LLCHD HS000196

SCANNED

HS000196

JAN 23 2009

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☑ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township____ Range____ 1/4____ 1/4____ Section ____
   Block____ Lot____ Addition____
   Parcel ID____-____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 6305 Agnew Road

2. **Property use:** ☑ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe____

3. **Type of Present Individual Disposal System** ☑ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** INSTALLed 2 – 100FT LATERALS ~ 5' wide by 100FT LONG EACH INSTALLed NEW PLASTIC distribution box & NEW Sch 40 PVC PIPE out of TANK

5. **Work to be done by:** ☐ owner ☑ contractor's name LOFTUS Septic - C1155

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 permit is required if the use, operation, location, or type of system is changed.

owner
Print Name GARY SHERMAN Address 6305 Agnew Rd Phone: 402-890-8945

Applicant Signature (owner or lessee) Carol J. Sherman

175.00

Please include the permit fee ($~~150~~) 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 1/26/09 REVIEW: ☑ Approved ☐ Disapproved By:

Site visits
Date __/__/__ By____
Date __/__/__ By____
Date __/__/__ By____

Installation final written approval
Date 1/26/09 By:

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

Business Office Use Only

Received: Date: 1/26/09 Amount $175.00 Check No. 8369 Initials dlf

White - Division Copy Pink - Business Office Revised 9-05

1-26-2009 13:57:30

LLCHD HS000196

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HEALTH DEPARTMENT USE ONLY

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Date ____/____/____ By_____
Date ____/____/____ By_____
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Installation final written approval
Date 1/26/09 By:

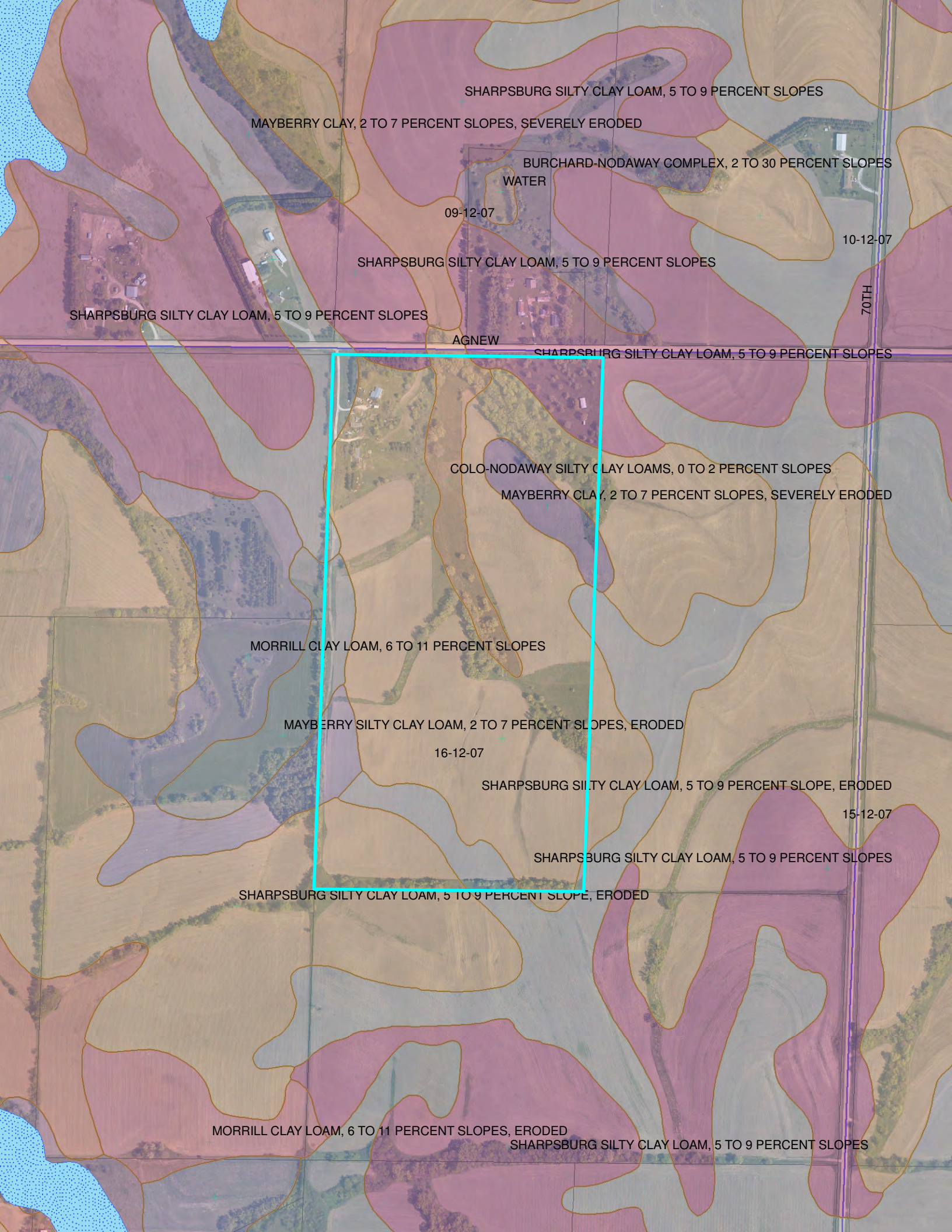
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Business Office Use Only

