LLCHD HS000551

A

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

Permit Number: HS000551

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 * approved for Lagoon until PAC's are completed

A. System Location (Indicate correct number and street)

Address X 6255 SW 58th (no rural route) City Denton NE NE, Zip 68339

Legal Description 13 9 5 Fox Trail Estates add 2 1
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (If known): Longitude W096° 48' 01.0" Latitude N40° 45' 01.2"

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

B. Owner

Name X DANA + PAM WOLFE Signature X Pam Wolfe

Address X 6255 SW 58th St. City/State/Zip Denton NE 68339

☐ Check if owner designed system Home Phone (619) 993-6004 Work Phone

C. Contractor

Name Rudger D. Hempel Company Name Rudger D. Hempel Contractor

Address 3035 Bonacum Dr. City/State/Zip Lincoln Nebr 68502

☐ Check if contractor designed system Work Phone 402-432-5075

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

Designer Name GARY L. HOLLY Firm HOLLY CONTRACTING CO Work Phone 402-587-0120

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 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 9/27/11	ACTION ☑ Approved	☐ Disapproved
	Date frwd 9/27/11	Signature	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 9/27/11	ACTION ☑ Approved	☐ Disapproved
	Date frwd 9/27/11	Signature	
3. City or County Engineer	Date rec'd 9-27-11	ACTION ☑ Approved	☐ Disapproved
	Date frwd 9-27-11	Signature John Blomgren	

Installation Final Written Approval

By

Date

Business Office Use Only
Date Rec'd 9-28-11
Amt Paid 345.00
Rec'd By B. Hall Cash/Check No. 2693

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

9-29-2011 11:38:24 * Issued as a Lagoon * Only 5 Bdrms Limit

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 X 6255 SW 58th (no rural route) City Denton NE NE, Zip 68339

Owner DANA & PAM WOLFE Addresss 6255 S.W 58th

Soil Type (SCS): AKSARBEN SILTY CLAY LOAM Percolation Rate: 50 min./inch

Date of Tests 092111 to 092211 Weather: Precipitation NONE Temperature 40°-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	36	0921	0900	0922	0920	0922	0930	6"	0922	1330	LAST 30	.7	43
2	36						0932			1332		.6	50
3	36						0934			1334		.7	43
4	36						0936			1336		.6	50
5	36						0938			1340		.5	60

Person Conducting Percolation Tests

Name: GARY L. HOLLY

Phone: 402-587-0120

Address 71860-567 AVE.

FAIRBURY, NE. 68352

Sum of Percolation Rates: 246

Average of Rates: 49.2

Rate Used for Calculation: 50-60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

