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. HS000561

System Type: STANDARD

Situs: 13160 S. 8th Ct.

Legal Description: T08N-R06E-S11-2-Lot 1

Owner:

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

Issued:	11/17/2011
Expires:	11/16/2012

Judith A Halstead

Judith A. Halstead, MS, Health Director

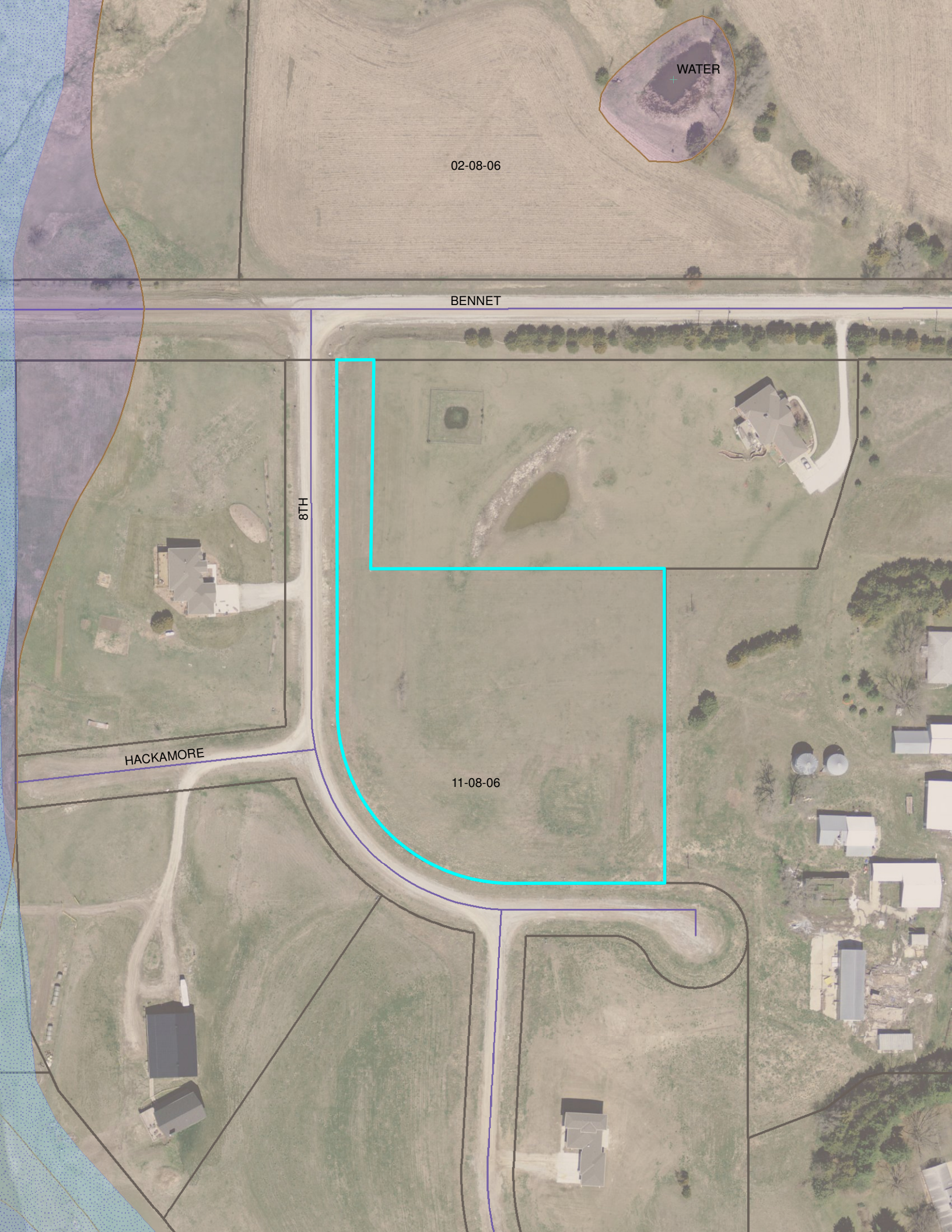
On-site Waste System Permit Holder:

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

SOUTHWICK SEWER
PO BOX 191
HICKMAN NE 68372


WATER
02-08-06
BENNET
8TH
HACKAMORE
11-08-06

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number #500086

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 13160 S. 8th Ct. City Roca, NE Zip 68430
(no rural route)

Legal Description 11 8 6 ~~Krueger~~ Rambling Rose Acres 2 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID

B. Owner

Name Brian Cleveland Signature
Address 1324 Three Pines CT City/State/Zip Lincoln Ne 68510
Home Phone 416-2393 Work Phone

C. Certified Installer

Name: Brad Southwick 1135 + 148 Signature Brad Southwick
Address 105 Locust P.O. Box 191 City/State/Zip Hickman Ne 68372
Work Phone 430-7606

D. Engineer

☐ **Check and complete if engineer designed system** P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 3.15

☐ 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 Clancy Dempsey 11/23/12
Date rec'd 11/14/11 Date frwd 11/16/11
ACTION ☒ Approved ☐ Disapproved Signature

2. Supt. Bldg. Insp. or Village Clerk Comments
Date rec'd 11/10/11 Date frwd 11/10/11
ACTION ☒ Approved ☐ Disapproved Signature