Received: Date:____/____/____ Amount_____ Check No. _____ Initials_____

White - Division Copy Pink - Business Office Revised 9-05

1-26-2009 13:40:45


SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
MAYBERRY CLAY, 2 TO 7 PERCENT SLOPES, SEVERELY ERODED
BURCHARD-NODAWAY COMPLEX, 2 TO 30 PERCENT SLOPES
WATER
09-12-07
10-12-07
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
70TH
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
AGNEW
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
COLO-NODAWAY SILTY CLAY LOAMS, 0 TO 2 PERCENT SLOPES
MAYBERRY CLAY, 2 TO 7 PERCENT SLOPES, SEVERELY ERODED
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
16-12-07
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
15-12-07
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐

County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 504-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: August 20, 1974

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 12 North ; Range 7 East; Section 16 - W½ of NE¼
   Block —; Lot —; Addition —
   Street Address RR #2 Ceresco, Nb.

2. Property Use: Residential Farm and ☒ ; Commercial ☐
   No. of Bedrooms 3. Describe:
   Other Use ☐
   Describe:

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: 3 Miles ~~ft.~~

Carol J Sherman
Signature of Applicant (Owner or Lessee)

1030 No. 48, Lot #1, Lincoln, Nb. 68504
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/21/74. Date Frwd. 8/22/74. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. 8/22/74. Date Frwd. ____. ACTION: Approved ☐ Disapproved ☐ Signature:
3. City or County Engineer: Date Rec'd. ____. Date Frwd. 8-22-74. ACTION: Approved ☒ Disapproved ☐ Signature: Walter Happe

REMARKS OR REASONS FOR DISAPPROVAL

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 504-C

DATE: August 29, 1974

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 12 North ; Range 7 East ; Section W½ of NE¼ 16 ; Block — ; Lot — ; Addition — .
Street Address RR #2 Ceresco .

