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

A

Permit Number HS000689

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 6201 W Yankee Lake RD (no rural route) City Denton NE Zip 68339

Legal Description Yankee Lake Acres 4 1

1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 03-24-204-001-000

B. Owner

Name Jared & Amanda Koch Signature

Address 1930 Indigo Road City/State/Zip Lincoln NE 68521

Home Phone 402-304-2835 Work Phone

C. Certified Installer

Name: Richard Koch Signature

Address 330 Union Ave City/State/Zip Mascow Nebraska 68370

Work Phone 402-768-3477

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: 1123

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

☐ 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. 02-38

1. **Health Department** Date rec'd 11/9/12 ACTION ☒ Approved ☐ Disapproved
Site visits Date frwd 11/9/12 Signature

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

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

Installation Final Written Approval
By

Date

Business Office Use Only
Date Received 11-13-12 Amount Paid 355.00
Received By BM Cash/Check No. 6185

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

Form A Updated: 5/10

LLCHD HS000689

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

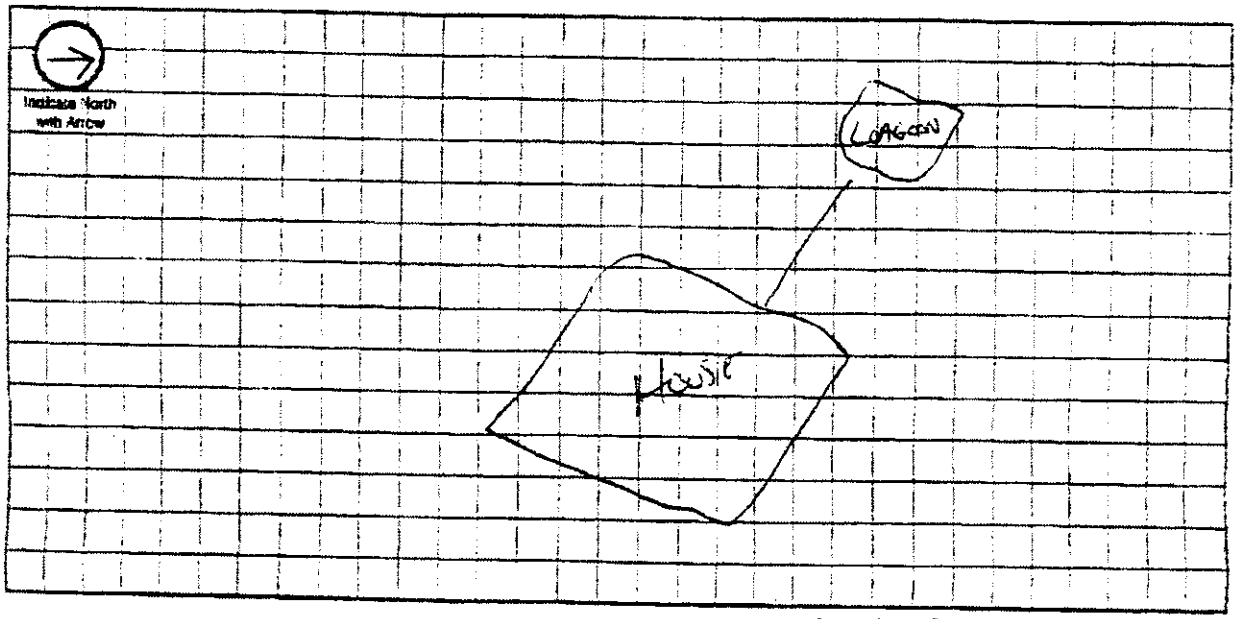
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ ft. = _____ grid lines

A. Onsite System Location

Address (no rural route) 6301 W Yankee Lake RD City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. _____ gals Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____ ☐ Lagoon Max seepage 1/8" per day

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate _____ (min/inch = mpi) No. of Bedrooms _____ Soil Type _____ Land Slope _____ %

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEC approved Total Square feet of drainfield _____ sq.ft.

