LLCHD HS000258

AUG - 3 2009

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

❒ Municipal Code 24.38 ❒ County Resolution Number 02-30

HS000258

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 8N Range 6E 1/4 ____ 1/4 ____ Section 36
   Block ____ Lot 9 Addition ____
   Parcel ID ____-____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 1400 Stagecoach Rd Martell, Ne 68404

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** Extend Seepage Field w/100' of Infiltrator to replace 100' of crushed Fiberglass ½ round

5. **Work to be done by:** ❒ owner ☒ contractor's name Southwick Septic + Drain Brad Southwick

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.

Print Name Gayland McCown Address 1400 Stagecoach Rd. Phone: 792-2729

Applicant Signature (owner or lessee) ____

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

HEALTH DEPARTMENT USE ONLY

Date received 8/4/09 REVIEW: ☒ Approved ❒ Disapproved By: ____

Site visits
Date ____/____/____ By ____
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date ____/____/____ 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: 8/4/09 Amount 175.00 Check No. 1252 Initials AKV

White - Division Copy Pink - Business Office Revised 9-06

8-5-2009 11: 9:57

#1252 8/4/08 $175.00 ok

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

B

Permit Number: HS000258

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1400 Stagecoach Rd. (no rural route) City Martell NE, Zip 68404

Owner Gayland McCown Addresss

Soil Type (SCS): Percolation Rate: min./inch

Date of Tests 7/28 to 7/29/09 Weather: Precipitation Temperature

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/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	36							31			30	3/4	40
2	36							32 1/2				7/8	34
3	36							31 3/4				3/4	40

Sum of Percolation Rates: 114
Average of Rates: 38
Rate Used for Calculation: 40

Person Conducting Percolation Tests

Name: Brad Sartin #1178 #148
Phone: 402-430-7606
Address 105 Locust Hickman, Ne 68372

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date


MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
35-08-06
36-08-06
BURCHARD CLAY LOAM, 11 TO 15 PERCENT SLOPES
WYMORE SILTY CLAY LOAM, 3 TO 7 PERCENT SLOPES, ERODED
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
STAGECOACH
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
01-07-06
02-07-06
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
HOMESTEAD

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

System Type: STANDARD

No. HS000258

Situs: 1540 STAGECOACH RD

Permit Fee: $175.00

Legal Description: T08N-R08E-S36-Lot 9

Owner: MCCOWN, GAYLORD B & DIANA H
1540 STAGECOACH RD
MARTELL NE
68404

Total Fees: $175.00

Issued: 08/04/2009
Expires 08/04/2010

Bruce D. Dart, PhD, Health Director

Dear Applicant:

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

SOUTHWICK SEWER
PO BOX 191
HICKMAN NE 68372