2. Property Use: Residential Farm Home ☒ ; Commercial ☐
No. of Bedrooms 3
Describe:
Other Use
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Carol J. Sherman
Signature of Applicant (owner or lessee)

1030 No. 48, Lot # 1, Lincoln, Nb. 68504
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: March-7-75 by: rm
Date: by:
Date: by:

3. Date: Approved ☒ ; Disapproved ☐ 8/21/74
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: March-7-75 by: Ron Wagner

FORM HD- 43(73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 475-6221)

FILE NO. 504-C

PROPERTY WHERE SOIL TESTED:
Location: Township 12 North Range 7 East
Section & ¼ Sect. W½ of NE¼ of 16
Property Dimensions: ____ ft. x ____ ft.
Area: 80 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: Gary E & Carol J. Sherman
Address RR #2 Ceresco, NB

Dates of Tests: Aug 12 to Aug 13, 1974. Weather: Precip. None Temp. Moderate F

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	18	8/12	4⁰⁰ pm	8/12	10⁰⁰ pm	8/13	4⁰⁰ pm	6					
2	18	8/12	4⁰¹ pm	8/12	10⁰¹ pm	8/13	4⁰¹ pm	6					
3	18	8/12	4⁰² pm	8/12	10⁰² pm	8/13	4⁰²	6					
4	18	8/12	4⁰³ pm	8/12	10⁰³ pm	8/13	4⁰³	6					
5	18	8/12	4⁰⁴ pm	8/12	10⁰⁴ pm	8/13	4⁰⁴	6					
6	18	8/12	4⁰⁵ pm	8/12	10⁰⁵ pm	8/13	4⁰⁵	6					
7	18	8/12	4⁰⁶ pm	8/12	10⁰⁶ pm	8/13	4⁰⁶	6					
8	18	8/12	4⁰⁷ pm	8/12	10⁰⁷ pm	8/13	4⁰⁷	6					

Sum of Percolation Rates
Average of Rates:
Mean of Rates:

Carol J Sherman
Signature of Person Conducting Test

Address 1030 No. 48, Lot # 1 Lincoln, NB 68504
Phone: 464-3254

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

DATE: _____

Approved Percolation Rate(s)
A. 30 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
Signature of Reviewing Official

Perc Tests.

1st test. 6 Test Holes @ 8" diameter x 30" deep.

Hole # / Time →	6:30	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30
	start	½ hr	1 hr	1½ hr	2 hr	2½ hr	3 hr	3½ hr	4 hr
Water gone → per ½ hr. 1	Full	¼"	¼	None	None	None	None	¼"	none
2	Full	1½	¾	¾	1¼	½	1	¾	¾
Holes 30" deep 3	Full	3	1	1⅝	2	1¼	1¼	¾	1
2" gravel 4	Full	2½	¾	1¼	1½	1	1¼	1	1
5	Full	3½	1¼	1⅝	2	1¼	1¾	1½	1½
6	Full	3¼	1¼	1⅝	2⅛	1⅜	1½	1¼	1¼
Avg gone.		2⅓"	.81½"	1.145	1.479	.895	1.125	.91⅔	.91⅔

.625 = 5/8

2nd Set of holes 8 Test holes @ 8" diameter x 18" deep.

Amt of H2O Drop for 30" Intervals.

Hole #	4:00 Filled Holes 6"	4:30	5:00	5:30	6:00	6:30	7:00	7:30	8:00	8:30
1	S	1¾	1¼	1¼	1¼	1½	1¾ ~~1¼~~	1½	1½	1⅜
2	T	1½	¾	¾	⅝	⅝	⅝	½	½	⅜
3	A	1	½	½	⅝	⅝ ~~½~~	¾	⅝	½	¾
4	R	2	1¼	1½	1¾	1⅝	1⅝	1½ ~~1¾~~	1½	1⅝
5	T	1⅞	1¼	1	1	1	1⅝	1¼	1⅛	7/8
6	T	1¾	1⅜	1	1	1⅛	1⅜	1	1	1
7	EST	1	⅞	1	1	1	1¼	1	1	7/8
8	T	1½	1	1	1	1⅛ ~~2⅛~~	1¼	1	1⅛	1
	Avg drop per 30"	1.546" ~~1.421~~	1.031 ~~.718~~	1.000 ~~.875~~	1.031 ~~.906~~	1.078	1.281	1.046	1.031	.984 ~~.968~~