Total length of laterals _____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches _____ Width _____ No. of drop boxes _____ Distribution Box _____

No. of absorption beds _____ Width _____ No of Distribution lines per bed _____

E. 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 ☑	☑

F. Required Signatures

Home Building Contractor _____ Date _____

Installer _____ Date _____

Onsite Form C 12_08

11-14-2012 12:28:36

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

A

Permit Number

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 6201 W Yankee Lake RD (no rural route) City Denton NE Zip 68339

Legal Description Yankee Lake Acres 4 1

1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 03-24-204-001-000

B. Owner

Name Jared & Amanda Koch Signature

Address 1930 Indigo Road City/State/Zip Lincoln NE 68521

Home Phone 402-304-2835 Work Phone

C. Certified Installer

Name: Richard Koch Signature

Address 334 Union Ave City/State/Zip Tobias Nebraska 68370

Work Phone 402-768-3477

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: 11123

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

☐ 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 Amount Paid
Received By Cash/Check No.

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

Form A Updated: 5/10

LLCHD HS000689

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

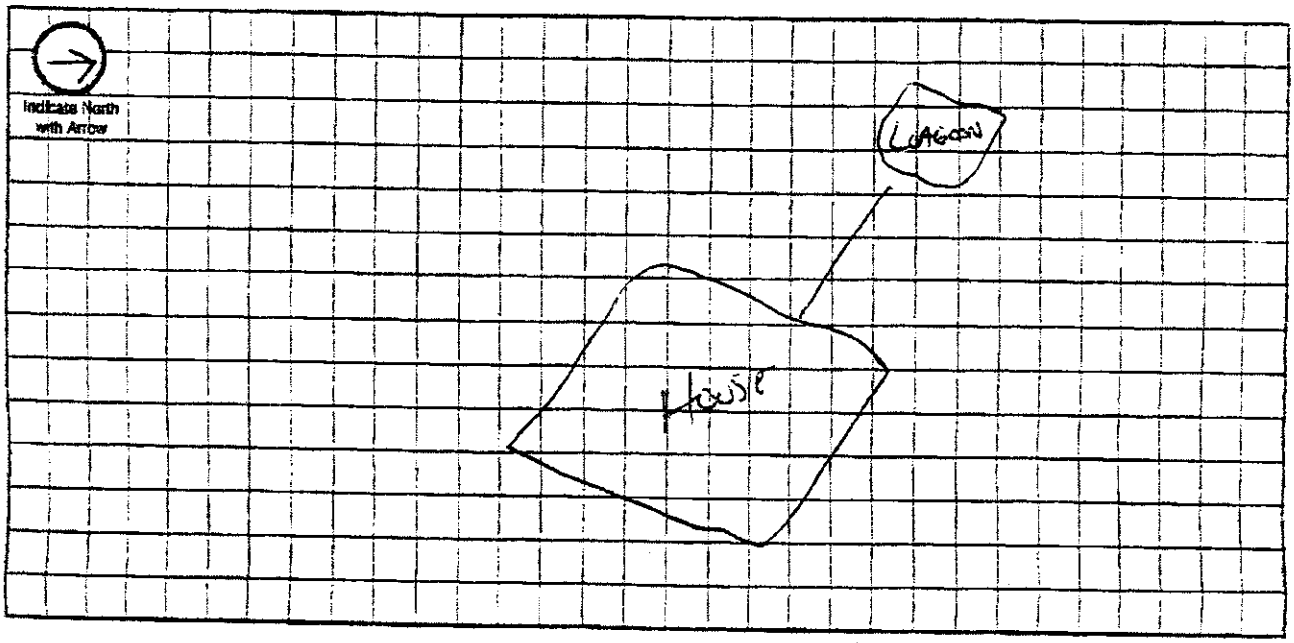
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ft. = _____ grid lines

A. Onsite System Location

Address (no rural route) 10201 W Yankee Lake RD City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap._____ gals Tank Material: ☐ Concrete ☐ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1/8" per day)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____sq.ft.

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

E. 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
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Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☒	50 ☒	N/A ☐	30 ☒	50 ☒	100 ☒	200 ☒	☒

F. Required Signatures

Home Building Contractor_____ Date_____

Installer_____ Date_____

11-14-2012 12:28:38

Nate C. Hartman

From: Todd A. Stutzman
Sent: Friday, November 09, 2012 10:18 AM
To: Nate C. Hartman
Subject: 6201 W Yankee Lake Rd.

