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

A

Permit Number: 02380253301

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 10301 Stagecoach Rd (no rural route) City Kramer NE, Zip 68333

Legal Description Lot 24 NW¼ of Section 4 Township 7 Range 5 E of 6th P.M. Subdivision Addition Block Lot
(1/4 1/4 Section Township Range)

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Todd Adam Signature Todd Adam

Address 4911 NW 8th City/State/Zip Lincoln NE 68521

☒ Check if owner designed system Home Phone 432-6098 (cell) Work Phone 786-3412

C. Contractor

Name Harper Well & Plumbing Company Name _____

Address P.O Box 15 City/State/Zip Adams NE 68301

☐ Check if contractor designed system Work Phone 402-432-2704

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 9/9/02 Date frwd 9/9/02 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9-9-02 Date frwd 9-9-02 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 9/9/02 Date frwd 9/9/02 **ACTION** ☒ Approved ☐ Disapproved Signature _____

9/10/02 Lagoon too small – slope too steep Harper Contacted. DS.
2/28/03 – Corrected – need fence

Installation Final Written Approval

By _____

Date 4/18/03

Business Office Use Only
Date Rec'd 9/9/02
Amt Paid $200.00
Rec'd By _____ Cash/Check No. 1068

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

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B

Permit Number: 023802533

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 10301 Stagecoach Rd (no rural route) City Kramer NE, Zip 68333

Owner Todd Adam Addresss 4911 NW 8th Lincoln, NE 68521

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

Date of Tests _____ to _____ Weather: Precipitation _____ Temperature _____

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)
		Installing Bentonite In Bottom of Lagoon											

Person Conducting Percolation Tests

Name: _____

Phone: _____

Address _____

_____

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

_____

_____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

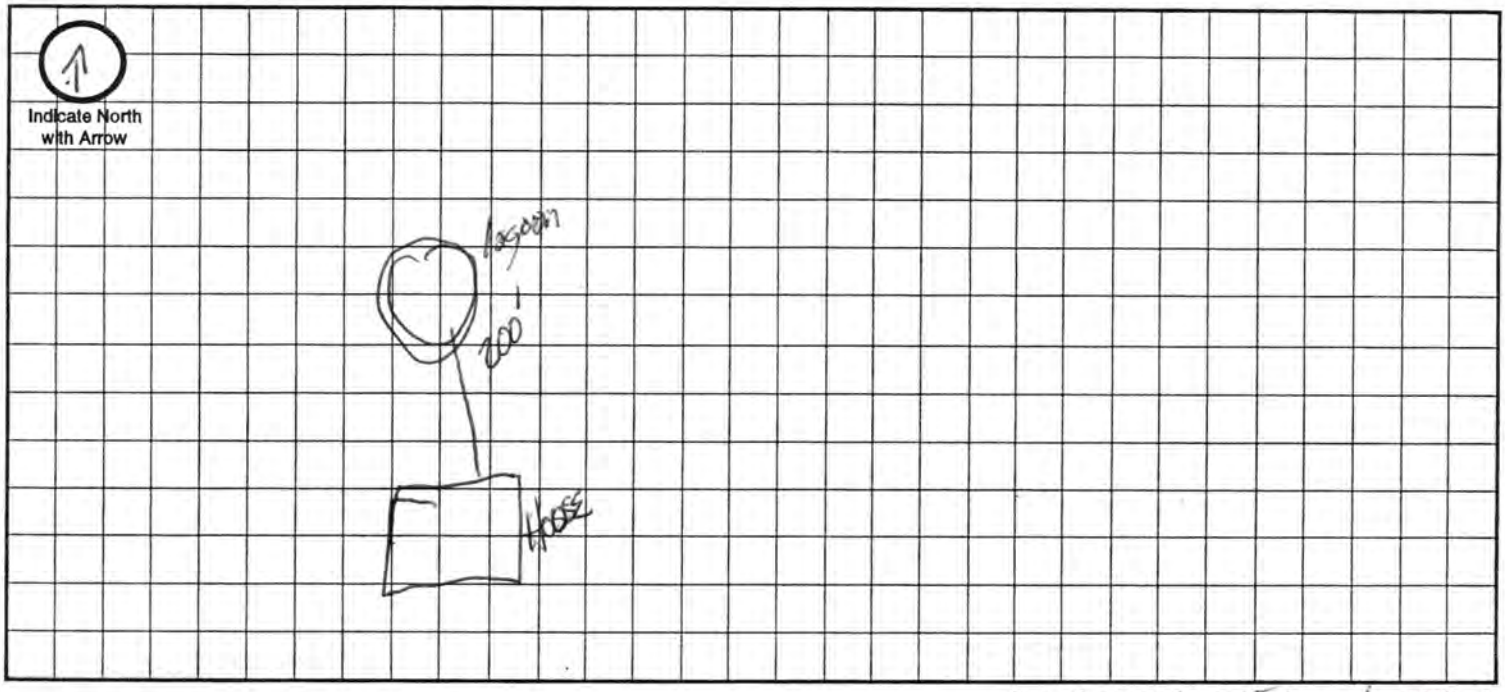
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 02380 2533