3. City or County Engineer Comments
Date rec'd 11-10-11 Date frwd 11-10-11
ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval
By Clancy Dempsey
Date 11/23/12

Business Office Use Only
Date Received 11-15-11 Amount Paid 345.-
Received By BA Cash/Check No. 1343

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

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 13130 S. 8 (no rural route) City Roca NE, Zip 68430

Owner Brian Cleveland Addresss

Soil Type (SCS): WTC2 Percolation Rate: min./inch

Date of Tests 9/30 to 10/1/11 Weather: Precipitation — Temperature 70s

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	30	9/30	4:00	10/1	8:20	10/1	2:10	23 3/8	10/1	2:40	30	1/2	60
2			PM	Am	AM		PM	24 7/8		PM		1/2	60
3								24 1/8				5/8	48
4								23 1/2				5/8	48
5								24 1/2				1/2	60
6								23 1/8				5/8	48

Person Conducting Percolation Tests

Name: Brad Southwick

Phone: 402 430-7606

Address 105 Locust P.O. 191

Hickman, Ne 68372

Sum of Percolation Rates: 324

Average of Rates: 54

Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

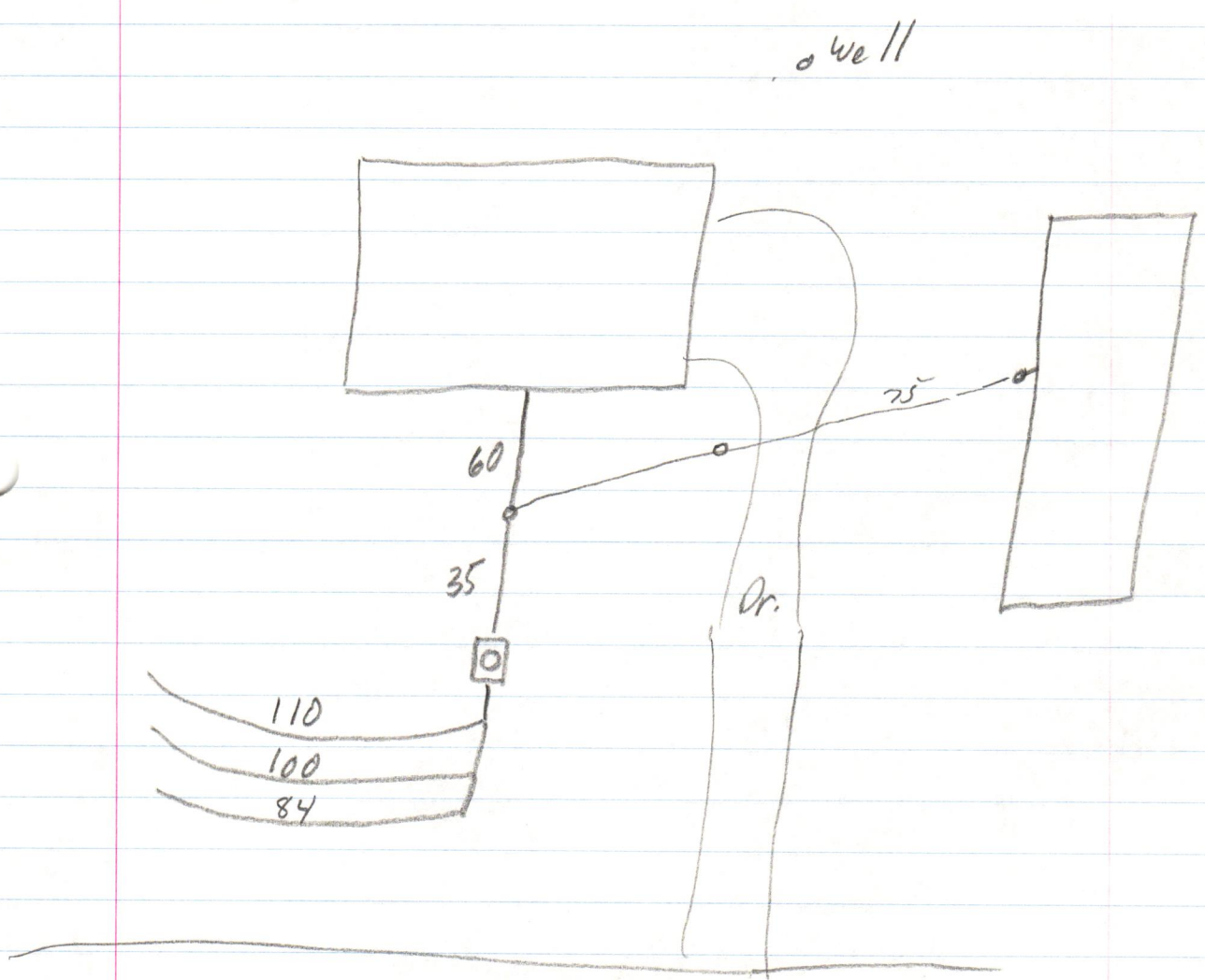
Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

13160 S. 8 CT
T8 R6 S 11 - 2 Lot 1



Rambling Rose Acres

Blk 2, Lot 1

T8, R6, S11

~~H~~ 13160

13105 So. 8 Brian & Marla Cleveland

1/23/12

