health Director

Dear Water Well Permit Holder:

The above document is your permit to repair an existing On-site Waste Water System at the location listed. Please contact this office once repairs are complete to obtain final approval before use.

Bruce D. Dart, PhD
Health Director

LLCHD HS000036

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☐ Municipal Code 24.38 ☐ County Resolution Number 283

HS000036

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☒ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 11 Range 5 Section 11 1/4 Section SW
   Block ____ Lot 19 Addition ____
   Parcel ID 05 - 11 - 300 - 005 - 000 (i.e. 99-99-999-999-999)
   Street Address 8300 W. Waverly Rd. Malcolm, NE 68402

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

3. **Type of Present Individual Disposal System** ☐ septic tank ☒ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** replace lagoon line, house to lagoon, sludge out lagoon

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jirkovsky, Raymond Contracting, Inc

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Jerry Ridder Address 8300 W Waverly Rd Malcolm, NE 68402 Phone 402-796-2561
Applicant Signature (owner or lessee) Jerry Ridder

Please include the permit fee (~~$100~~ $160) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 11/01/07 REVIEW: ☒ Approved ☐ Disapproved By: Doug Ahrens

Site visits
Date 11/01/07 By D.L.
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 11/01/07 By Doug Ahrens

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: ____/____/____ Amount ____ Check No. ____ Initials ____

White - Division Copy Pink - Business Office Revised 9/00

11-6-2007 11:53: 4

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Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number: H 5000036

Sewage Disposal System

As Built Plans & Specifications

Date 11/1/07

Ridder

System Location (Indicate correct number and street)

Address 8300 W Waverly Rd (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: SDR 26
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16" in.
3. Distance between dwelling and septic tank: 1HH ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 50+ ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

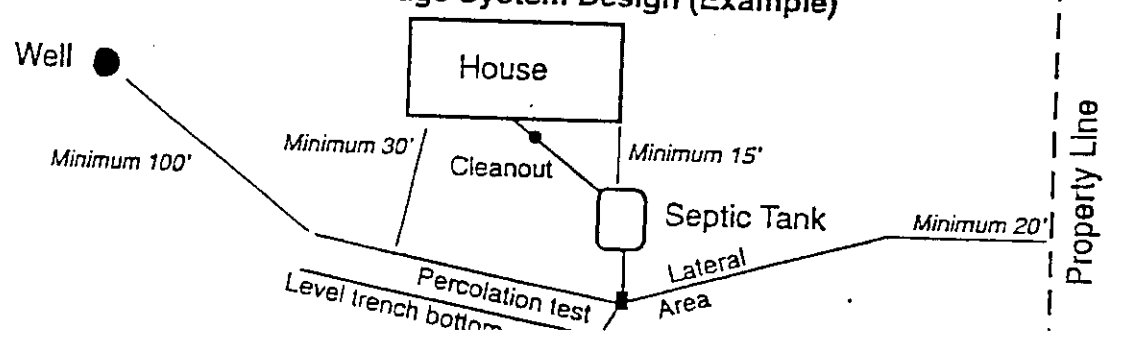
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

