LLCHD HS000318

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

A

Permit Number
HS000318

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 8989 SW 119th (no rural route) City Denton, NE Zip 68339

Legal Description 29 9 5 18 NW

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: 20 +

B. Owner

Name CRAIG NISSEN Signature (NA)

Address PO Box 6884 City/State/Zip LINCOLN / NE / 68506

☐ Check if owner designed system Home Phone 402-525-0232 Work Phone

C. Contractor

Name: KURT T VIRGIL Company Name KURT T VIRGIL EXCAVATING

Address 4620 W MARY LOUISE LN City/State/Zip LINCOLN / NE / 68528

☒ Check if contractor designed system Work Phone 402-525-6681

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

Designer Name Firm Shane Work Phone 416-7731

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 5/19/2010
Date rec'd 12/3/09
Date frwd 12/3/09
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 12-3-09
Date frwd 12-3-09
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments Avoid floodplain
Date rec'd 12-3-09
Date frwd 12-3-09
ACTION ☒ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date 5/25/2010

Business Office Use Only
Date Received 12-03-09 Amount Paid 325.00
Received By Cash/Check No. 1860

6-10-2010 16: 3:26 White - Health Department Yellow - Engineer Pink - Building & Safety Form A Updated: 5-07

12-11-2009 16:6:52

LLCHD HS000318

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

RETURN SERVICE REQUESTED

PRESORTED
FIRST CLASS

047J82005126

$00.41
12/07/2009
Mailed From 68510
US POSTAGE

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

DEC 11 2009

NIXIE 601 SE 1 00 12/09/09
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
BC: 68510151499 *2335-08134-07-39

68510@1514

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. HS000318

System Type: LAGOON

Situs: 8989 SW 119th

Legal Description: T09N-R05E-S29-Lot 18

Owner:

Permit Fee:	$325.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$325.00

Issued:	12/04/2009
Expires:	12/04/2010

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

MANION CONSTRUCTION
2629 SW 16TH
LINCOLN NE 68522-2470

APR 19 2010

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

B

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 8989 SW 119 (no rural route) City Denton NE, Zip 68339

Owner CRAIG & Donna Nissen Addresss P.O. Box 6884 Lincoln, Ne 68506

Soil Type (SCS): ~~Tabyn~~ Judson Percolation Rate: 21.5 min./inch

Date of Tests 4-13-10 to 4-14-10 Weather: Precipitation Trace Temperature 70°

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	33	4-13	300	4-13	700	4-14	800	6	~~4-14~~	1200	30	1	30
2	40	"	"	"	"	"	"	"	"	"	"	2 1/4	13.3
3	33	"	"	"	"	"	"	"	"	"	"	1	30
4	32	"	"	"	"	"	"	"	"	"	"	1 1/4	24
5	48	"	"	"	"	"	"	"	"	"	"	2 1/4	13.3
6	48	"	"	"	"	"	"	"	"	"	"	1 5/8	18.5

Sum of Percolation Rates: 129.1
Average of Rates: 21.5
Rate Used for Calculation: 21 - 30

Person Conducting Percolation Tests

Name: Kurt Virgil
Phone: 402-525-6681
Address 4600 W. Mary Louise Ln
Lincoln, Ne 68528

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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