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: 75 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 10301 Stagecoach Rd City Kramer NE, Zip 68333

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other Lagoon Must be no more than 1/4 Seepage / day

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

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

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

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 _____ Date 9/9/02

Installer Hyper Willis Plbg Inc By Ronnie Hyper Date 9/7/02

FORM 23-102 10-96

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

D

Permit Number: 023802533

Sewage Disposal System

As Built Plans & Specifications

Date 9/10/02

System Location (Indicate correct number and street)

Address 10301 W. Stagecoach Rd (no rural route) City Kramer NE, Zip 68333

A. Building Sewer

1. Material: PVC Sch 40
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 1' in.
3. Distance between dwelling and ~~septic tank~~ Lagoon: 200' ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 300' ft.
   stream 100' ft.
   pressure line - ft.
   property line - ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ 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. Outlet: ☐ baffle ☐ tee
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

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

D. Absorption Field

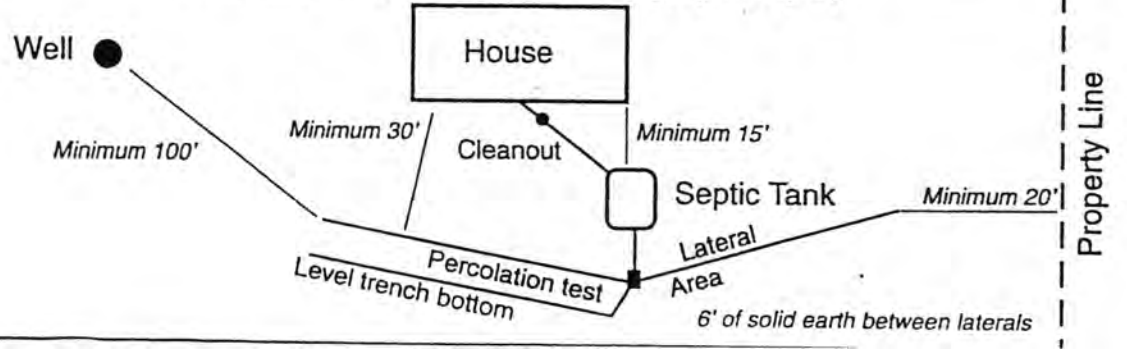
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Indicate North with Arrow

