Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS000714

System Type: Standard

Situs: No Situs Address

Permit Fee: $355.00

Description: 2CONESTOGA LAKE ESTATES, BLOCK 4, Lot 2

Issued: 1/31/2013

Expires: 1/31/2014

Owner: FOSTER, BRIAN R & CHARLOTTE E
2416 DONIPHAN
ST JOSEPH, MO 64507

Judith A Halstead
Judith A. Halstead, MS, Health Director

Dear Applicant:

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

BECKER CONSTRUCTION
2549 COUNTY RD B
VALPARAISO, NE 68065

JAN 22 2013

A

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

Permit Number: H5000714

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 9045 W. Burnham (no rural route) City Denton NE, Zip 68339

Legal Description SE (1/4) SW (1/4) 3 (Section) 9 (Township) 5E (Range) Subdivision Addition Block Lot

Geographical Location (if known): Longitude 40 46 25.70 Latitude -96 50 39.90

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

B. Owner

Name BECKER CONSTRUCTION, INC. Brad Becker

Address 2549 COUNTY RD. B City/State/Zip VALPARAISO, NE 68065

☐ Check if owner designed system Home Phone _____ Work Phone 402-416-3799

C. Contractor

Name Justyn Peterson Company Name Earnest Well Drilling Inc

Address 2796 W. Milford Rd P.O. Box H City/State/Zip Milford, NE 68405

☒ Check if contractor designed system Work Phone 402-761-2281

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 1/28/13 Date frwd 1/28/13	**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 _____

Business Office Use Only

Date Rec'd 1-29-13
Amt Paid #355.00
Rec'd By B. Hall Cash/Check No. 6265

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

Earnest Well Drilling Inc.
2796 W. Milford Rd.
Milford, NE 68405
402-761-2281Office
402-761-4281 Fax

Date: ~~11/21/12~~ 1/24/13

To: Nate

Company Name: LCHD

Company Fax: 441 - 3890

From: Justyn

# of Pages (including Cover) 4

Comments: Call with questions

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

Date 11/20/12

System Location (Indicate correct number and street)
Address 9045 W. Burnham (no rural route) City Denton NE, Zip 68339

A. Building Sewer
1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 30 ft.
4. Number of elbows used: ____
5. Distances to: well or suction line 100 ft.
   stream N/A ft.
   pressure line 30 ft.
   property line 200 ft.

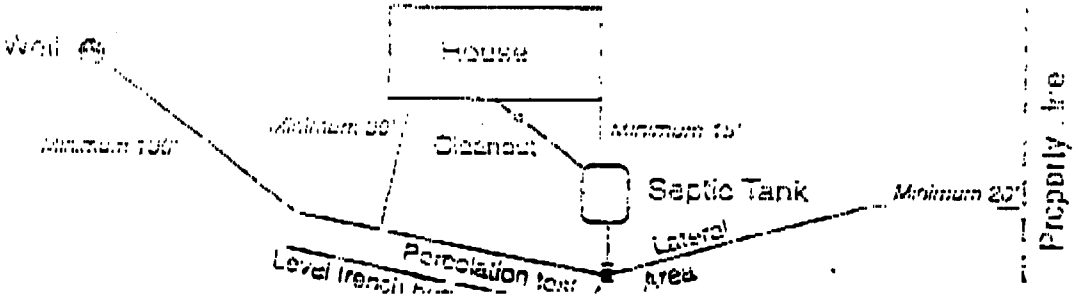
B. Septic Tank
1. Material: Plastic
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manhole: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Risers: ☒ above ☐ below grade 2 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank below undisturbed ground: 24 in.
8. Distances to: Well or suction line 100 ft.
   Stream 400 ft.
   Pressure line 30 ft.
   Property line 30 ft.

C. Distribution Box
1. Material: Plastic
   Number available outlets: 2
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: 3.5"
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   ____ ft. ____ ft. ____ ft.
3. Trench dimensions: Width: 24 in.
   Slope ____ 0 in per 100 ft.
   Average depth 24 in.
4. Filter material: Pea Gravel
   Depth of material 24 in.
5. Distances to: Well or suction line 100 ft.
   Stream 400 ft.
   Pressure line 30 ft.
   Property line 30 ft.