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

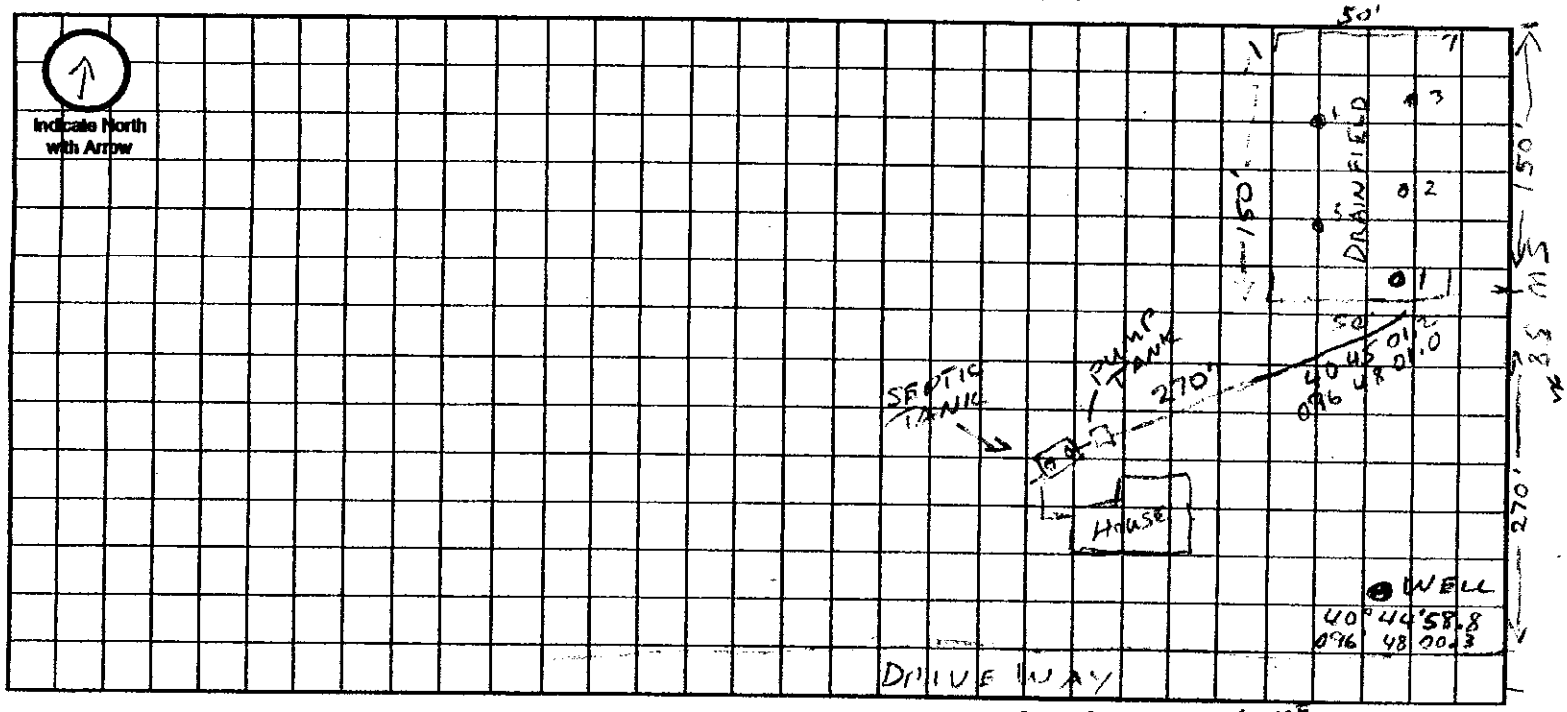
C

Permit Number:

DANA + PAM WOLFE

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: NONE ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) X 6255 S.W. 58th 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 50-60 (min. per inch) Soil Type: AKSARBEN SILTY CLAY LOAM Land Slope: 1 %

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

Total Square Feet of Field Required: MIN 1400 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: GRAVELLESS CHAMBERS

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals MIN 350 ft. Number of Trenches 3 Trench Width 36

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 X Rodger D Hempel Date X 9/25/11

Installer Gary T. Holly Date 092611

FORM 23-102 10-96
9-29-2011 11:38:27

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. HS000551

System Type: LAGOON

Situs: 6255 SW 58th

Legal Description: T09N-R05E-S13-2-Lot 1

Owner:

Permit Fee:	$345.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$345.00

Issued:	09/28/2011
Expires:	09/27/2012

Judith A Halstead

Judith A. Halstead, MS, Health Director

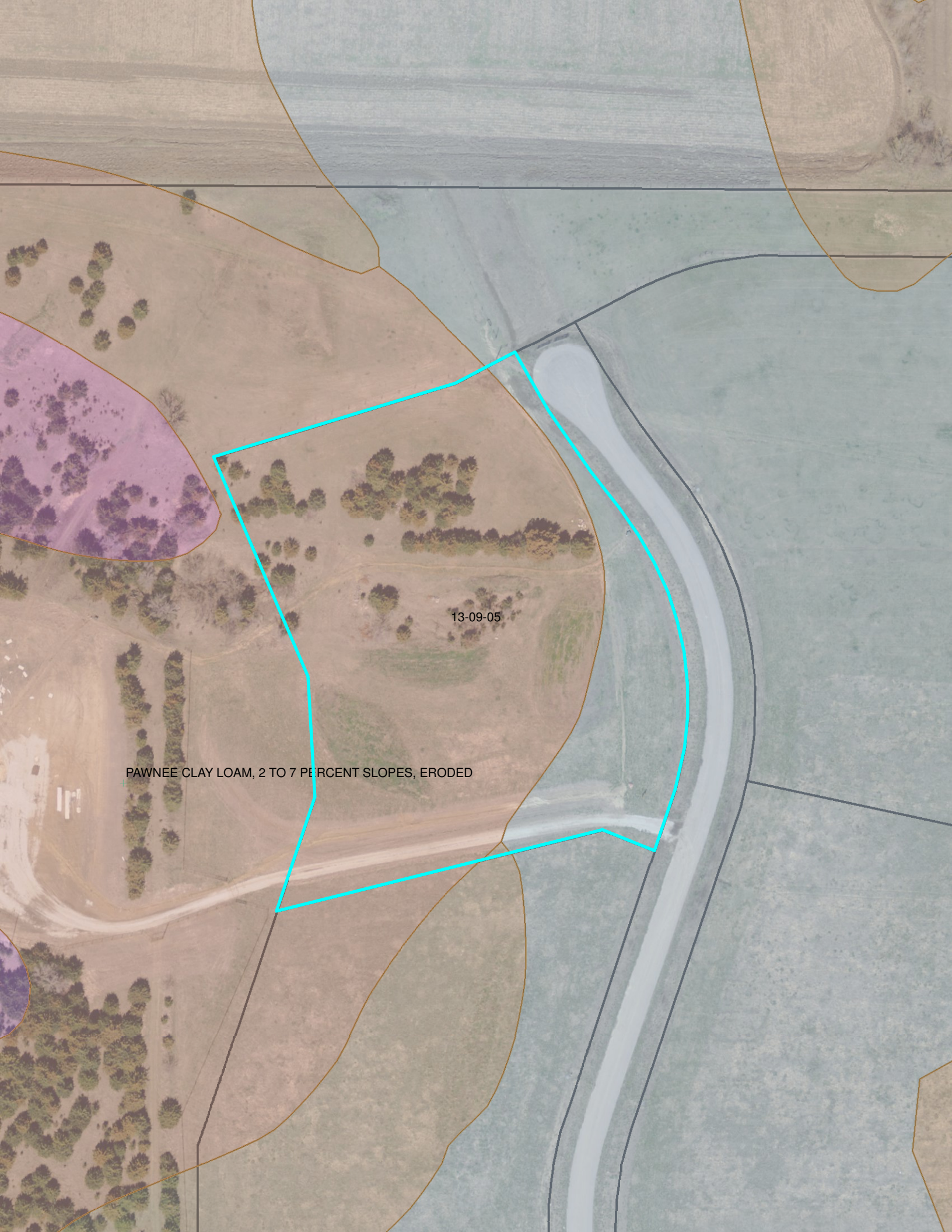
On-site Waste System Permit Holder:

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

RODGER HEMPEL
3035 BONACUM DR
LINCOLN NE 68502-5727


13-09-05
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED

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

SCANNED

A

Permit Number: HS000551

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)

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Address X 6255 SW 58th (no rural route) City Denton NB NE, Zip 68339

Legal Description 1/4 13 1/4 9 Section Township 5 Range Fox Trail Estates add Subdivision 2 Addition 1 Block Lot

Geographical Location (if known): Longitude W096° 48' 01.0" Latitude N40° 45' 01.2"

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

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Name X DANA + PAM WOLFE Signature X Pam Wolfe

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☐ Check if owner designed system Home Phone (619) 993-6004 Work Phone

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Name Rudger D. Hempel Company Name Rudger D. Hempel Contractor

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☐ 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 9/27/11 Date frwd 9/27/11	ACTION ☑ Approved ☐ Disapproved Signature	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 9/27/11 Date frwd 9/27/11	ACTION ☑ Approved ☐ Disapproved Signature	
3. City or County Engineer	Date rec'd 9-27-11 Date frwd 9-27-11	ACTION ☑ Approved ☐ Disapproved Signature Jim Blaunch	

11/18/11 Tank, pump line, partial later. DC

Installation Final Written Approval

By Doug Angel

Date 11/23/11

Business Office Use Only
Date Rec'd 9-28-11
Amt Paid 345.00
Rec'd By B. Hall Cash/Check No. 2693

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

* Issued as a Lagoon * Only 5 Bdrms Lonest

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

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0927-0928 CLR 45°-80°

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Person Conducting Percolation Tests

Name: GARY L. HOLLY
Phone: 402-587-0120
Address 71860-567 AVE.
FAIRBURY, NE. 68352

Sum of Percolation Rates: 296
Average of Rates: 49.3
Rate Used for Calculation: 50-60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-95