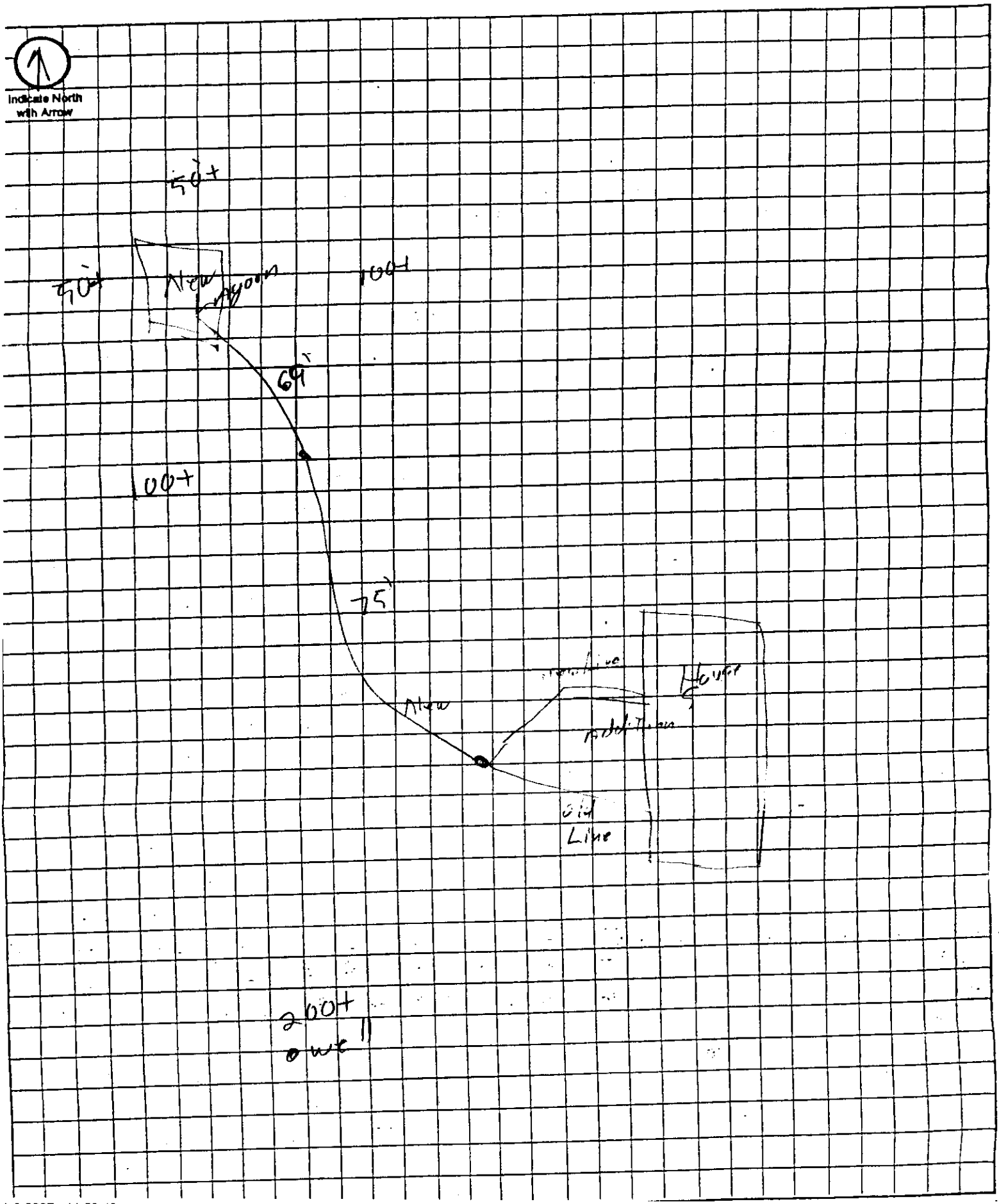
Indicate North with Arrow

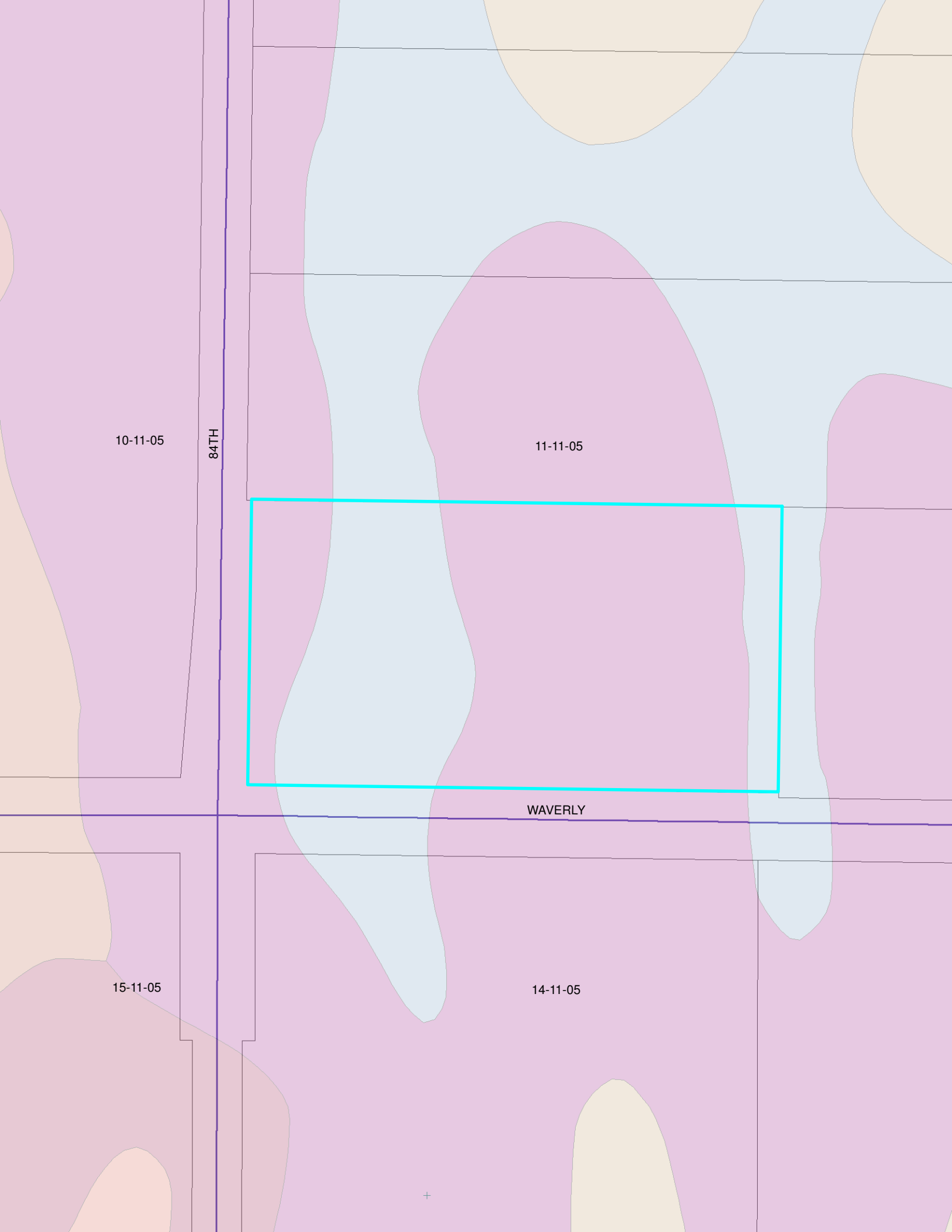
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



As Built Drawing




10-11-05
84TH
11-11-05
WAVERLY
15-11-05
14-11-05