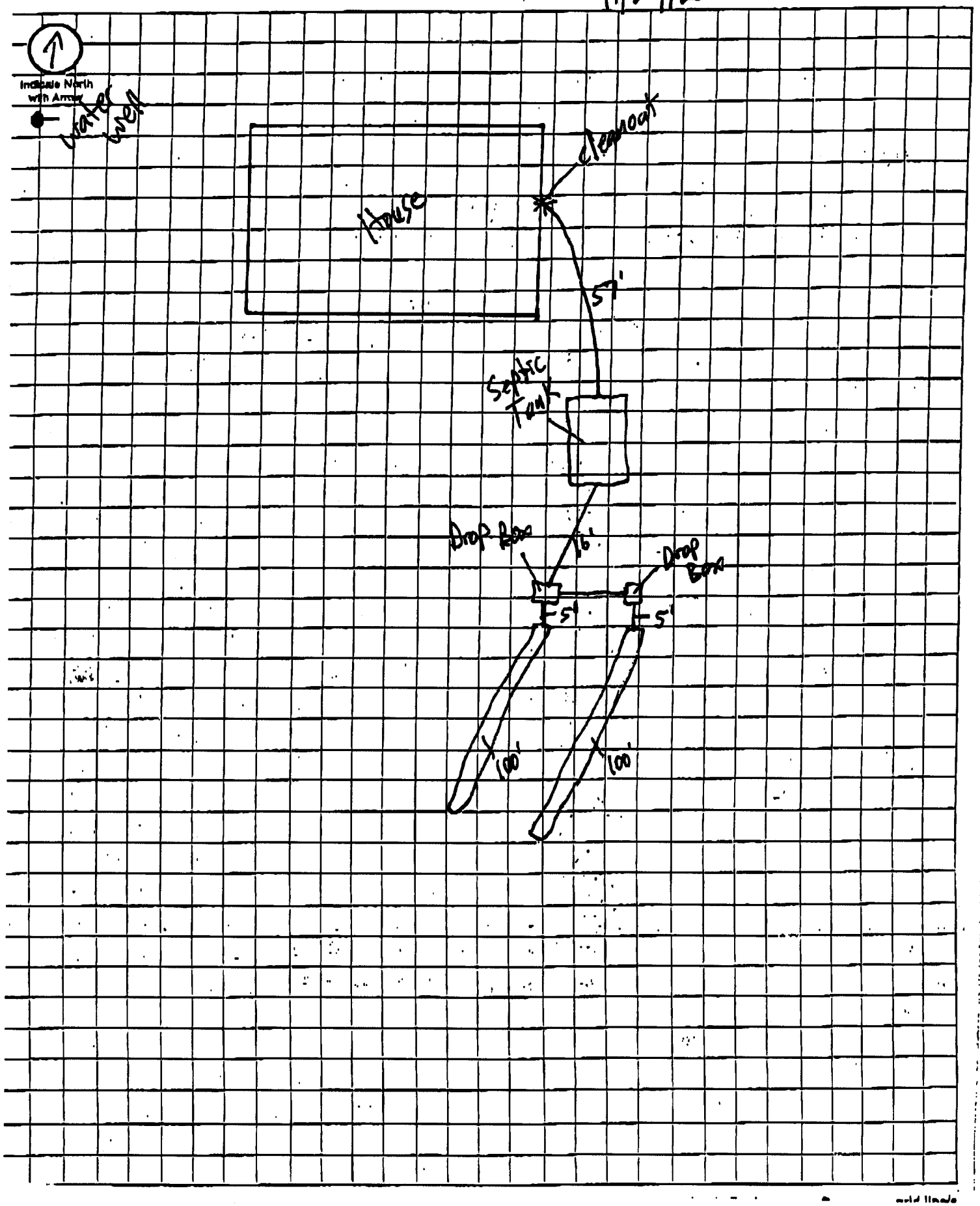
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



As Built Drawing

11/20/12



SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section _____
Township _____ Range _____
1/4 Section _____

Owner: Brian Foster
Address: SW 98th & Pioneers

Property Dimensions: _____ acres

Soil Type: Silty Clay ____ Silty Clay Loam ____ Sandy Loam ____ Silty Loam ____ Clay Loam X Sandy Clay ____