SCANNED

C

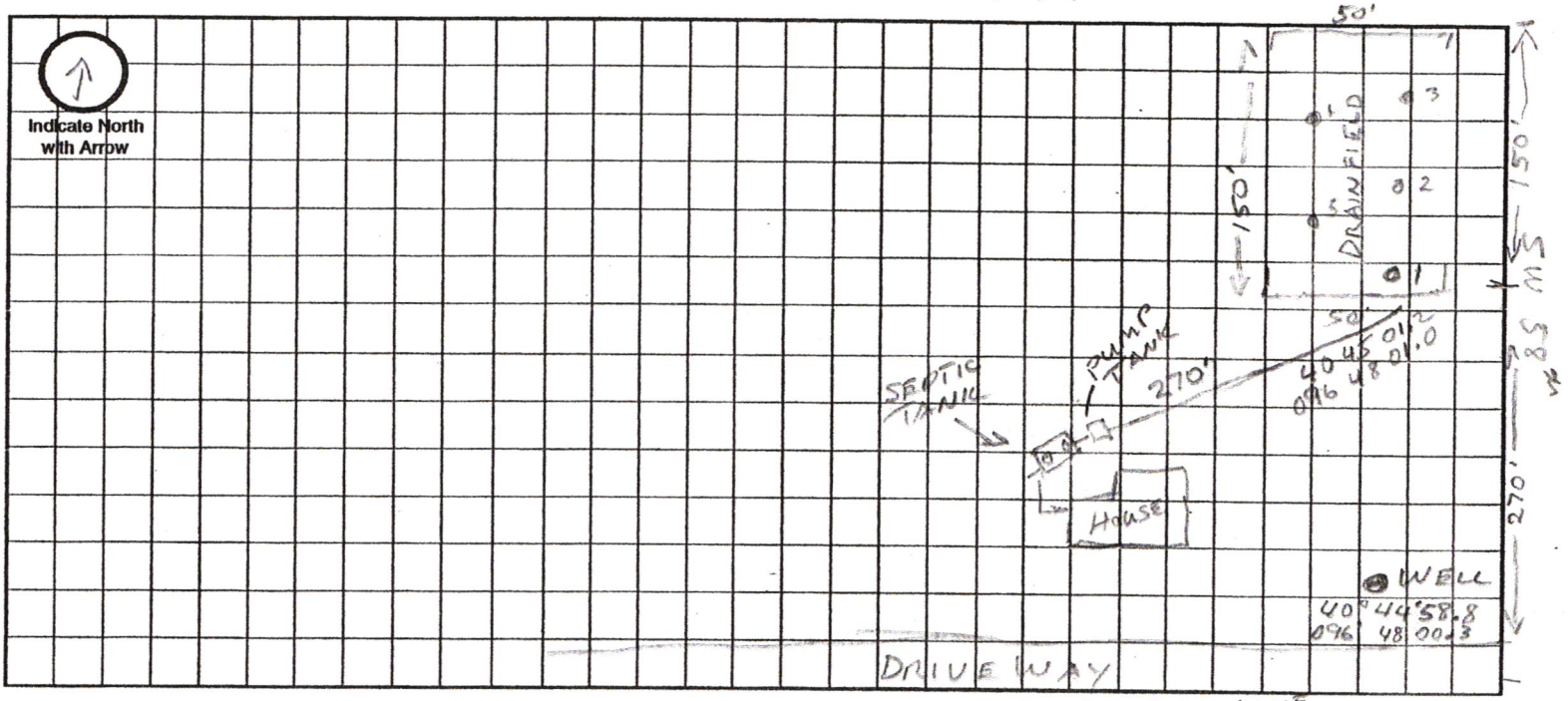
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number:

DANA + PAM WOLFE

Sewage Disposal System
Preliminary Plan Specifications

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

E. Required Signatures

Home Building Contractor X Rodger D Hempel Date X 9/25/11

Installer Gary Z. Holly Date 092611

FORM 23-102 10-96

DEC 15 2011

As Built Drawing

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

D

Permit Number: HS 000551

Sewage Disposal System

As Built Plans & Specifications

Date Nov. 25, 2011

System Location (Indicate correct number and street)

Address 6255 SW 58TH (no rural route) City LINCOLN, NE, Zip _____

A. Building Sewer

1. Material: _____
   Diameter: _____ 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 _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: PLASTIC
   Number of compartments: ONE
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 2 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 22 in.
8. Distances to: Well or suction line 180' ft.
   Stream NONE ft.
   Pressure line 100+ ft.
   Property line 150+ ft.

C. Distribution Box

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

D. Absorption Field

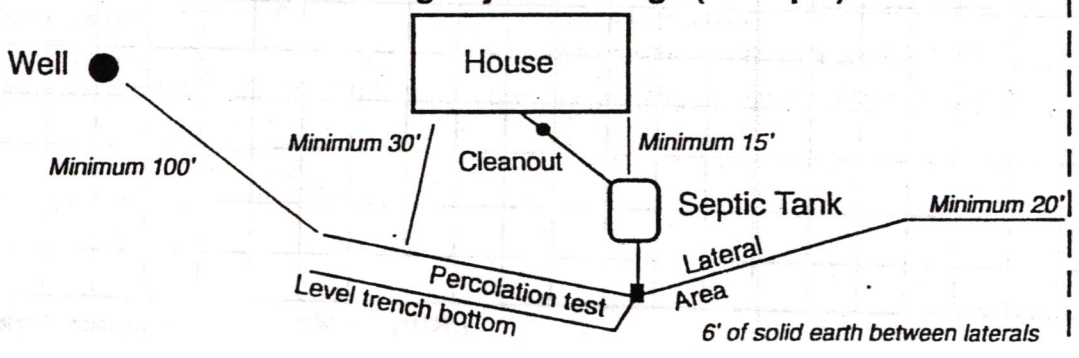
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe ☒ GRAVELESS CHAMBERS
   Diameter of half round: 36"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: No. 1 52 ft. No. 2 104 ft.
   No. 3 128 ft. No. 4 68 ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 50 in/100 ft.
   Average depth 30 in
4. Filter material: NATURAL SOIL
   Depth of material 30 in.
5. Distances to: Well or suction line 240 ft.
   Stream NONE ft.
   Pressure line 35 ft.
   Property line 55 ft.

