LLCHD HS000338

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

SCANNED

A

Permit Number HS000338

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 14300 S. 120 (no rural route) City Bennet, NE Zip 68372

Legal Description: 1/4 — 1/4 — Section 8 — Township 8N — Range 8E — Subdivison — Addition — Block — Lot 12

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 Duane Parrish Signature _____

Address 125 Monroe City/State/Zip Bennet, Ne 68317

☐ Check if owner designed system Home Phone 782-2192 Work Phone _____

C. Contractor

Name: Brad Southwick Company Name Southwick Sewer & Drain

Address 105 Locust P.O. Box 191 City/State/Zip ~~105 Locust~~ Hickman, Ne 68372

☐ Check if contractor designed system Work Phone 430-760

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 2 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 _____ Date frwd _____
ACTION ☐ Approved ☐ Disapproved
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 _____
Date _____

Business Office Use Only
Date Received 4-19-10 Amount Paid 325.00
Received By B.H. Cash/Check No. 1279

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

Form A Updated: 5-07

4-26-2010 16: 5:33

LLCHD HS000338

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
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SCANNED SCANNED SCANNED

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Comments _____ Date frwd _____ Signature _____

SCANNED

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
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Received By B.H. Cash/Check No. 1279

SCANNED

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

Form A Updated: 5-07

4-26-2010 16: 6:27

LLCHD HS000338

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

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Site visits _____
Date rec'd 4/17/10
Date frwd 4/17/10
ACTION ☒ Approved ☐ Disapproved
Signature _____

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Comments _____
Date rec'd 4-17-10
Date frwd 4-19-10
ACTION ☒ Approved ☐ Disapproved
Signature _____

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Comments _____
Date rec'd 4-19-2010
Date frwd 4-19-2010
ACTION ☒ Approved ☐ Disapproved
Signature _____

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By _____
Date _____

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

4-26-2010 16: 6:29

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. HS000338

System Type: LAGOON

Situs: 14400 S 120 ST

Legal Description: T08N-R08E-S09-Lot 12

Owner:

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

Issued:	04/19/2010
Expires:	04/19/2011

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

SOUTHWICK SERVICES
PO BOX 191
HICKMAN NE 68372

LLCHD HS000338

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

A

Permit Number HS000338

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Address 14300 S. 120 (no rural route) City Bennet, NE Zip 68372

Legal Description: 1/4 = 8, 1/4 = SW, Section = SE, Township, Range, Subdivison, Addition, Block = 12, 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 Duane Parrish Signature

Address 125 Monroe City/State/Zip Bennet, Ne 68317

☐ Check if owner designed system Home Phone 782-2192 Work Phone

C. Contractor

Name: Brad Southwick Company Name Southwick Sewer & Drain

Address 105 Locust P.O. Box 191 City/State/Zip ~~10 Box~~ Hickman, Ne 68372

☐ Check if contractor designed system Work Phone 430-760

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

Designer Name Firm Work Phone

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1. Health Department Date rec'd ACTION ☐ Approved ☐ Disapproved
Site visits Date frwd Signature

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

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

Installation Final Written Approval
By

Date

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

4-16-2010 16: 3: 5

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

A

Permit Number H5000338

Onsite Wastewater Treatment System Request for Site Clearance and Permit

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Site visits _____
Date rec'd 4/17/10
Date frwd 4/19/10
ACTION ☑ Approved ☐ Disapproved
Signature _____

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Comments _____
Date rec'd 4-17-10
Date frwd 4-19-10
ACTION ☒ Approved ☐ Disapproved
Signature _____

3. City or County Engineer
Comments _____
Date rec'd 4-19-2010
Date frwd 4-19-2010
ACTION ☑ Approved ☐ Disapproved
Signature Kenneth D. Schroeder

Installation Final Written Approval
By _____
Date 7/20/10

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

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

SCANNED SCANNED SCANNED

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SCANNED

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By
Date

Business Office Use Only
Date Received 4-19-10 Amount Paid 325.00
Received By B.H. Cash/Check No. 1279

SCANNED

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

S. 120 th Whittstruck Rd.

SOIL ABSORPTION DATA REPORT

Project

Location

Job No.