Nate,

Yankee Lake Acres Lot 1 Block 4 is buildable.

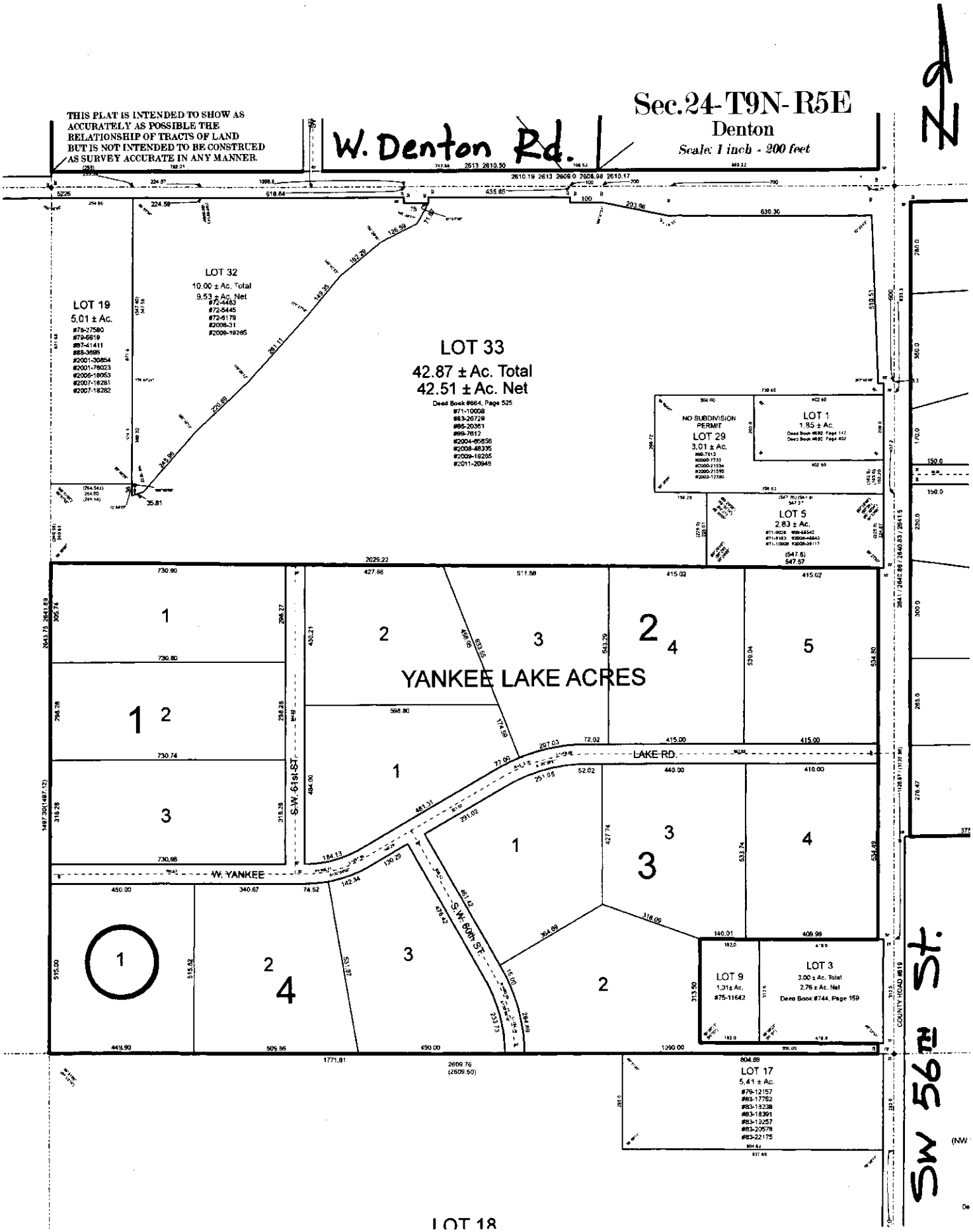
Todd

Nate C. Hartman

From: Ken D. Schroeder
Sent: Friday, November 09, 2012 11:27 AM
To: Nate C. Hartman
Subject: sewage disposal system permit for 6201 W. Yankee Lake Road
Attachments: part of sec 24-9-5.pdf