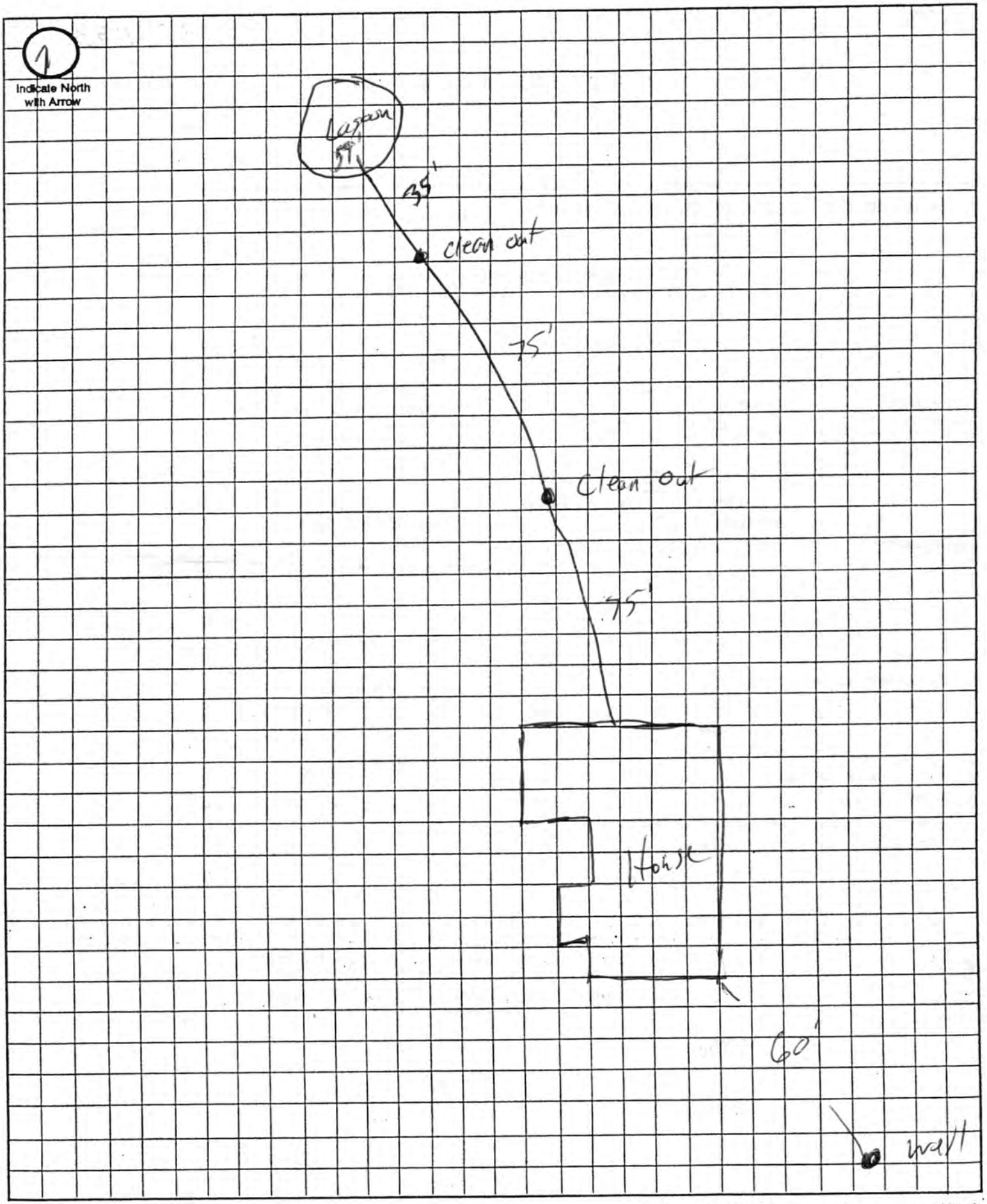
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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

441-6206

Lincoln-Lancaster County Health Department
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Phone: 402-441-8022

D

Permit Number: 02380 2533

Sewage Disposal System
As Built Plans & Specifications

Date 4/14/03

System Location (Indicate correct number and street)
Address 20800 SW 114th (no rural route) City Crete NE, Zip 68333

A. Building Sewer Lagoon

1. Material: PVC Schedule 40
   Diameter: 4" in.
2. Distance above basement floor: N/A in.
   or distance below basement floor: 66" in.
3. Distance between dwelling and ~~septic tank~~ Lagoon: 200 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 350 ft.
   stream N/A ft.
   pressure line N/A ft.
   property line 400 ft.

B. Septic Tank

1. Material: None
   Number of compartments:
2. Capacity: 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. Outlet: ☐ baffle ☐ tee
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

1. Material:
   Number available outlets: None
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: ft.

D. Absorption Field

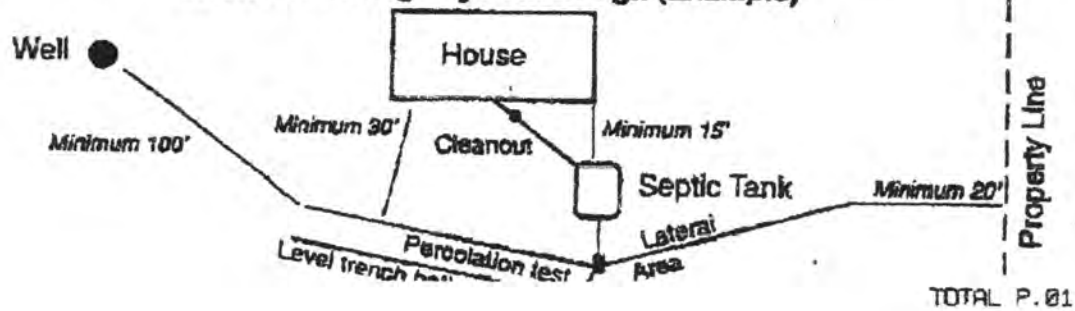
(Provide as-built drawings on back of this form)

1. Type: ☐ Hall rounds ☐ Perforated pipe
   Diameter of half round:
   or perforated pipe: Lagoon
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number
   Length of each line: ft. ft.
   ft. ft. ft.
3. Trench dimensions: Width ft.
   Slope in/100 ft.
   Average depth in
4. Filter material:
   Depth of material in.
5. Distances to: Well or suction line ft.
   Stream ft.
   Pressure line ft.
   Property line ft.