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 504-C

SPECIFICATIONS

DATE: _____

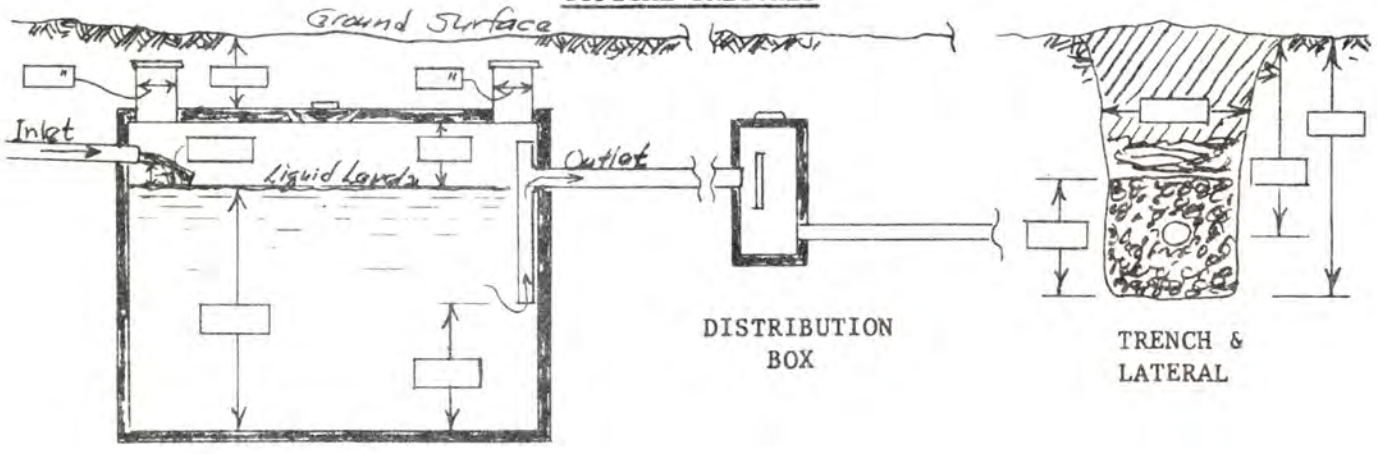
A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor ___ in.
3. Distance between dwelling and septic tank 53 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material CON; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company PRE-CAST STEP)
No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade ___ in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet ___ in.
7. Depth of top of tank below finished grade ___ in.
8. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line >20 ft.