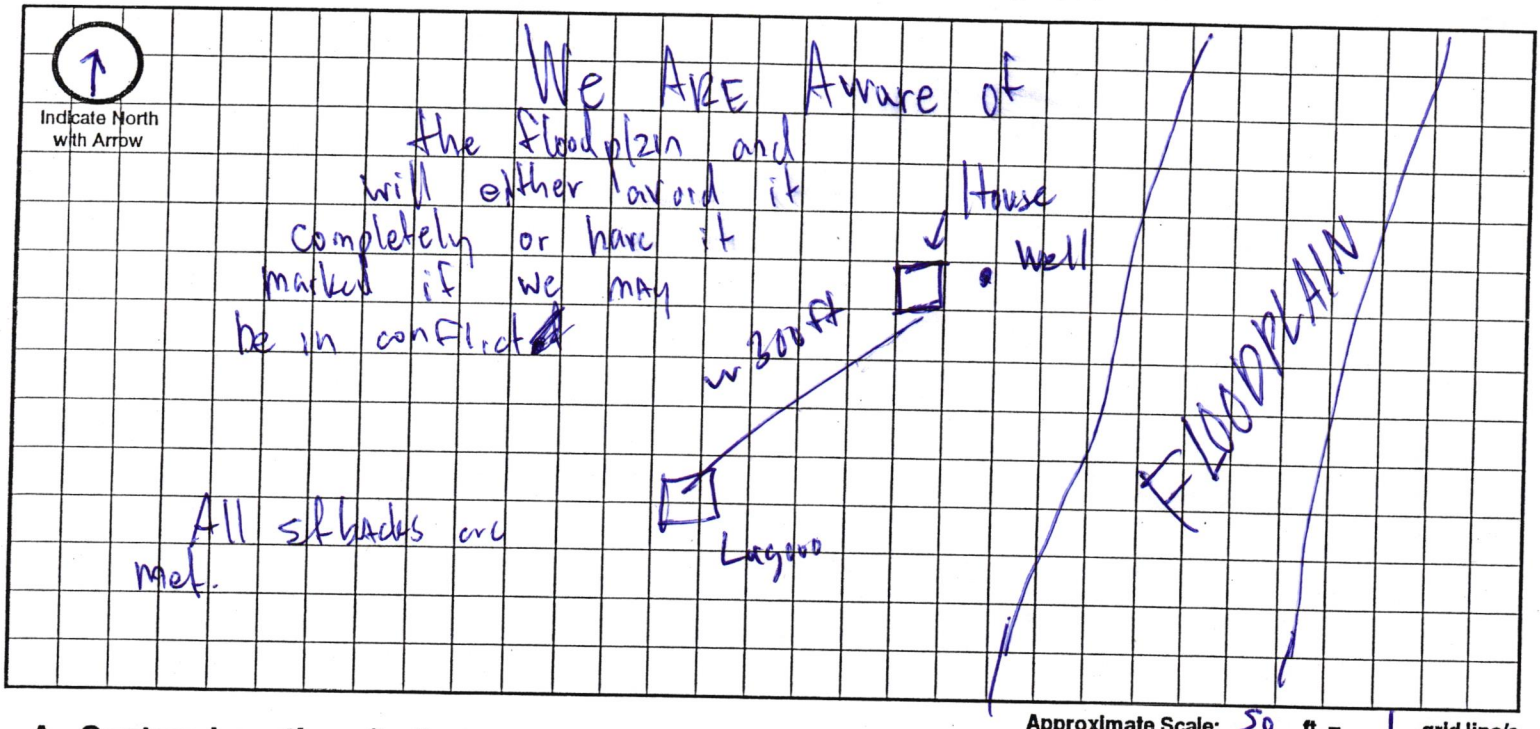
SCANNED

C

Permit Number: HS000318

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: 50 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 8989 SW 119 City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☒ Other _____

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

Percolation Rate — (min. per inch) Soil Type: STF Land Slope: 7 %

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

Total Square Feet of Field Required: _____ sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

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

Total Length of Laterals _____ ft. Number of Trenches _____ 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 11-30-09

FORM 23-102 10-96

MAY 24 2010

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

T9 R5 S29

Date 5-20-10

System Location (Indicate correct number and street)

Address 8989 SW 119 (no rural route) City Denton NE, Zip 68339

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: ~~24~~ in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 161 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line > 100 ft.
   stream > 50 ft.
   pressure line > 25 ft.
   property line > 20 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☑ above ☐ below grade 4 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 16 in.
8. Distances to: Well or suction line > 100 ft.
   Stream > 50 ft.
   Pressure line > 25 ft.
   Property line > 20 ft.

C. Distribution Box

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

D. Absorption Field

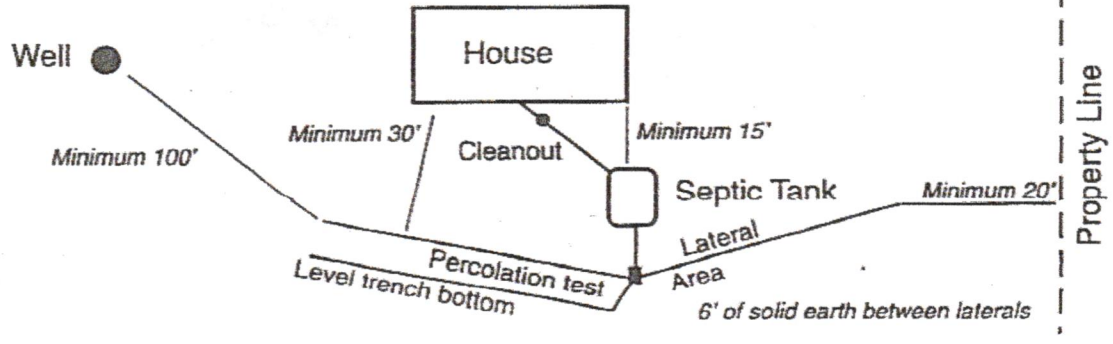
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 36
   or perforated pipe:
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 2
   Length of each line: 92 ft. 96 ft.
   ft. ft., ft.
3. Trench dimensions: Width 36" ft.
   Slope 0 in/100 ft.
   Average depth 34 in
4. Filter material: NA
   Depth of material — in.
5. Distances to: Well or suction line > 100 ft.
   Stream > 50 ft.
   Pressure line > 25 ft.
   Property line > 20 ft.