Dates of Tests: 9-8-12 to 9-9-12 **Weather:** Precip. Ø Temp. 80's

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
		Pre-Saturation Period				Percolation Readings					Results	
		Start		End		Start			End			Water
	Hole	Date	Time	Date	Time	Date	Time	Water	Time	Water	Elapsed	Level
Hole	Depth	(Mo.	(Hr.	(Mo.	(Hr.	(Mo.	(Hr.	Level	(Hr.	Level	Time	Drop
No.	(in.)	Day)	Min.)	Day)	Min.)	Day)	Min.)	(in.)	Min.)	(in.)	(Min.)	(in.)
1	36	9-8	2:30pm	9-8	6:30pm	9-9	11:50am	6	12:20pm	5	30	1
2	36	9-8	2:30pm	9-8	6:30pm	9-9	11:50am	6	12:20pm	4¾	30	1¼
3	36	9-8	2:30pm	9-8	6:30pm	9-9	11:50am	6	12:20pm	5	30	1
4	36	9-8	2:30pm	9-8	6:30pm	9-9	11:55am	6	12:25pm	5	30	1
5	36	9-8	2:30pm	9-8	6:30pm	9-9	11:55am	6	12:25pm	5	30	1
6	36	9-8	2:30pm	9-8	6:30pm	9-9	11:55am	6	12:25pm	5	30	1

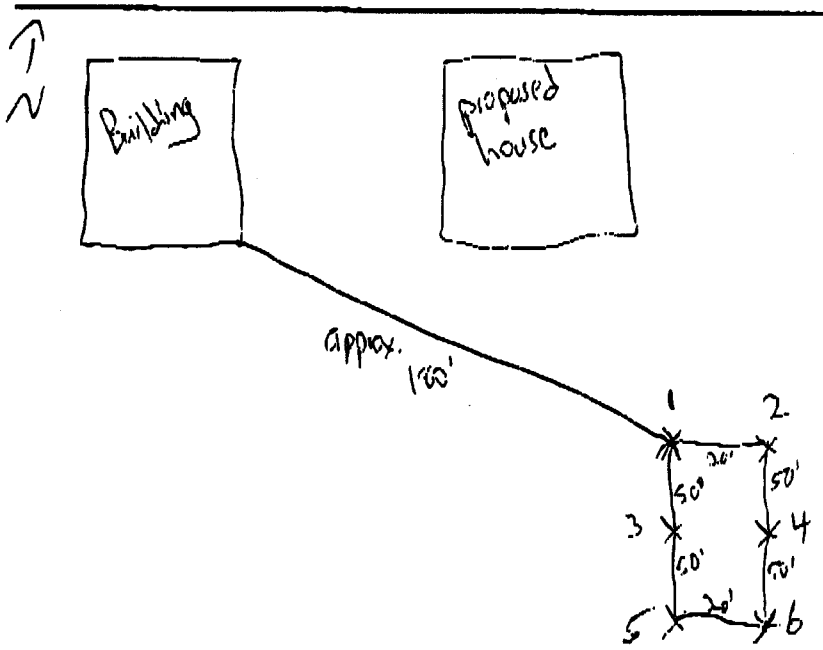
Sum of Water Level Drops (in.) [Column m]: 6¼
Average of Water Level Drops (in.) [Column m]: 1.04
~~Inches per Minute:~~ _____
2 8.85 MPI

PERSON CONDUCTING TEST:
Name: Justyn Peterson
Address: 322 - 238th Rd
Milford, NE 68405
Phone: 402-641-6174
Signature: Justyn Peterson

Square Feet of Lateral per Bedroom: 250

SKETCH SHOWING HOLE LOCATION:

Need 750 sq. ft. Total



Original's Signature

JAN 22 2013

SCANNED

A

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

Permit Number: H5000714

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Installation Final Written Approval

By ~~Doug Amos~~ Doug Amos

Date ~~1/29/13~~ 11/20/13

Business Office Use Only

Date Rec'd 1-29-13
Amt Paid #355.00
Rec'd By B. Hall Cash/Check No. 6265

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