Date

SOIL TEST PROPERTY

LOCATION:

Township: 8N

Range: 8E

Section & 1/4 Section: 8 SW/4

OWNER: Duane Parrish

Bill to:

Property Dimensions: _____ feet x _____ feet

Property Area: 10 + acres

Property ID:

DATES OF TESTS: 6/8/10 to 6/9/10

SOIL TYPE:

Silty Clay		Sandy Loam	
Silty Loam		Sandy Clay	
Clay Loam		Clayey Sand	
Silty Clay Loam	X	Silty sand	
WTC2		Sand	

WEATHER:

Precipitation: T

Temperature: 70's

PERCOLATION TEST DATA

		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. / in.)
1	28	6/8	11 AM	6/9	10:45	6/9	2:00	22	2:30	22 5/8	30	5/8	48
2					AM		PM	23 1/8	PM	23 3/4		5/8	48
3								23 5/8		24 1/4		5/8	48
4								22 1/2		23 1/8		5/8	48
5								24 3/4		25 1/4		1/2	60
6	↓							26		26 3/4		3/4	40
7													
8													

Test Conducted By: Brad Southwick #148/1178

Sum of Percolation Rates: 292

Average of Rates (Min/Inch): 49

Inches Per Minute: 50

[Field Sketch with Approximate Boring Locations Attached]

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

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 7/23 Legal Description 9 8 8 58, T8, R8 Lot 12
(1/4 1/4 Section Township Range)

Onsite System Location

Address (no rural route) 14400 S. 120 City Bennet NE, Zip 68317

Owner Duane Parrish Address

A. Sewer Pipe

1. Material: Sch 40 PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: 106 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line NA ft. (rural)
   stream NA ft.
   pressure line NA ft.
   property line >20 ft.

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Concrete (Pre Cast Lincoln) Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 3X5 in.
   Over outlet, diameter 8X6 in.
   Riser: ☐ above ☒ below grade 10 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: 18 in.
8. Distances to: Well or suction line NA ft.
   Stream NA ft.
   Pressure line >50 ft.
   Property line >20 ft.

C. ☐ Distribution Box ☒ Drop Boxes

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

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

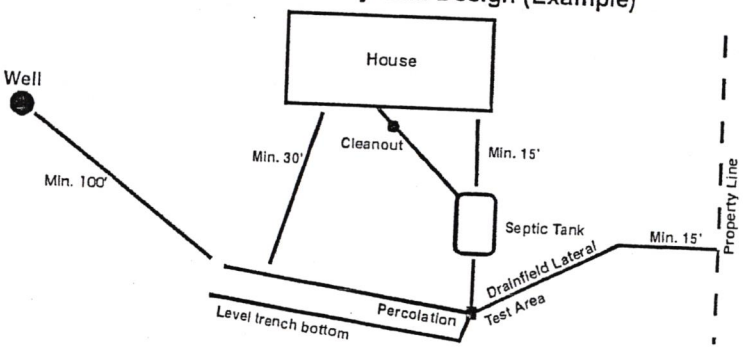
D. Drainfield Absorption

☒ Trench ☐ Bed ☐ Level Bottom

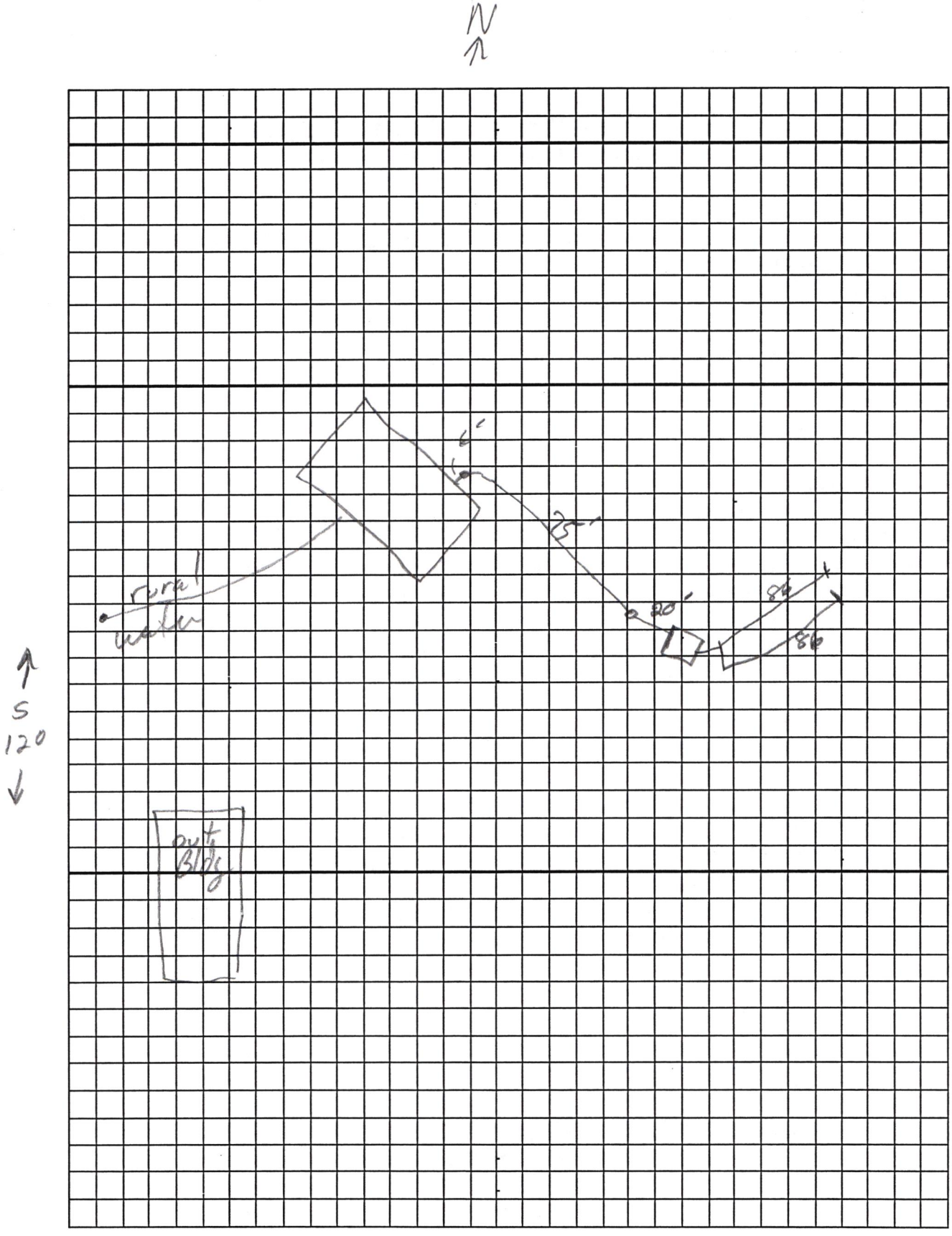
1. Type: ☐ Half rounds ☐ Perforated pipe ☒ Chambers
   Diameter or width: 36
   Number of distribution lines in bed ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Drainfield Laterals: Number 2
   Length of each line: 86 ft. 86 ft.
   ____ ft. ____ ft., ____ ft.
3. Drainfield dimensions: Width 4 ft.
   Distribution Pipe Slope 6 in/100 ft.
   Average depth ____ in
4. Filter material: Gravelless
   Depth of material ____ in.
5. Distances to: Well or suction line NA ft.
   Pressure line >35 ft.
   Property line >20 ft.
   House or building >35 ft.
   Lake or Stream NA ft.

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

Onsite Wastewater System Design (Example)



icate North
ith Arrow


N
5'
25'
20'
rural water
out Bldg
S
120