Indicate North with Arrow

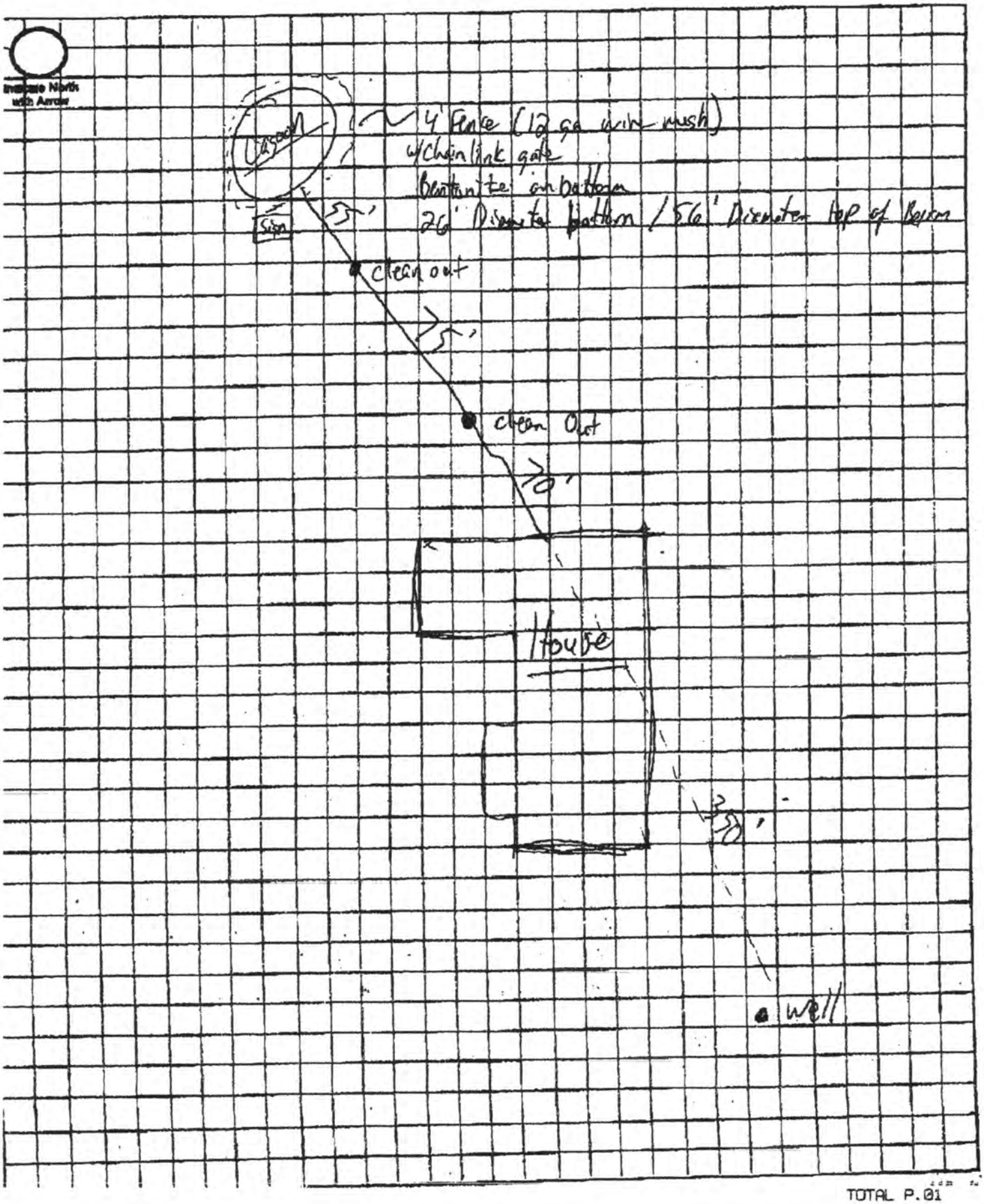
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 20-103 10-96

As Built Drawing



property layout

N

