Lincoln-Lancaster County
Health Department
3140 "N" Street
Lincoln, NE 68510-1514

RETURN SERVICE REQUESTED

CITY OF LINCOLN
NEBRASKA
MAYOR CHRIS BEUTLER
lincoln.ne.gov

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FIRTH NE 68358-6298

RETURN TO SENDER

68510C1514

LLCHD HS000172

10-21-2008 11:41:51

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. HS000172

System Type:	STANDARD
Situs:	11900 W HOLDREGE ST RUR
Legal Description:	T10N-R05E-S17
Owner:	GRIFFIN, ROBERT L & KAREN 11900 W HOLDREGE ST LINCOLN NE 68508

Permit Fee:	$315.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$315.00
Issued:	10/14/2008
Expires:	10/14/2009

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

CASEMENT TRENCHING
106 CONCORD AVE
HICKMAN NE 68372

LLCHD HS000172

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

SCANNED **A**

Permit Number HS000172

Onsite Wastewater Treatment System Request for Site Clearance and Permit

Include Form B and C. Submit correct fee with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 11900 W Holdrege (no rural route) City Lincoln, NE Zip 68508

Legal Description 17 10 S 15

1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Longitude: Latitude:

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

B. Owner

Name Robert L. Griffin Signature Robert L. Griffin

Address 11900 West Holdrege City/State/Zip Lincoln, Nebr, 68528

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name: Company Name

Address City/State/Zip

☐ Check if contractor designed system Work Phone

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

Designer Name [signature] Firm Casement Treadway Work Phone 432-2880

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department
Site visits
Date rec'd 10/13/08
Date frwd 10/13/08
ACTION ☒ Approved ☐ Disapproved
Signature [signature]

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Business Office Use Only
Date Received 10-14-08 Amount Paid 315 00
Received By [signature] Cash/Check No. 1443

Installation Final Written Approval
By [signature]
Date 10/13/08

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 5-07

10-15-2008 9:28:51

LLCHD HS000172

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

D

Permit Number: HS000172

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date _____ Legal Description _____ 1/4 _____ 1/4 S. 17 Section R5 Township T10 Range

Onsite System Location

Address (no rural route) 11900 W Holdrege City Lincoln NE, Zip 68504

Owner Robert Griffin Address 11900 W Holdrege

A. Sewer Pipe

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

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1050 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24" in.
   Over outlet, diameter — in.
   Riser: ☑ above ☐ below grade 6" in.
5. Inlet: ☐ baffle ☐ tee ☐ 6" dia. inspection pipe
6. *Outlet:* ☐ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: 6" in.
8. Distances to: Well or suction line — ft.
   Stream — ft.
   Pressure line — ft.
   Property line — ft.

C. ☐ Distribution Box ☐ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 20 ft.

D. Drainfield Absorption

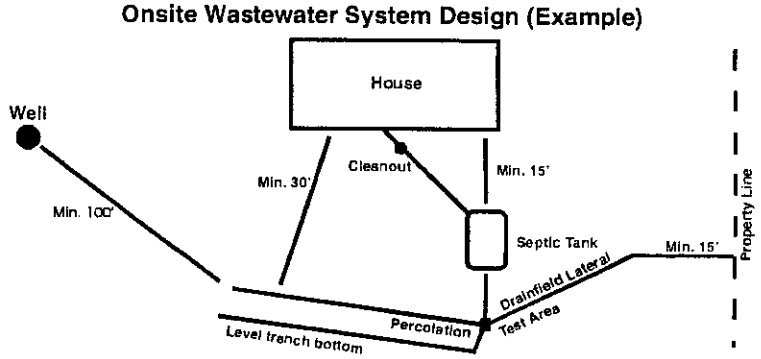
☑ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 2
   Length of each line: 116 ft. 128 ft.
   _____ ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width _____ ft.
   Distribution Pipe Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material 34 in.
5. Distances to: Well or suction line _____ ft.
   Pressure line — ft.
   Property line — ft.
   House or building — ft.
   Lake or Stream — ft.

Complete As-Built drawing on the back fo this form.