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

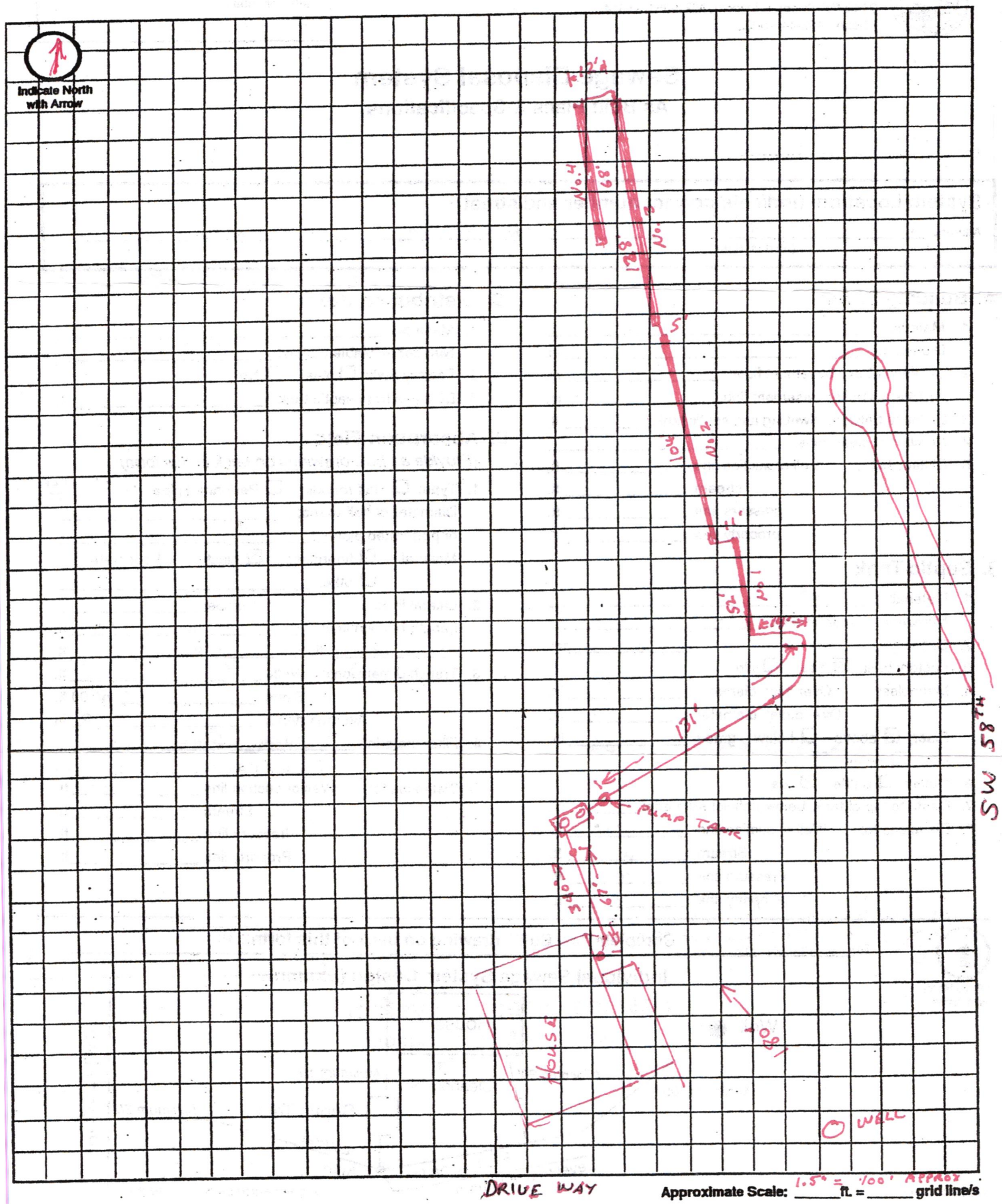
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: 1.5" = 100' Approx ft. = _____ grid line/s