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for lot 1, Block 4 "Yankee Lake Acres" located in the NE 1/4 of Section 24, T9N, R5E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec 24-9-5)*
As always, subject to confirmation of and compliance with any floodplain elevation issues prior to construction.
Ken

Kenneth D. Schroeder, RLS
Lancaster County Surveyor
444 Cherrycreek Road, Bldg. "C"
Lincoln, Nebraska 68528
kschroeder@lancaster.ne.gov
Phone (402) 441-7681
Fax (402) 441-8692


THIS PLAT IS INTENDED TO SHOW AS ACCURATELY AS POSSIBLE THE RELATIONSHIP OF TRACTS OF LAND BUT IS NOT INTENDED TO BE CONSTRUED AS SURVEY ACCURATE IN ANY MANNER.
W. Denton Rd.
Sec.24-T9N-R5E
Denton
Scale: 1 inch - 200 feet
LOT 19
5.01 ± Ac.
LOT 32
10.00 ± Ac. Total
9.53 ± Ac. Net
LOT 33
42.87 ± Ac. Total
42.51 ± Ac. Net
NO SUBDIVISION PERMIT
LOT 29
3.01 ± Ac.
LOT 1
1.85 ± Ac.
LOT 5
2.83 ± Ac.
YANKEE LAKE ACRES
LAKE RD.
W. YANKEE
S.W. 61st ST.
S.W. 64th ST.
LOT 9
1.31± Ac.
#75-11642
LOT 3
3.00 ± Ac. Total
2.76 ± Ac. Net
Deed Book #744, Page 159
LOT 17
5.41 ± Ac.
COUNTY ROAD #619
SW 56th St.
LOT 18

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. HS000689

System Type: LAGOON

Situs:

Legal Description: T09N-R05E-S24-4-Lot 1

Owner:

Permit Fee:	$355.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$355.00

Issued:	11/13/2012
Expires:	11/13/2013

Judith A Halstead

Judith A. Halstead, MS, Health Director

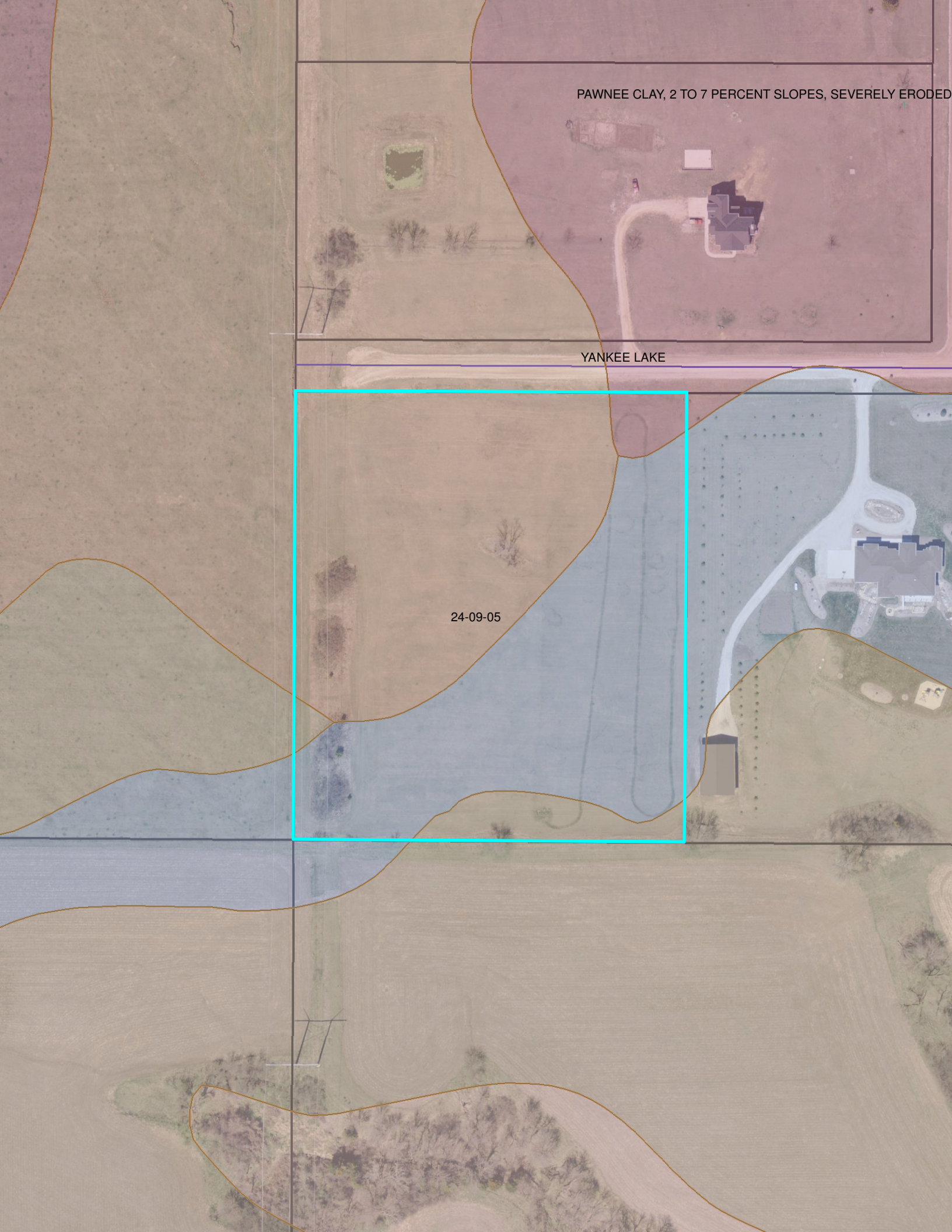
On-site Waste System Permit Holder:

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

JARED KOCH
1930 INDIGO RD
LINCOLN NE 68516


PAWNEE CLAY, 2 TO 7 PERCENT SLOPES, SEVERELY ERODED
YANKEE LAKE
24-09-05

SCANNED

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

A

Permit Number H5000689

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 6201 W Yankee Lake RD (no rural route) City Denton NE Zip 68339

Legal Description Yankee Lake Acres 4 1

1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 03-24-204-001-000

B. Owner

Name Jared & Amanda Koch Signature

Address 1930 Indigo Road City/State/Zip Lincoln NE 68521

Home Phone 402-304-2835 Work Phone

C. Certified Installer

Name: Richard Koch Signature

Address 331 Union Ave City/State/Zip Hoskins Nebraska 68370

Work Phone 402-768-3477

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: 11123

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

☐ 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. 02-38

1. **Health Department** Date rec'd 11/9/12 ACTION ☒ Approved ☐ Disapproved
Site visits Date frwd 11/9/12 Signature

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

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

Installation Final Written Approval
By Doug Lamm
Date 3/20/13

Business Office Use Only
Date Received 11-13-12 Amount Paid 355.00
Received By BM Cash/Check No. 6185

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

Form A Updated: 5/10

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

A

Permit Number

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: [X] 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 6201 W Yankee Lake RD (no rural route) City Denton NE Zip 68339

Legal Description 24 9 5 Yankee Lake Acres 4 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 03-24-204-001-000

B. Owner

Name Jared & Amanda Koch Signature

Address 1930 Indigo Road City/State/Zip Lincoln NE 68521

Home Phone 402-304-2835 Work Phone 402-304-2835

C. Certified Installer

Name: Richard Koch Signature

Address 33V Union Ave City/State/Zip Hoskins Nebraska 68370

Work Phone 402-768-3477

D. Engineer

[ ] Check and complete if engineer designed system P.E. License Number: 1123

Designer Name Firm Work Phone

E. This system will serve a

[X] Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? [X] Yes [ ] No Total Acres 5.33

[ ] Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater [X] Domestic [ ] Non-Domestic Well Permit Applied for [ ] Yes [ ] No [X] 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 3/26/12

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

Form A Updated: 5/10

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

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 6201 W Yankee Lake Road (no rural route) City Denton NE, Zip 68339

Owner JARED & Amanda Koch Address 1930 Indigo Road, Lincoln, NE, 68521

Date of Tests 11/17/12 to 11/18/12 Weather: Precipitation 0 Temperature 52°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					Results		
		Start		End		Start		Initial	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 Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	32	11/17	11:00	11/17	6:00	11/18	2:00	6	11/18	2:30	30	.5	60
2	32	11/17	11:00	11/17	6:00	11/18	2:00	6	11/18	2:30	30	.75	40
3	32	11/17	11:00	11/17	6:00	11/18	2:01	6	11/18	2:31	30	.75	40
4	32	11/17	11:00	11/17	6:00	11/18	2:01	6	11/18	2:31	30	1	30
5	32	11/17	11:00	11/17	6:00	11/18	2:02	6	11/18	2:32	30	.75	40
6	32	11/17	11:00	11/17	6:00	11/18	2:02	6	11/18	2:32	30	.625	48
								6					
								6					

Person Conducting Percolation Test

Name:

Phone: 402-768-6444

Address 334 UNION AVE

HEBRON, NEBR. 68370

Soil type (NRCS Maps/Other) Clay, Loam

Groundwater Depth

Sum of Percolation Rates: 258

Average of Rates: 43 mpi

Rate Used for Calculation: 258/6 = 43

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

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

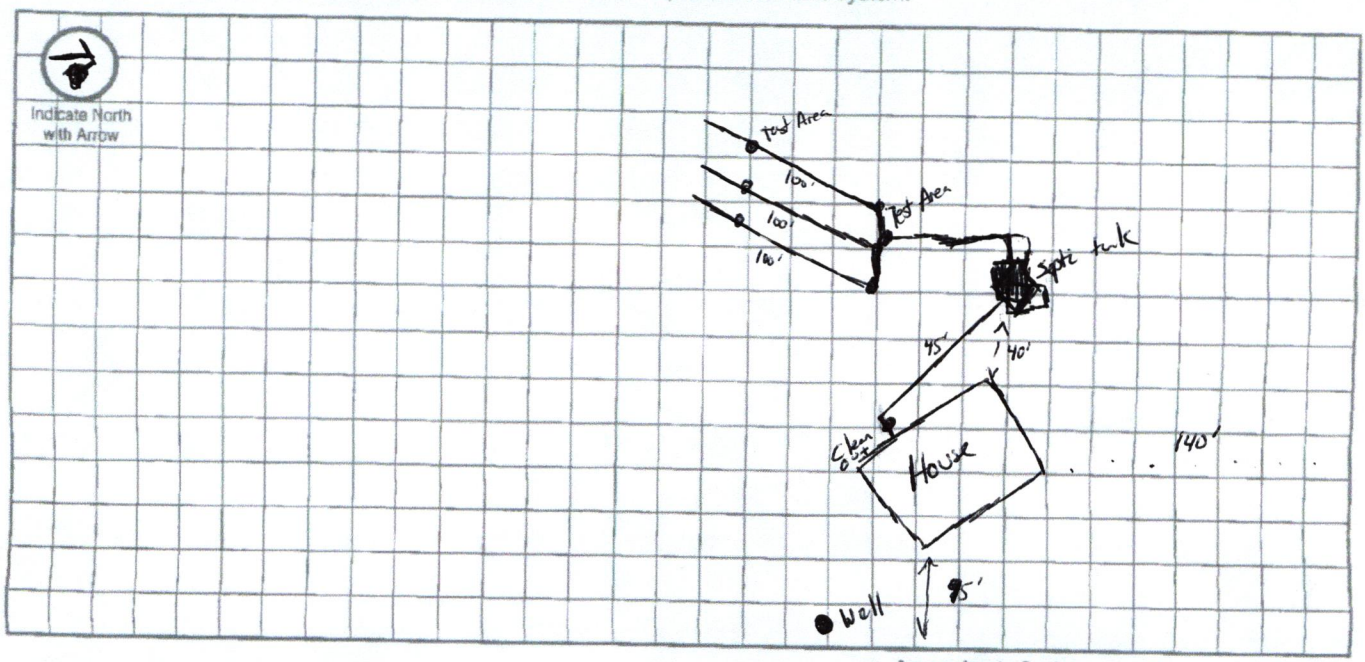
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ ft. = _____ grid line/s

A. Onsite System Location

Address (no rural route) 6201 W Yankee Lake Road City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. 1250 gals Tank Material: ☐ Concrete ☒ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1/8" per day)

C. Reserve Area for Replacement Onsite System

☒ Drainfield Absorption Area (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 43 (min/inch = mpi) No. of Bedrooms 3 Soil Type Clay, Loam, Wymore silty clay loam Land Slope 8 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 900 sq.ft.

Total length of laterals 300' Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 3 Width 36" No. of drop boxes 1 Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

E. 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 ☐	☐

F. Required Signatures

Home Building Contractor _____ Date _____

Installer _____ Date 11/16/12

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 11/18/12 Legal Description Yankee Lake Acres B4 L1
1/4 1/4 Section Township Range

Onsite System Location

Address (no rural route) 6201 W Yankee Lake Road City Denton NE. Zip 68339

Owner JARED & Amanda Koch Address 1930 Indigo Road, Lincoln, NE 68521

A. Sewer Pipe

1. Material: _____
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 24 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

☐ Label with Manufacturer, address and gallon capacity

1. Material: Plastic
   Number of compartments: _____
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ 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: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ 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

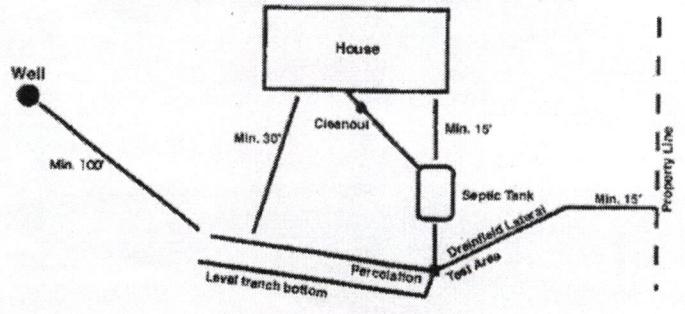
☒ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☒ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed 3
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width 36" ft.
   Distribution Pipe Slope 1" in/100 ft.
   Average depth ~~24~~ 30 in
4. Filter material: DIRT
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   House or building _____ ft.
   Lake or Stream _____ ft.

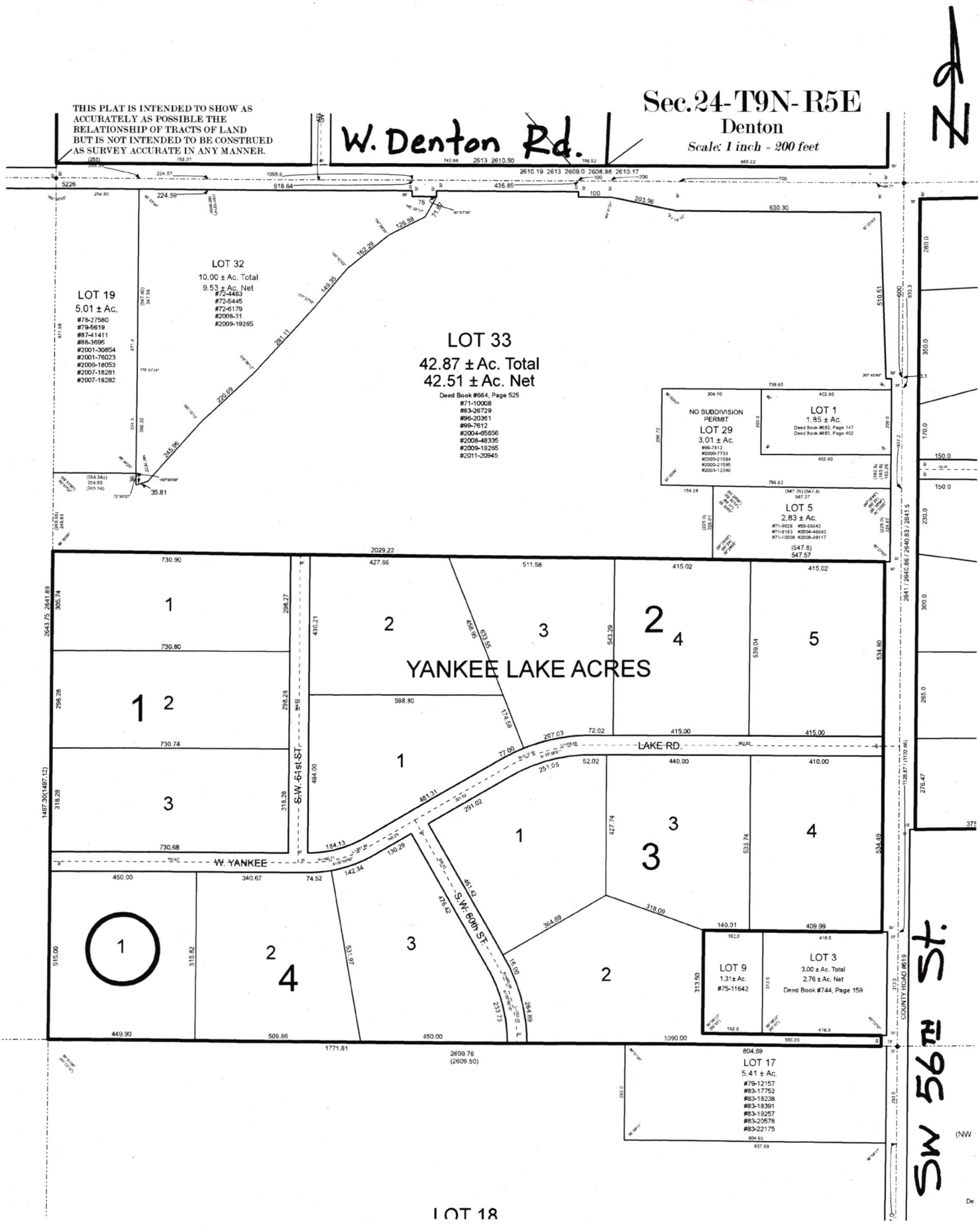
Complete As-Built drawing on the back fo this form.

Indicate North with Arrow

Onsite Wastewater System Design (Example)



SCANNED


THIS PLAT IS INTENDED TO SHOW AS ACCURATELY AS POSSIBLE THE RELATIONSHIP OF TRACTS OF LAND BUT IS NOT INTENDED TO BE CONSTRUED AS SURVEY ACCURATE IN ANY MANNER.
W. Denton Rd.
Sec. 24-T9N-R5E
Denton
Scale: 1 inch = 200 feet
LOT 19
5.01 ± Ac.
#78-27580
#79-9619
#87-41411
#88-3695
#2001-30854
#2001-76023
#2009-18053
#2007-18281
#2007-18282
LOT 32
10.00 ± Ac. Total
9.53 ± Ac. Net
#72-4483
#72-5445
#72-6179
#2008-31
#2009-19265
LOT 33
42.87 ± Ac. Total
42.51 ± Ac. Net
Deed Book #664, Page 525
#71-10008
#63-26729
#96-20361
#99-7612
#2004-65656
#2008-48335
#2009-19265
#2011-20945
NO SUBDIVISION PERMIT
LOT 29
3.01 ± Ac.
#99-7612
#2000-7733
#2000-21594
#2000-21595
#2003-12390
LOT 1
1.85 ± Ac.
Deed Book #692, Page 147
Deed Book #693, Page 402
LOT 5
2.83 ± Ac.
#71-9028 #99-55542
#71-9183 #2004-46643
#71-10009 #2008-39117
YANKEE LAKE ACRES
LAKE RD.
S.W. 61st ST.
W. YANKEE
S.W. 60th ST.
LOT 9
1.31± Ac.
#75-11642
LOT 3
3.00 ± Ac. Total
2.76 ± Ac. Net
Deed Book #744, Page 159
LOT 17
5.41 ± Ac.
#79-12157
#83-17752
#83-18238
#83-18391
#83-19257
#83-20578
#83-22175
LOT 18
COUNTY ROAD #619
SW 56th St.