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

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT

No. HS000076

System Type: LAGOON

Situs: 2620 Krauter Place

Legal Description: T08N-R07E-S19-Lot 8

Owner:

Permit Fee:	$305.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$305.00

Issued: 03/26/2008
Expires: 03/26/2009

Bruce D. Dart, PhD, Health Director

On-site Waste System Permit Holder:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Bruce D. Dart, PhD
Health Director

WELLMAN PLUMBING
3130 S 6TH ST
LINCOLN NE 68502

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

A

Permit Number: HS000076

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☐ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 2620 Krauter Place (no rural route) City Roca. NE, Zip 68430

Legal Description 19 8 7 Whitetail Ridge 8
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude 40° 38.937' N Latitude W 96° 40.781'

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Jason Kennedy Signature

Address 7648 S 37th. City/State/Zip Lincoln 68516

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name Kelly Wolinski Company Name Wellmann Plbg. Inc.

Address 3130 S 6th. #100 City/State/Zip Lincoln Ne. 68502

☒ Check if contractor designed system Work Phone 402-434-2400

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name Firm Work Phone

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub (YES) NO

☐ Commercial Establishment/Other Facility Specify

Design flow in gallons per day 500 Type of Wastewater: ☒ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 2832

1. **Health Department**	Date rec'd	**ACTION** ☐ Approved	☐ Disapproved
	Date frwd	Signature	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd	**ACTION** ☐ Approved	☐ Disapproved
	Date frwd	Signature	
3. **City or County Engineer**	Date rec'd 03/25/2008	**ACTION** ☒ Approved	☐ Disapproved
	Date frwd	Signature	

Installation Final Written Approval

By

Date

Business Office Use Only

Date Rec'd 3/24/08 cc

Amt Paid 305

Rec'd By Cash/Check No. 4474

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

B

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

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2620 Kranter Place (no rural route) City Roca NE, Zip 68430

Owner Jason Kennedy Addresss 7649 S 37th.

Soil Type (SCS): 7466 or 7666 mayberry or Otoe Percolation Rate: 22.97 min./inch

Date of Tests 3-18-08 to 3-19-08 Weather: Precipitation None Temperature 55°

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	3'	3-18-08		3-19-08		3-19-08	8:30		3-19-08	12:30	30	6 1/4	4.8
2												1 3/4	17.14
3												1/2	60
4												1	30
5												2 3/4	10.90
6												2	15

Sum of Percolation Rates: 137.04

Average of Rates: 22.97

Rate Used for Calculation: ~~23~~ Variation in rate 60 used

Person Conducting Percolation Tests

Name: Kelly Wolinski

Phone: 434-2700

Address: 3120 S 56th. #132 Lincoln, Ne. 68506

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks: Most likely in the Mayberry soil. Will perc high (fast) but watch for groundwater. Must use much bentonite if lagoon is installed