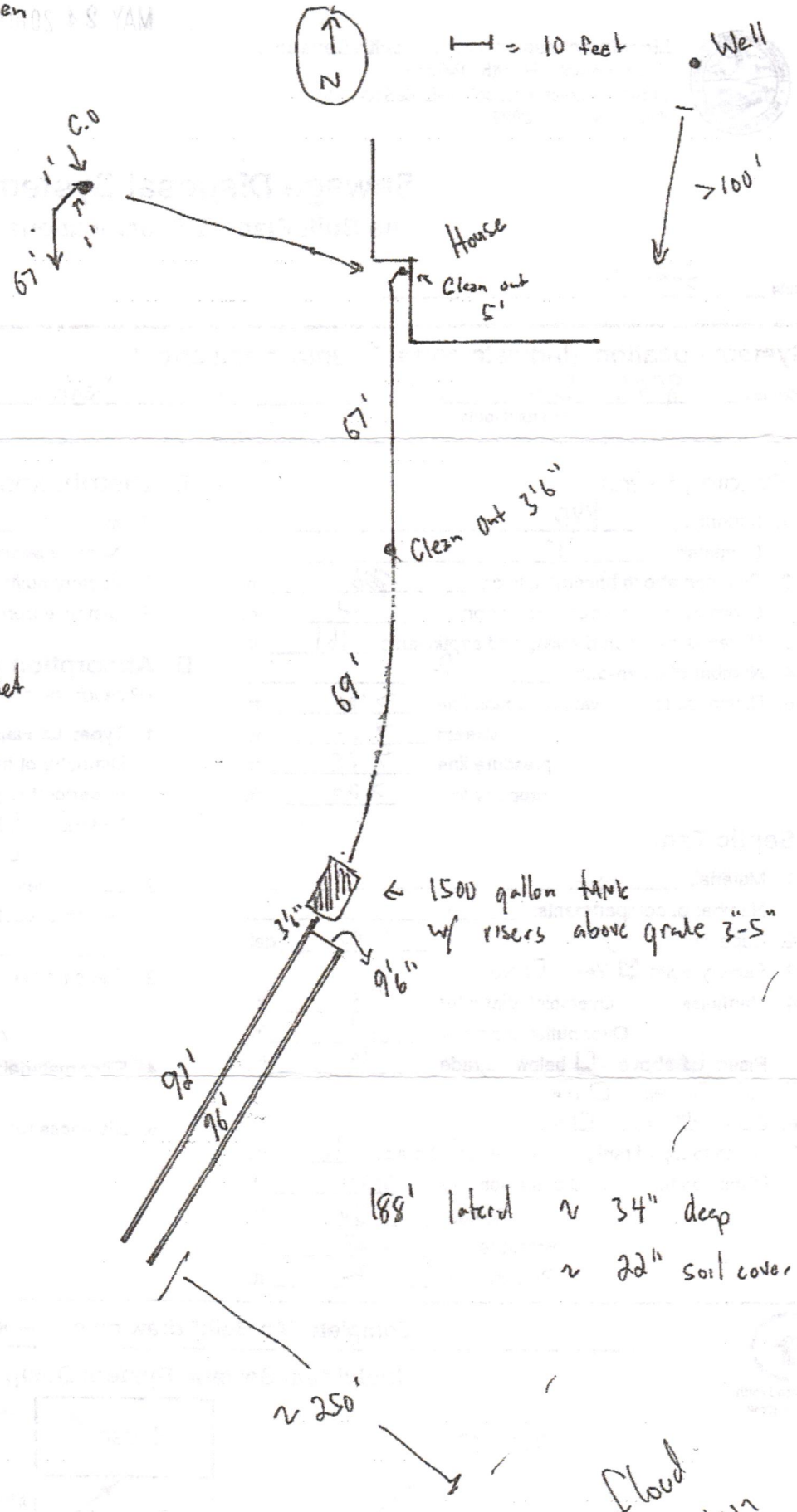
Indicate North with Arrow

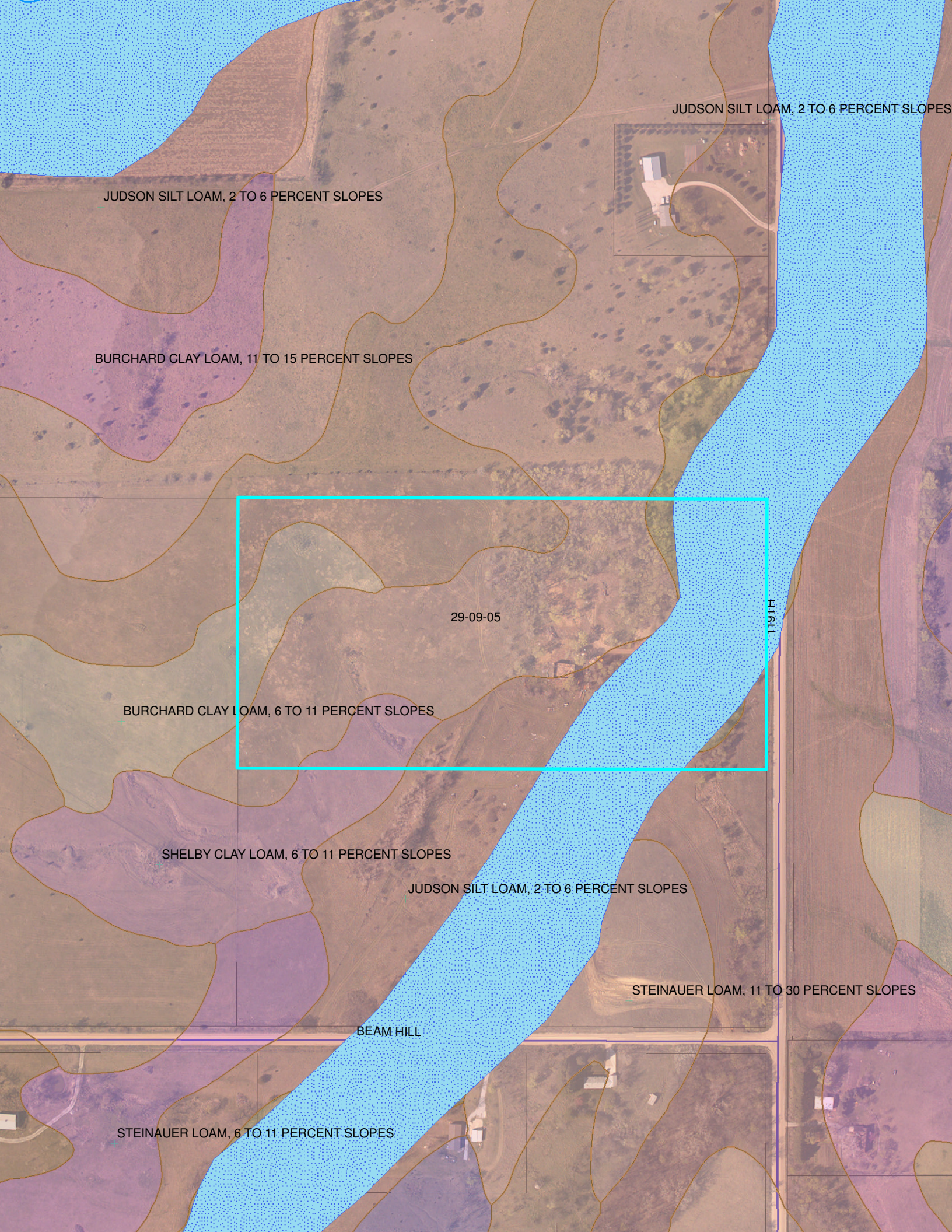
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



Shane Manion c/o Craig Nissen
Septic Data Sheet
Completed 5-19-2010




JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
BURCHARD CLAY LOAM, 11 TO 15 PERCENT SLOPES
29-09-05
HIGHWAY 11
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
BEAM HILL
STEINAUER LOAM, 6 TO 11 PERCENT SLOPES