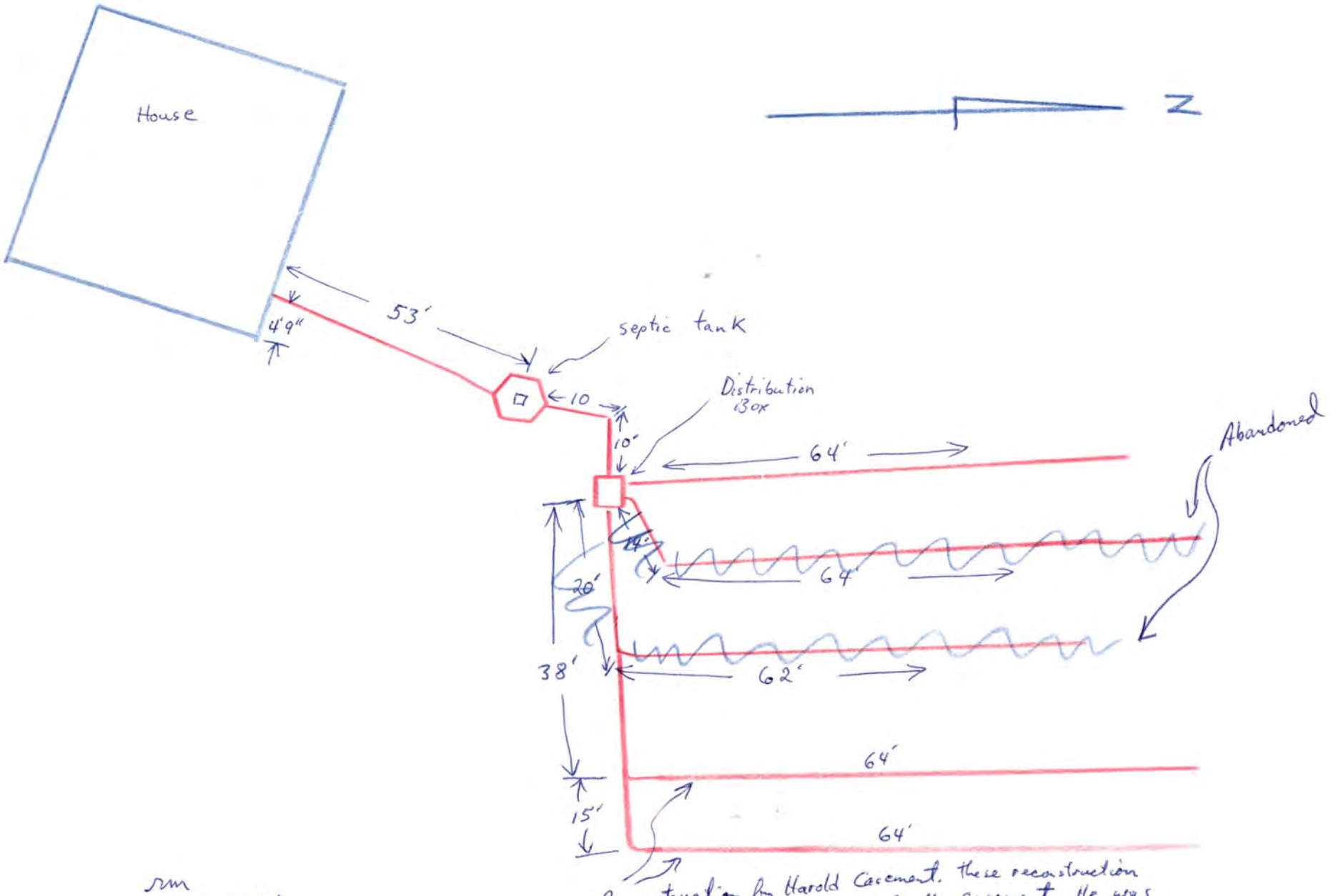
C. DISTRICTION BOX
1. Material CON; No. available outlets 5.
2. Factory Built: Yes ☒, (Company PRE-CAST STEP) No ☐
3. Dimension: Length ___ in.; Width ___ in. Depth ___ in.
4. Distance from Septic Tank ___ ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___ in.
Number 2; Length of each line 64 ft
Total length of Laterals 188 ft.; 64 62
Slope 4 in/100 ft. Diameter of pipe ___ in.; Shape O
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth ___ in.; Width 48 in.
4. Filter Material: GRAVEL.
Depth of material from trench bottom 20 in.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line >20 ft.
6. Percolation Rate: 30 minutes/inch