Signature of Reviewing Official: [signature] Date 3/25/08

FORM 23-101 10-96

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

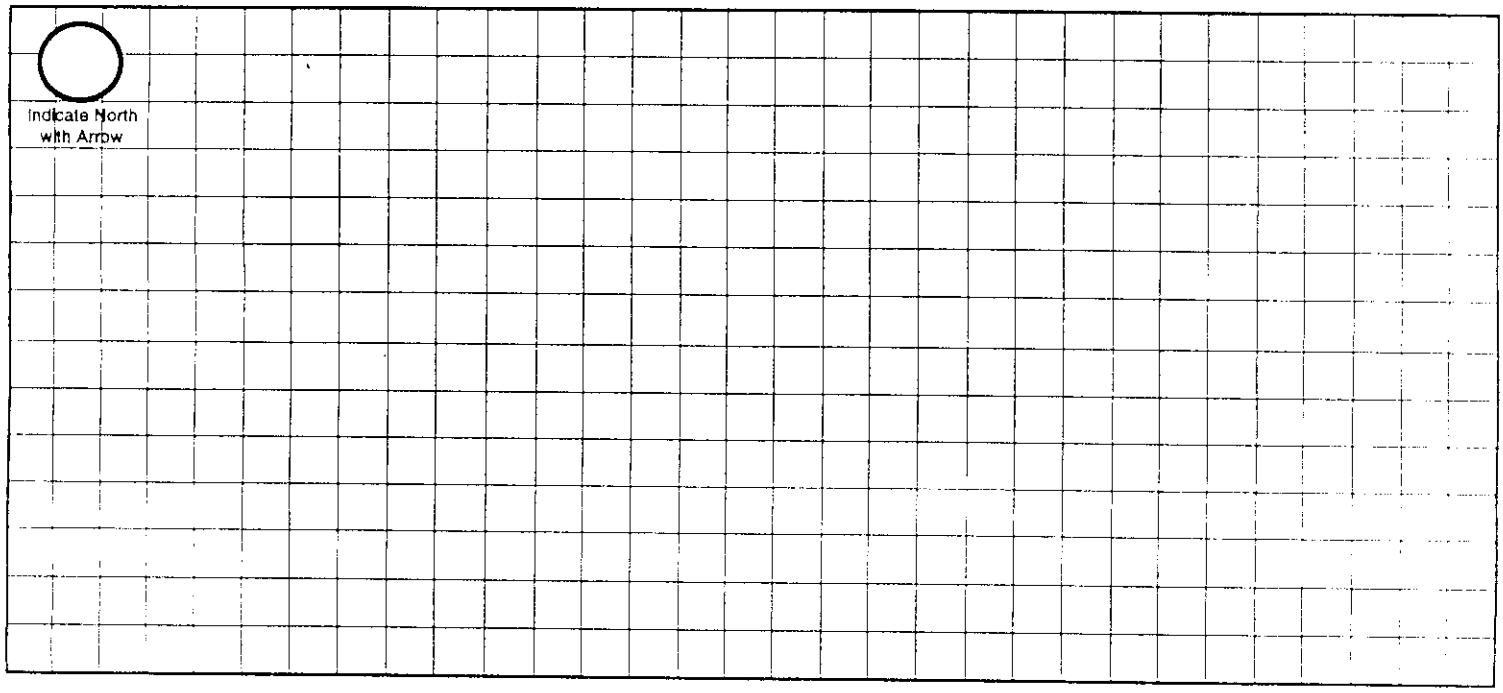
C

Permit Number:

Sewage Disposal System

Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 2620 Krauter Place City Roca NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 23 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: ~~7000~~ sq. ft. 1400

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: Gravelless infiltrator

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 250 ft. Number of Trenches 3 Trench Width _____

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

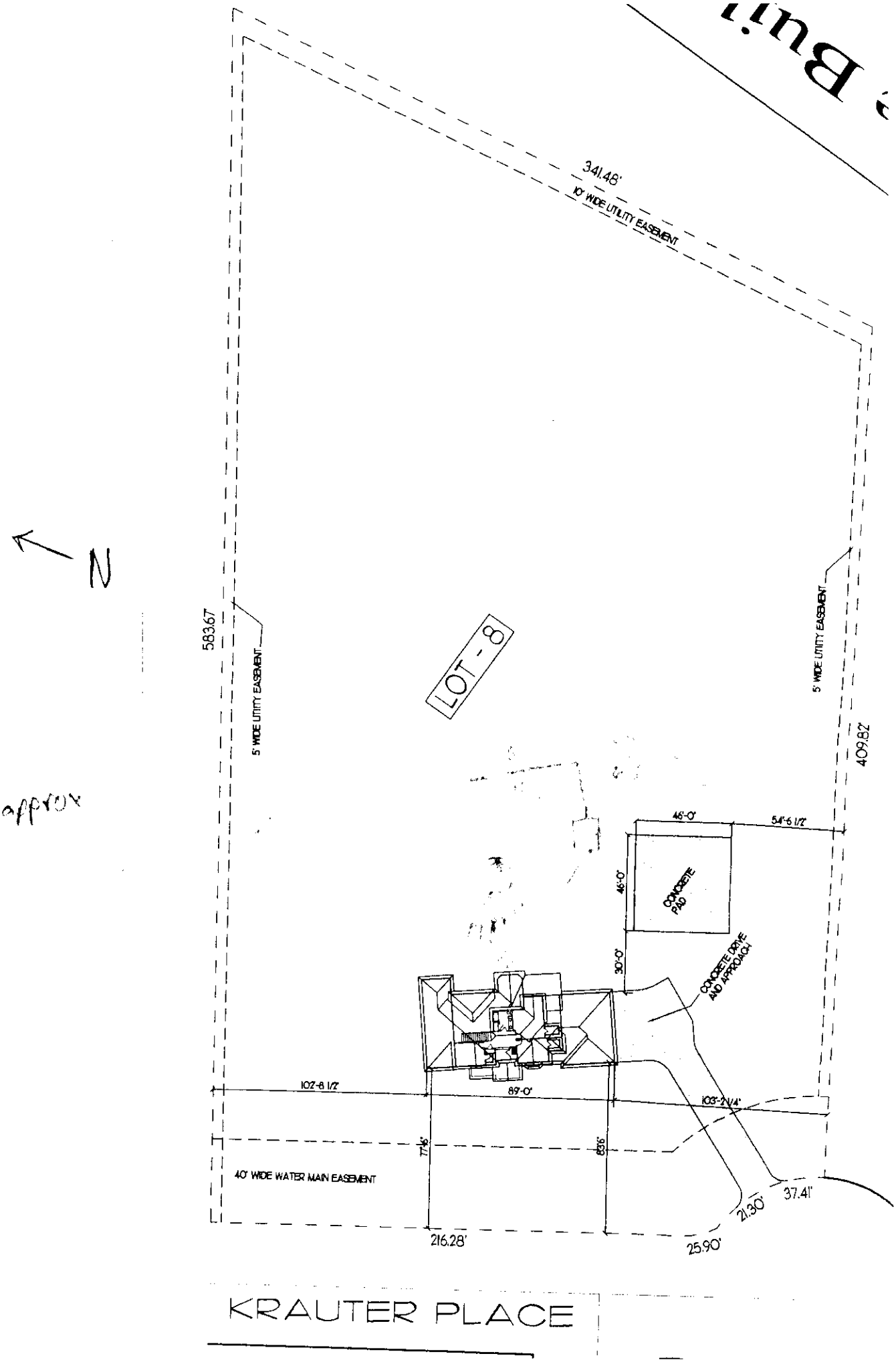
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☑	50 ☑	NA ☑	25 ☑	20 ☑	15 ☑	25 ☑	☑
Field (ft)	100 ☐	500 ☑	50 ☑	4 ☑	30 ☑	20 ☑	30 ☑	40 ☑	☑
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