Indicate North with Arrow

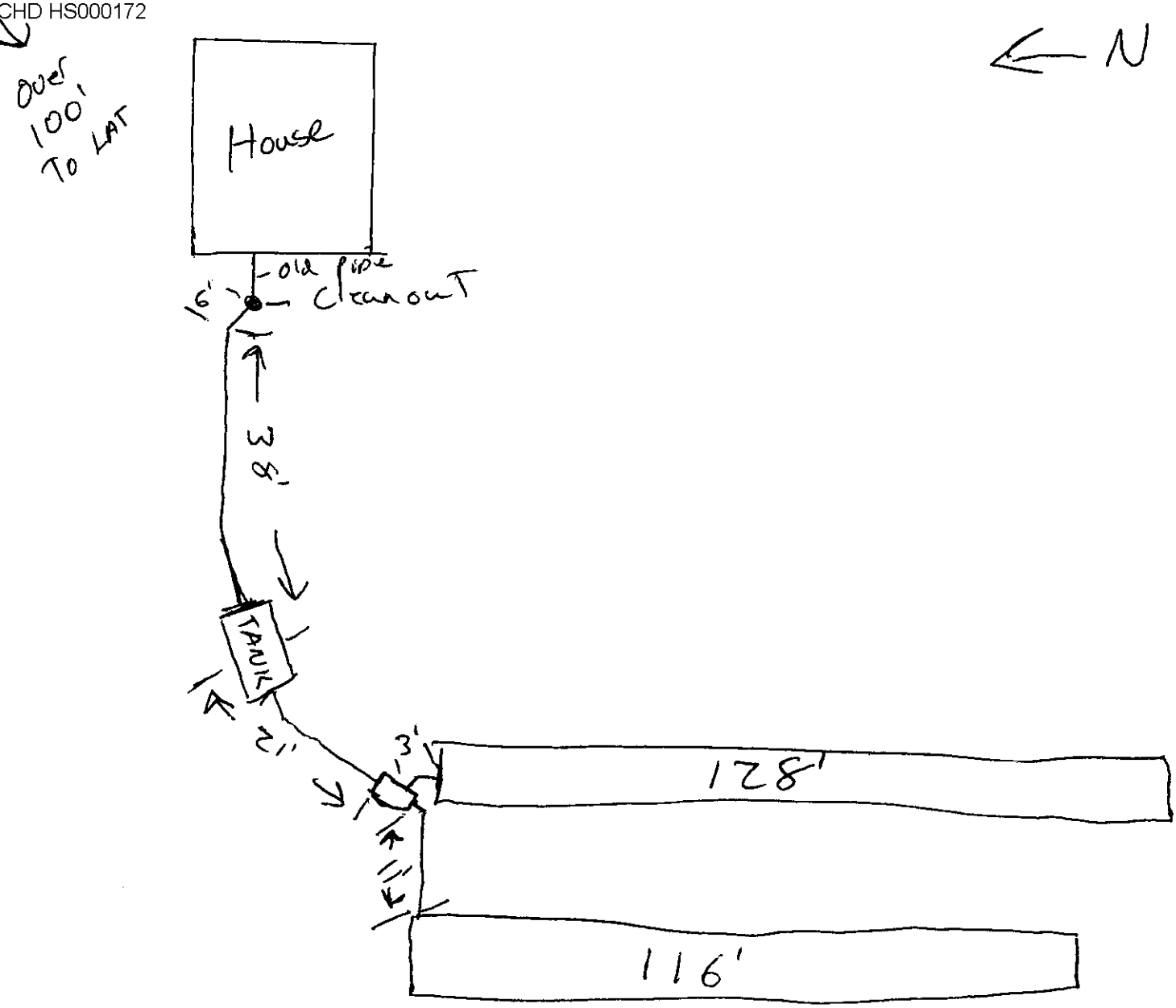
Onsite Wastewater System Design (Example)



Onsite Form D 12_06

10-14-2008 10: 0: 8

LLCHD HS000172



Added as much Lat as I could. At owner request. old Lat was Appx 200' of 4" perf in a 2' Ditch ran New lat Between old Lat and Did NOT Hook up old lats

10-14-2008 10: 0: 9

LLCHD HS000172

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

A

Permit Number
HS000172

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Name Robert L. Griffin Signature Robert L. Griffin

Address 11900 West Holdrege City/State/Zip Lincoln, Nebr, 68528

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name: _____ Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name [illegible] Firm Casement Trenchless Work Phone 432-2880

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Date frwd 10/13/08
ACTION ☐ Approved ☐ Disapproved
Signature [signature]