TYPICAL SKETCHES



Signature of Applicant



rm
March-7-75

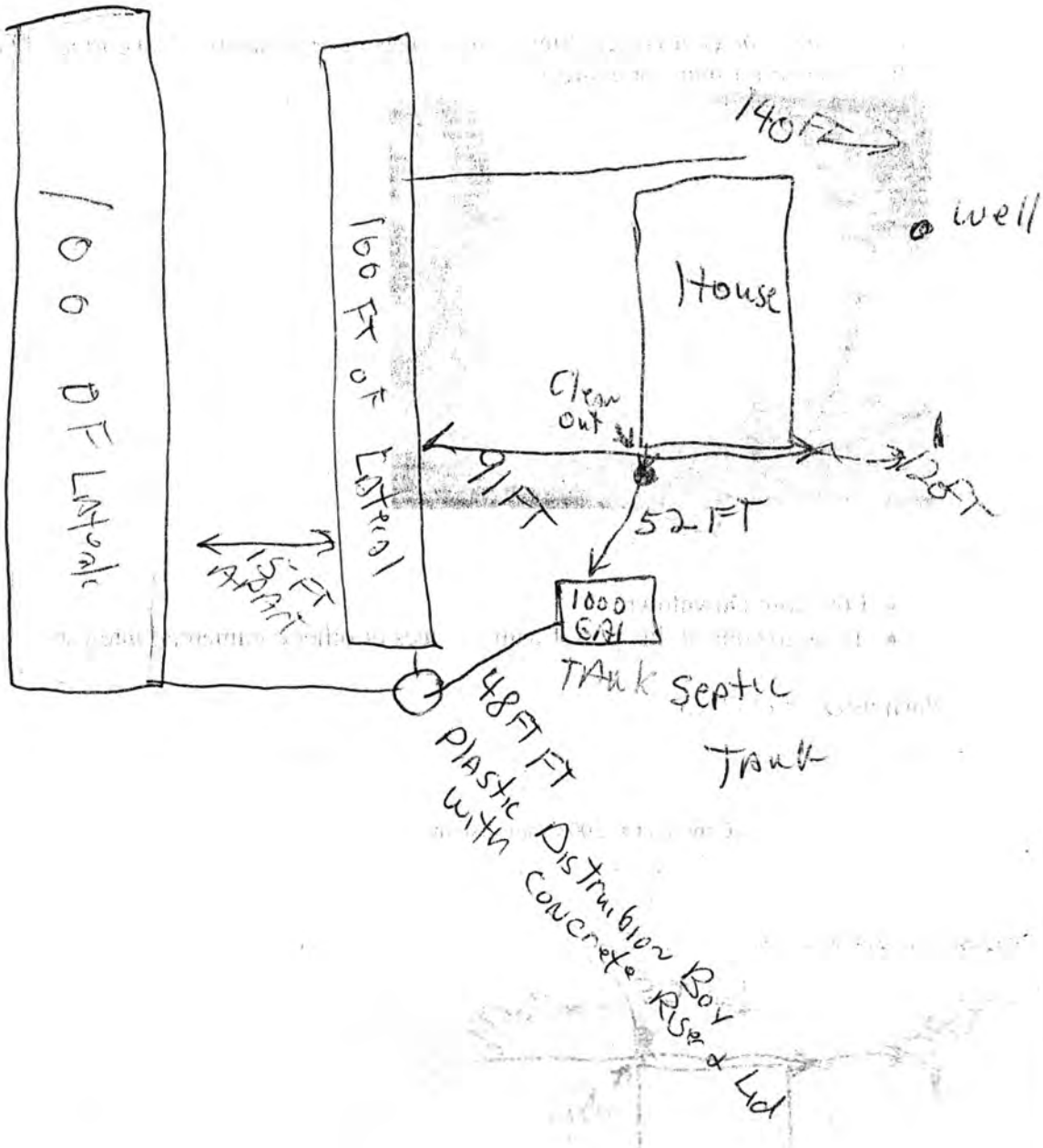
Reconstruction by Harold Casement. these reconstruction drawings were given to us by Mr. casement. He was unable to call for a final inspection due to raing weather. rm Dec-1-75

Loftus Septic Pumping & Const.
410 County Rd C
Ashland, NE 68003-6032

FEB 06 2009

Gary Sherman
6305 AG New Rd

For Lancaster Co
ATT: Nate



1/22/09

Rid repair inspection w/ Doug Loftus. Was able to locate well that services the home, but there is no feasable way to guarantee that all well setbacks were met. We have to assume that there are no wells in the vicinity (within 100 ft) as none were observed at the time of inspection. There were numerous outbuilding & dog house-type sheds w/ piles of scrap metal & debris spread about.

- No additional wells were observed.