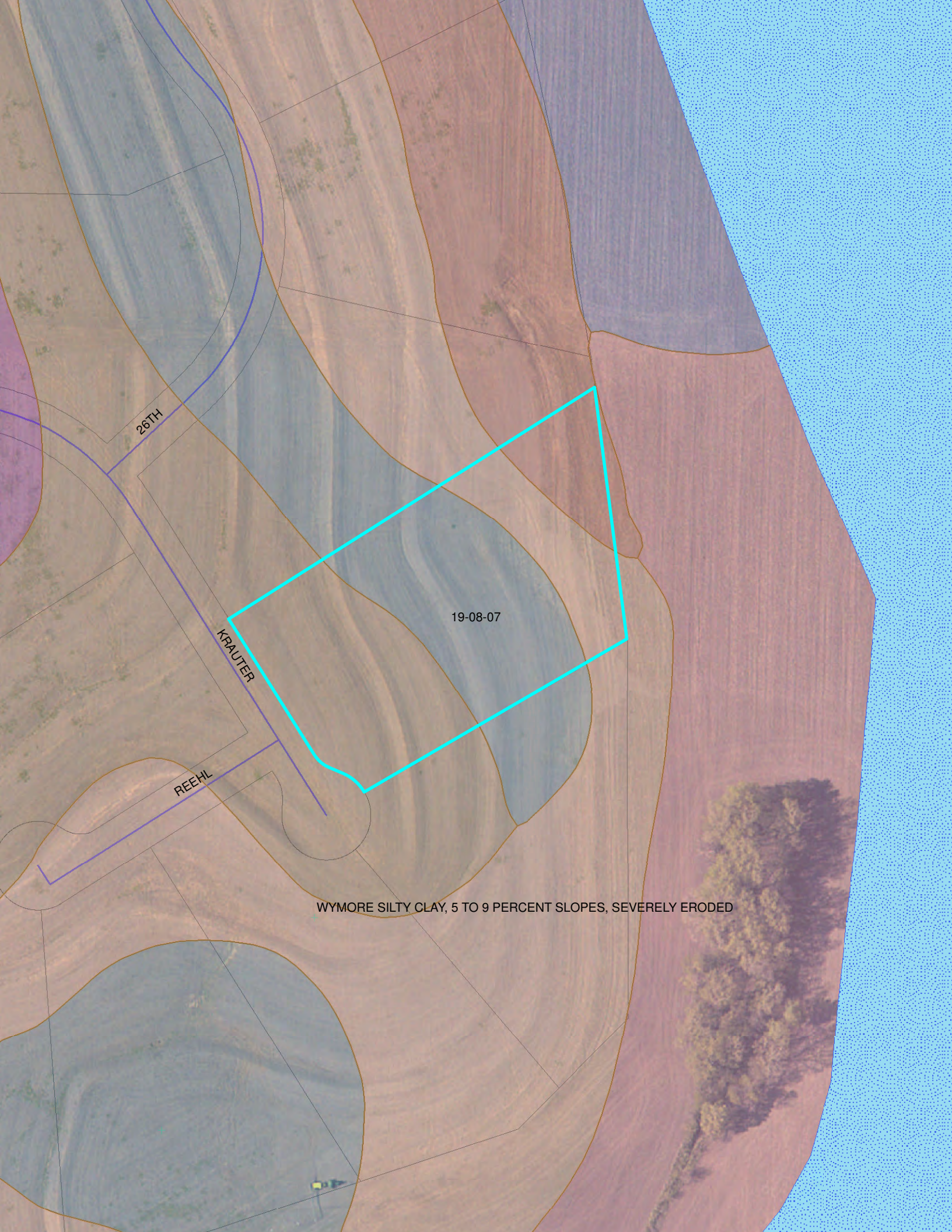
Home Building Contractor _____ Date _____

Installer _____ Date _____

LLCHD HS000076



3-26-2008 9:39:50


26TH
KRAUTER
REEHL
19-08-07
WYMORE SILTY CLAY, 5 TO 9 PERCENT SLOPES, SEVERELY ERODED