2. Supt. Bldg. Insp. or Village Clerk
Comments _____
Date rec'd _____
Date frwd _____
ACTION ☐ Approved ☐ Disapproved
Signature _____

3. City or County Engineer
Comments _____
Date rec'd _____
Date frwd _____
ACTION ☐ Approved ☐ Disapproved
Signature _____

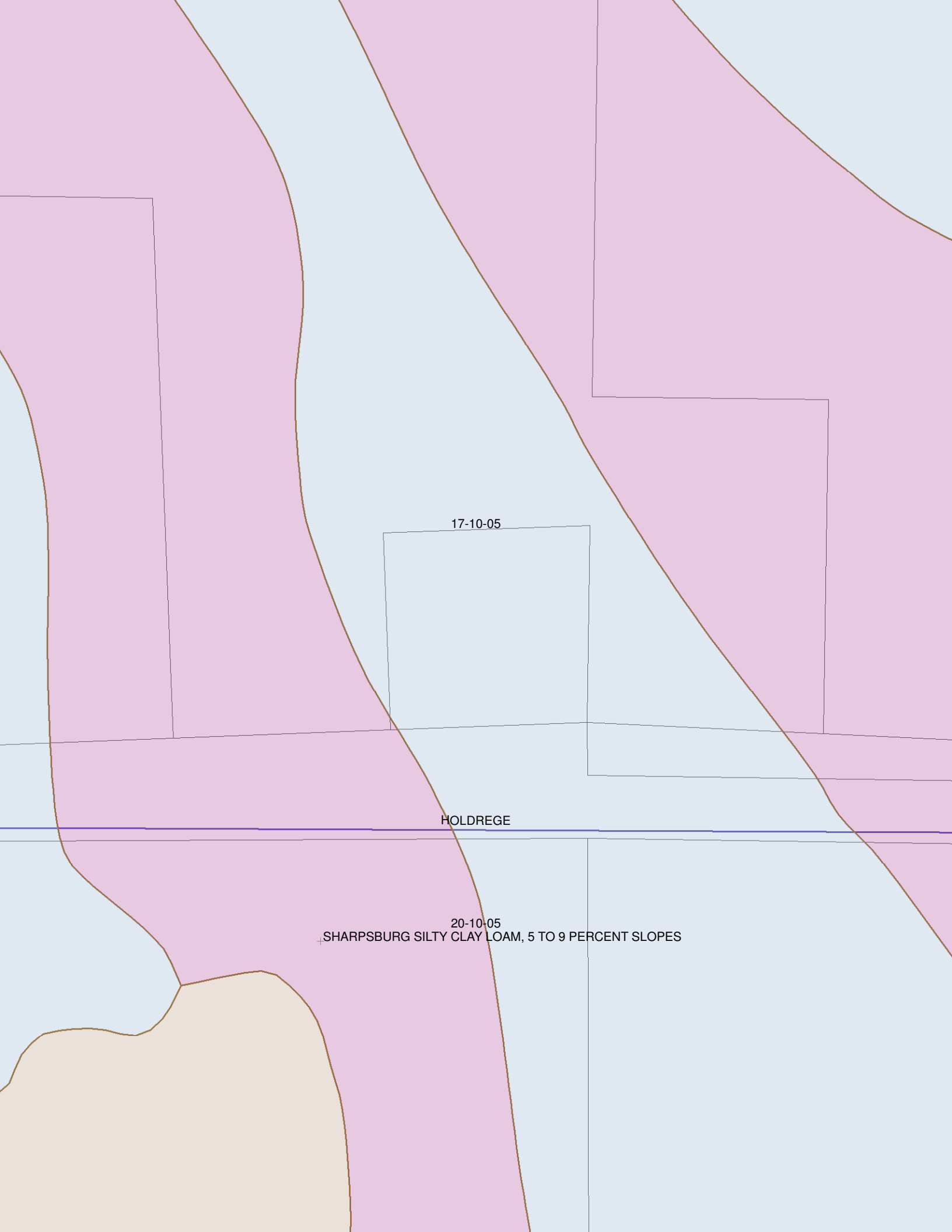
Installation Final Written Approval
By [signature]
Date 10/13/08

Business Office Use Only
Date Received _____ Amount Paid _____
Received By _____ Cash/Check No. _____

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 5-07

10-14-2008 9:56:56


17-10-05
HOLDREGE
20-10-05
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES