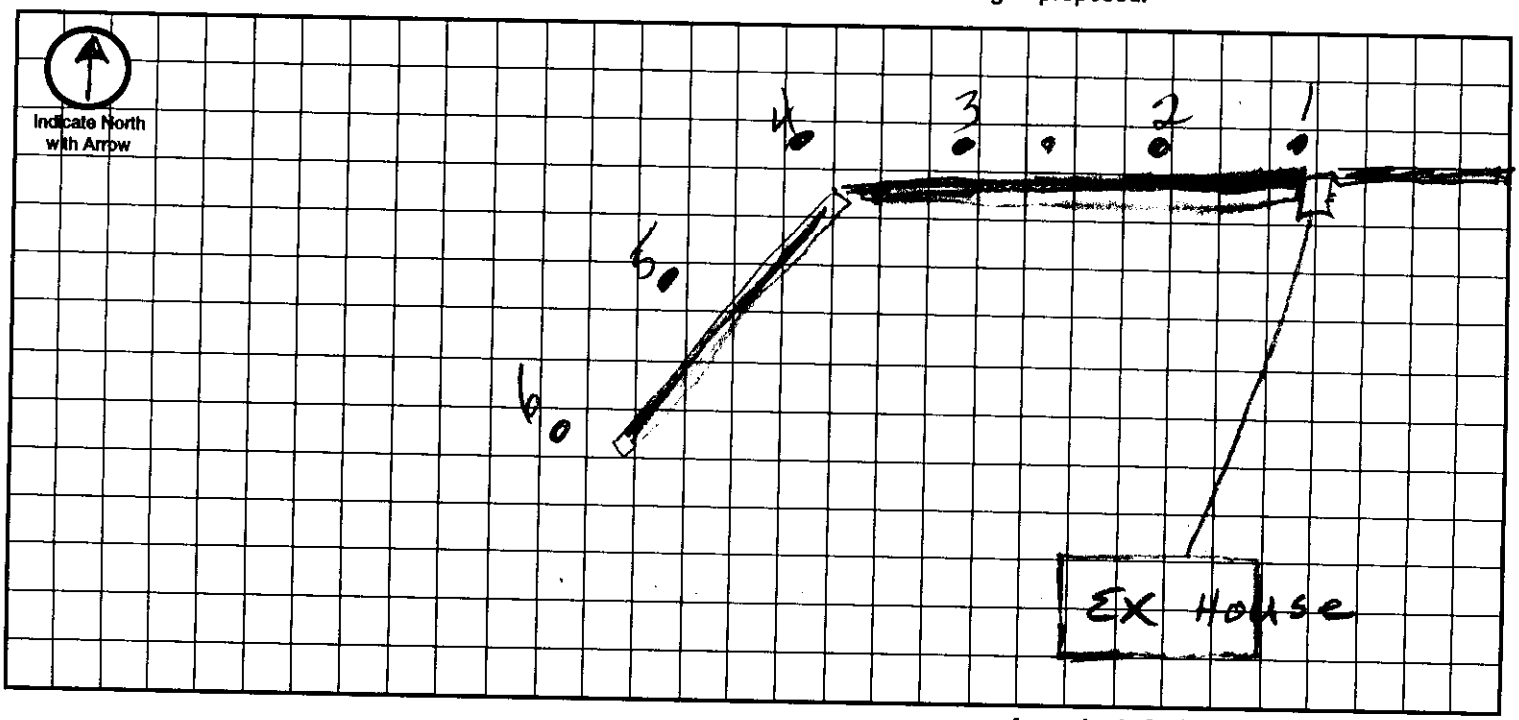
**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**C**

Permit Number:

# Sewage Disposal System
## 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) 10110 "D" YANKEE Hill Rd. 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 30 (min. per inch) Soil Type: _____ Land Slope: 2 %

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

Total Square Feet of Field Required: 990 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 247 ft. Number of Trenches 2 Trench Width 4

## 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 Harry J. Steer Date _____

Installer Melvin F. Stapp Date 1-8-06.

FORM 23-102 10-96
4-13-2011 14:6:36

LLCHD HS000479

SCANNED

**A**

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

Permit Number: HS000479

# Sewage Disposal System

## Request for Site Clearance and Permit

**Include Form B, Form C and Applicable Fees with this Application.**

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

**PLEASE PRINT OR TYPE**

### A. System Location (Indicate correct number and street)

Address 10110 W YANKEE Hill Rd. (no rural route) City DENTON NE, Zip 68339

Legal Description 21, 9, 5
1/4 1/4 Section / Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

### B. Owner

Name GARY STEER Signature Gary J. Steer

Address 10110 W YANKEE HILL RD City/State/Zip DENTON 68339

☐ Check if owner designed system Home Phone 797-3757 Work Phone 525-5906

### C. Contractor

Name Mel Wagner Company Name Wagner Const

Address 4810 W CLAIRE AVE City/State/Zip LINCOLN 68523

☒ Check if contractor designed system Work Phone 402-432-5698

### 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 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.

***DO NOT WRITE BELOW THIS LINE***

## Approval Process ☑ Municipal Code 24.38 ☐ County Resolution No. 2832

1. **Health Department** Date rec'd 4/11/11 Date frwd 4/12/11 **ACTION** ☑ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____

## Installation Final Written Approval

By _____

Date 4/12/11

***Business Office Use Only***

Date Rec'd 4-12-11

Amt Paid 335.-

Rec'd By B. Hall Cash/Check No. 6245

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

4-13-2011 14: 9: 9

SCANNED

B

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

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 10110 "W" YANKee Hill Rd City DENTON NE, Zip 68339
(no rural route)

Owner GARY STEER Addresss 10500 "W" YANKee Hill Rd.

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

Date of Tests 1-7-06 to 1-8-06 Weather: Precipitation 0 Temperature 45

## 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 | 28 | 1-7 | 10:30 | 1-8 | 12:30 | 1-8 | 12:30 | 6 | 1-8 | 1:30 | 30 | 5/8 | 48 |
| 2 | 29 | " | " | " | " | " | " | " | " | " | " | 3/4 | 40 |
| 3 | 31 | " | " | " | " | " | " | " | " | " | " | 3/4 | 40 |
| 4 | 28 | " | " | " | " | " | " | " | " | " | " | 3/4 | 40 |
| 5 | 29 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| 6 | 29 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

**Person Conducting Percolation Tests**

Name: Mel Gagner
Phone: 402-432-5696
Address 4810 "W" Claire Ave
Lincoln NE 68523

Sum of Percolation Rates: 304
Average of Rates: 50.6
Rate Used for Calculation: 50

DO NOT WRITE BELOW THIS LINE

**Reviewing Action**

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96
4-13-2011 14: 9:11

**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. HS000479**

**System Type:** STANDARD

**Situs:** 10110 W YANKEE HILL RD

**Legal Description:** T09N-R05E-S21

**Owner:** STEER, GARY F & LORI L
8130 HALEY LYNN LN
DENTON NE
68339

| | |
|---|---|
| Permit Fee: | $335.00 |
| Variance Fee: | $0.00 |
| Extension Fee: | $0.00 |
| Total Fees: | $335.00 |
| Issued: | 04/12/2011 |
| Expires: | 04/11/2012 |

Judith A Halstead

Judith A. Halstead, MS, Health Director

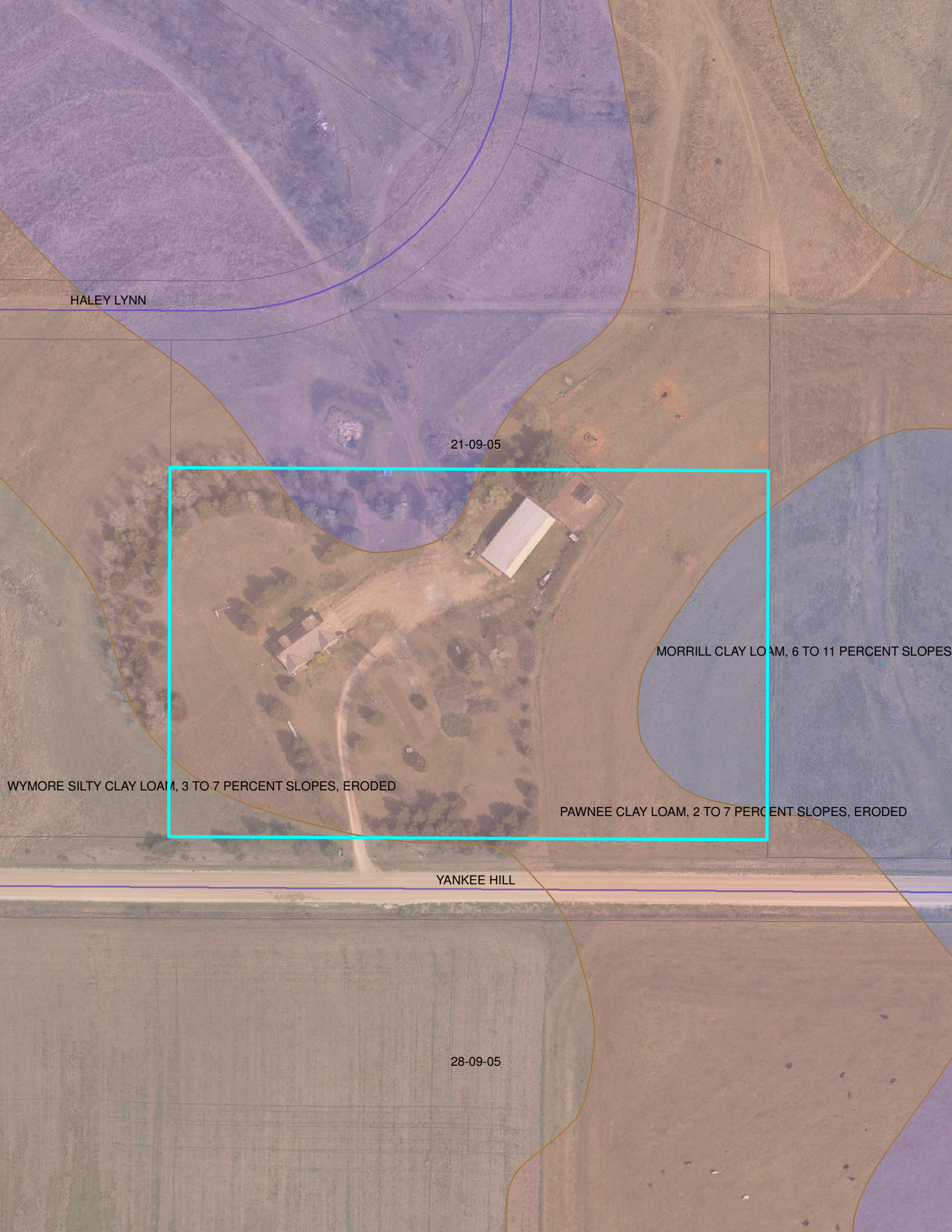
On-site Waste System Permit Holder:

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.

Judith A Halstead

Judith A. Halstead, MS
Health Director

GAGNER CONSTRUCTION
4810 W CLAIRE AVE
LINCOLN NE 68523-9324


HALEY LYNN
21-09-05
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
WYMORE SILTY CLAY LOAM, 3 TO 7 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
YANKEE HILL
28-09-05

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

D

Permit Number:

GPS

# Sewage Disposal System N 40° 43.664'
## As Built Plans & Specifications W 096° 51.487'

Date 12 April 2011

**System Location (Indicate correct number and street)**
Address 10110 "W" Yankee Hill Rd. (no rural route) City DENTON NE, Zip

## A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line OVER 100 ft.
   stream NA ft.
   pressure line OVER 30 ft.
   property line OVER 50 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 _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade 6 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line OVER 100 ft.
   Stream NA ft.
   Pressure line OVER 50 ft.
   Property line OVER 50 ft.

## C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: 28 ft.

## D. Absorption Field

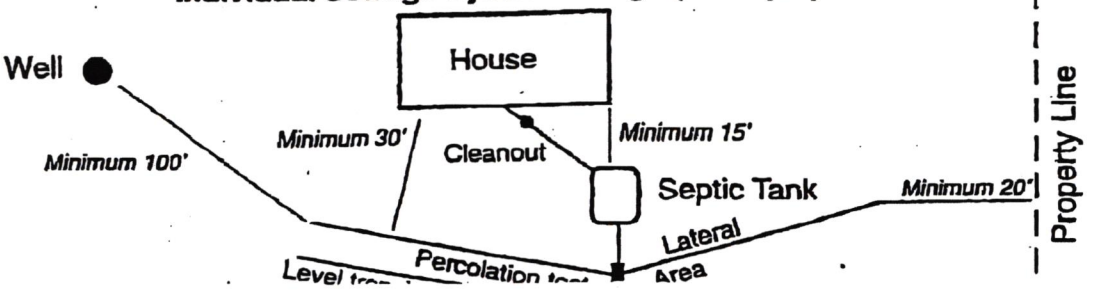
*(Provide as-built drawings on back of this form)*

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other INFILTRATORS
2. Lateral lines: Number 2
   Length of each line: 150 ft. 100 ft.
   _____ 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 NA in.
5. Distances to: Well or suction line OVER 100 ft.
   Stream NA ft.
   Pressure line OVER 100 ft.
   Property line OVER 30 ft.

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

Indicate North with Arrow

### Individual Sewage System Design (Example)



## ıs Built Drawing

10110 W. Yankee Hill Rd

