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

No. HS000391

System Type:	STANDARD
Situs:	2700 W SPRAGUE RD
Legal Description:	T08N-R06E-S28-Lot 105
Owner:	EGGER, RUSSELL & KATHLEEN 2700 W SPRAGUE RD MARTELL NE 68404-6168

Permit Fee:	$180.00
Total Fees:	$180.00
Issued:	08/16/2010
Expires	08/17/2011

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

GAGNER CONST
4810 W CLAIRE AVE
LINCOLN NE 68523-9324

SCANNED

HS000391

EPS

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

N40° 37.511'
W096° 45.683'

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 8 Range 6 PM 1/4 SW 1/4 SW Section 28
   Block ___ Lot 105 Addition ___
   Parcel ID ___ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 2800 "W" Sprague Rd. MAPTECH# 684104

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** Add 200ft INFILTRATOR

5. **Work to be done by:** ☐ owner ☒ contractor's name Egger Const

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 Kathleen Egger Address 2700 W. Sprague Rd Phone: 794-5165

Applicant Signature (owner or lessee) Kathleen Egger

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 8/13/10 REVIEW: ☑ Approved ☐ Disapproved By: [signature]

Site visits
Date ___/___/___ By ___
Date ___/___/___ By ___
Date ___/___/___ By ___

Installation final written approval
Date 8/20/10 By [signature]

Return application to:

Lincoln Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: 8/16/10 Amount: 180.00 Check No 6038 Initials ML

Revised 3-09

HS000391

EPS

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

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

N 40° 37.511'
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1. **Legal description of property:**
   Township 8 Range 6 PM 1/4 SW 1/4 SW Section 28
   Block ____ Lot 105 Addition ____
   Parcel ID ____-____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 2700 "W" Sprague 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** Add 2 more INFILTRATORS

5. **Work to be done by:** ☐ owner ☒ contractor's name Gagner Const.

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 Kathleen Egger Address 2700 W. Sprague Rd Phone: 794-5165

Applicant Signature (owner or lessee) Kathleen Egger

Please contact LLCHD for the permit fee for 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 8/13/10 REVIEW: ☑ Approved ☐ Disapproved By: [signature]

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

Installation final written approval
Date 8/10/10 By [signature]

Return application to:

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: ___/___/___ Amount ____ Check No ____ Initials ____

Revised 3-09

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 2700 W "O" ST (no rural route) City [illegible] NE, Zip _____

Owner _____ Address _____

Soil Type (SCS): SILT LOAM Percolation Rate: 39.3 min./inch

Date of Tests 8/16/2010 to 8/16/2010 Weather: Precipitation 0 Temperature 90

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	32	8/15	3:40	8/16	3:40	8/16	3:40	-	8/16	3:40		5/8	48
2	34	"	"	"	"	"	"	"	"	"		1	30
3	34	"	"	"	"	"	"	"	"	"		5/8	48
4	31	"	"	"	"	"	"	"	"	"		3/4	40
5	32	"	"	"	"	"	"	"	"	"		9/10	[illegible]
6	34	"	"	"	"	"	"	"	"	"		5/8	48

Sum of Percolation Rates: 336

Average of Rates: 39.3

Rate Used for Calculation: 39.3

Person Conducting Percolation Tests

Name [illegible]

Phone 402-797-[illegible]

Address _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Approved _____

Signature of Reviewing Official _____ Date

C

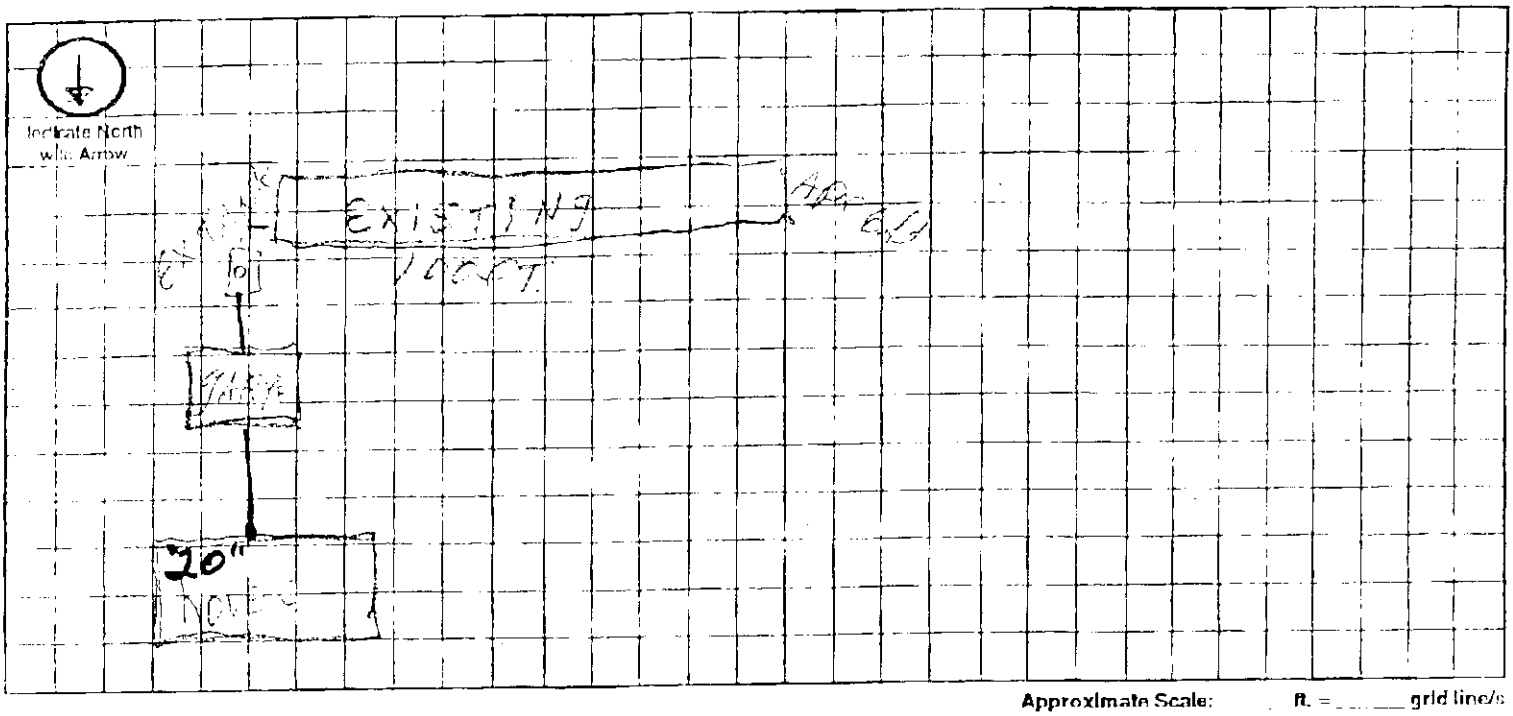
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number:

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: ft. = grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 2700 "W" Sprague Rd City MARTell NE, Zip 68404

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other

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

Percolation Rate 29.3 (min. per inch) Soil Type SILT LOAM Land Slope: .05 %

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 1000 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed

Total Length of Laterals 200 ft. Number of Trenches 3 Trench Width 4

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Ground 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 8/5/10

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

D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

GPS
N40° 37.511'
W096° 45.683

Date 10 AUG 2010

System Location (Indicate correct number and street)
Address 2700 "W" SPRAGUE Rd. (no rural route) City MARTELL NE, Zip 68404

A. Building Sewer
1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: UN in.
   or distance below basement floor: UN in.
3. Distance between dwelling and septic tank: 80 ft.
4. Number of clean-outs: 0
5. Distances to: well or suction line OVER 100 ft.
   stream NA ft.
   pressure line OVER 100 ft.
   property line OVER 30 ft.

B. Septic Tank
1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter NO in.
   Over outlet, diameter NO in.
   Riser: ☒ above ☐ below grade 1 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 OVER 100 ft.
   Stream NA ft.
   Pressure line OVER 100 ft.
   Property line OVER 75 ft.

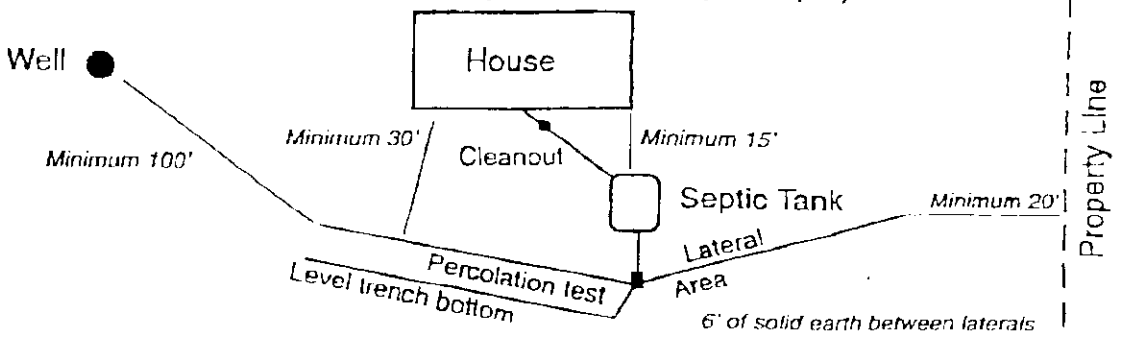
C. Distribution Box
1. Material: PLASTIC
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 16 ft.

D. Absorption Field
(Provide as-built drawings on back of this form)
1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round:
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 3
   Length of each line: 112 ft. 88 ft.
   EXISTING 100 ft. ft., ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 20 in
4. Filter material: NA
   Depth of material in.
5. Distances to: Well or suction line OVER 100 ft.
   Stream NA ft.
   Pressure line OVER 30 ft.
   Property line OVER 40 ft.

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

Indicate North with Arrow

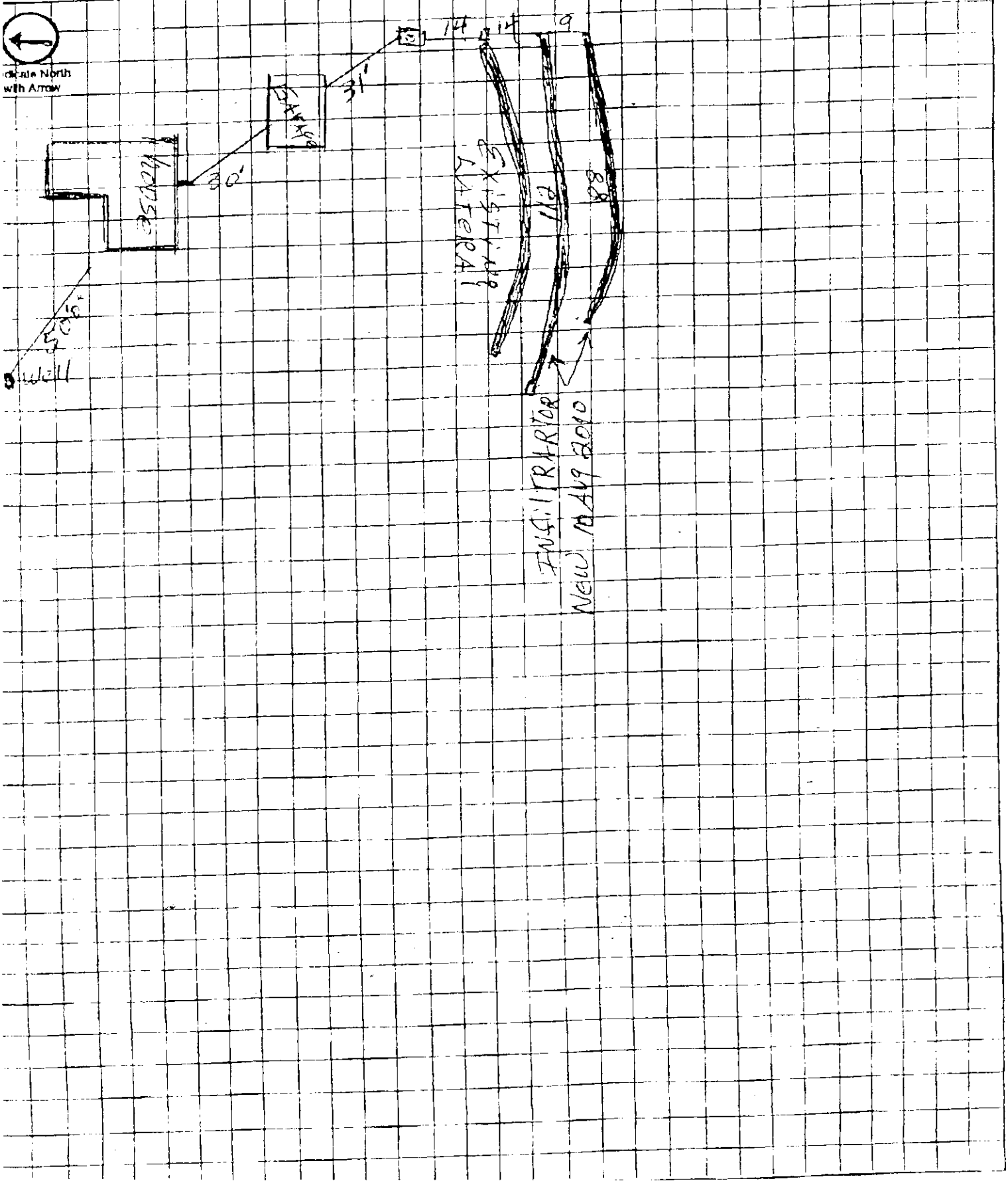
Individual Sewage System Design (Example)



RM 23-103 10-96
8-13-2010 14:52:22

s Built Drawing

2700 W. Sprague Rd., Martell, NE



Post-It™ brand fax transmittal memo 7671 | # of pages ▸ 3

To Doug S.	From Mel
Co. LCHD	Co. Gagner Const.
Dept.	Phone # 432-5698
Fax # 441-3890	Fax # 797-7475

GAGNER CONST. CO. INC.
4810 W. CLAIRE AVE.
LINCOLN, NE 68523
PH. 797-2365 FAX 797 7475

Aug 11-10

Hi Doug,
Here is the
drawing for
2700 W. Sprague Rd
Martell, NE.

Thanks

LLCHD HS000391

Post-it™ brand fax transmittal memo 7671 | # of pages ▸ 3

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4810 W. CLAIRE AVE.
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PH. 797-2365 FAX 797-7475

Aug 11-10

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drawing for
2700 W. Sprague Rd
Martell, NE.

+ perc.
test

Thanks

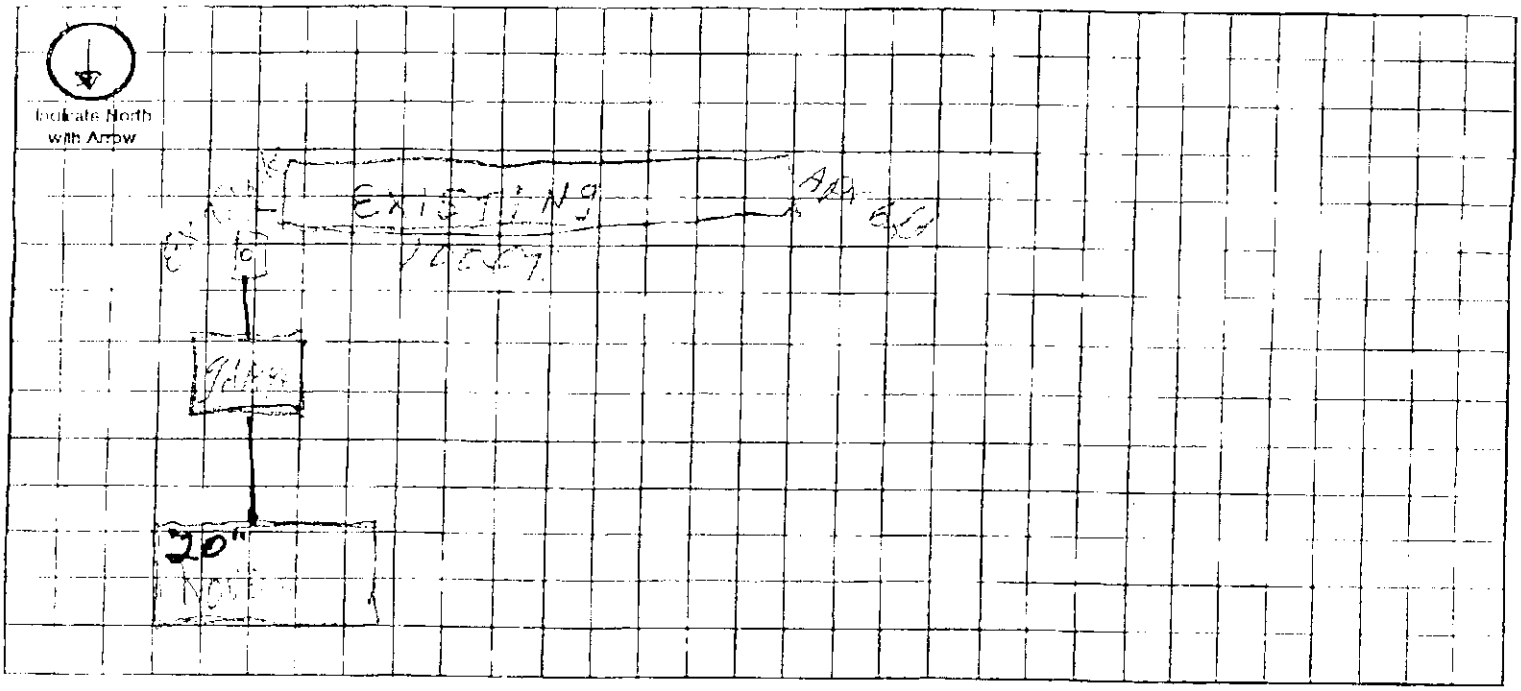
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

Sewage Disposal System
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Approximate Scale: _____ ft. = _____ grid line/s

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B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 29.2 (min. per inch) Soil Type: SILT LOAM Land Slope: .05 %

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

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Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor _____ Date _____

Installer [signature] Date 8/[illegible]/10

LLCHD HS000391

Post-It™ brand fax transmittal memo 7671 | # of pages ▸ 4

To Doug Smith	From Mel
Co. LCHD	Co. Gagner Const
Dept.	Phone # 432-5678
Fax # 441-3890	Fax # 797-7475

GAGNER CONST. CO. INC.
4810 W. CLAIRE AVE.
LINCOLN, NE 68523
PH. 797-2365 FAX 797-7475

Aug 9-10

Hi Doug, Here are the papers for 2700 W. Sprague Rd. Melvin will give you a check for the permit Tue. Aug 10-10

Thanks,

Linda


MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
29TH
29-08-06
28-08-06
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
SPRAGUE
SALMO SILTY CLAY LOAM, CHANNELED, 0 TO 2 PERCENT SLOPES
29TH
32-08-06
33-08-06