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

RECEIVED JUN 21 2005

A

Permit Number: 05380304601

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 ~~2200~~ 2525 W. STAGECOACH RD (no rural route) City MARTELL NE, Zip 68404

Legal Description SEE ATTACHED

1/4 ~~SE~~ 1/4 ~~20~~ 4 Section 7N Township 6E Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude N 40° 36' 20.4" Latitude W 096° 45' 16.2"

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

B. Owner

Name AL RISKOWSKI Signature X

Address 2129 WILDERNESS RIDGE City/State/Zip LINCOLN, NE. 68512

☐ Check if owner designed system Home Phone 402 328-0963 Work Phone

C. Contractor GARY L. HOLLY

Name HOLLY CONTRACTING Company Name HOLLY CONTRACTING CO.

Address 71860-567 AV City/State/Zip FAIRBURY, NE. 68352

☒ Check if contractor designed system Work Phone 402-587-0120

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 4 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify

Design flow in gallons per day 500 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 6/22/05 Date frwd 6/27/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6-27-05 Date frwd 6-27-05 ACTION ☒ Approved ☐ Disapproved Signature can't be in FP
3. **City or County Engineer** Date rec'd 6/27/05 Date frwd 6/27/05 ACTION ☒ Approved ☐ Disapproved Signature

Line, tank, lateral - field note

Installation Final Written Approval

By

Date 11/7/05

Business Office Use Only

Date Rec'd 06/22/05

Amt Paid 200.00

Rec'd By Cash/Check No. 1435

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

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

JUN 23 2005 **A**

Permit Number: 053803046

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 2200 STAGECOACH RD (no rural route) City MARTELL NE, Zip 68404

Legal Description _____
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude N 40° 36' 20.4" Latitude W 096° 45' 16.2"

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

B. Owner

Name AL RISKOWSKI Signature X

Address 2129 WILDERNESS RIDGE City/State/Zip LINCOLN, NE. 68512

☐ Check if owner designed system Home Phone 402 328-0963 Work Phone _____

C. Contractor GARY L. HOLLY

Name HOLLY CONTRACTING Company Name HOLLY CONTRACTING CO.

Address 71860-567 AV City/State/Zip FAIRBURY, NE. 68352

☒ Check if contractor designed system Work Phone 402-587-0120

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 500 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 _____ Date frwd _____ **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 _____

Amt Paid _____

Rec'd By _____ Cash/Check No. _____

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

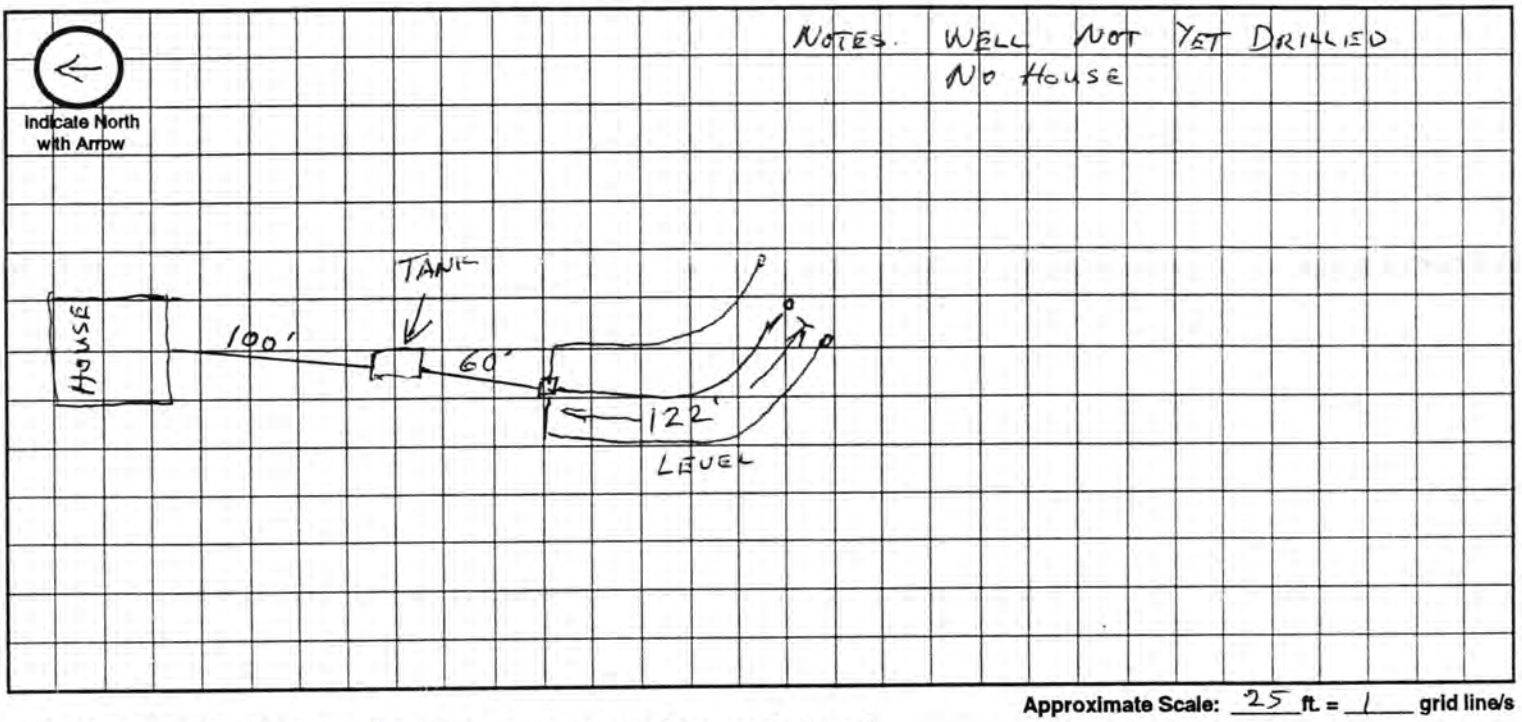
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 053803046

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: 25 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 2200 W. STAGECOACH RD City MARTELL NE, Zip 68404

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other _____

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

Percolation Rate 23.75 (min. per inch) Soil Type: SILTY Land Slope: 0 %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other ~~GRAVELLESS CHAMBERS~~

Total Square Feet of Field Required: 1250 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed _____

Total Length of Laterals 366 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 _____ Date _____

Installer Jerry L. Folly Date 062105

FORM 23-102 10-96

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

B

Permit Number: 053803046

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

RECEIVED
JUN 21 2005

System Location (Indicate correct number and street)

Address 2200 STAGECOACH RD (no rural route) City MARTELL NE, Zip 68404

Owner AL RISKOWSKI Addresss 2129 WILDERNESS RIDGE, LINCOLN, NE. 68512

Soil Type (SCS): SILTY Percolation Rate: 30+ min./inch

Date of Tests 032605 to 032705 Weather: Precipitation NONE Temperature 30°-50°

Percolation Test Data Table

A.	B.	C. D. Pre-Saturation Period		E. F.		G. H. Percolation Readings		I.	J. K.		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	32	03/26	0702	0326	1430	0327	0730	6" IN	0327	1130	LAST 30 MIN	LAST 30 MIN 1.5 IN.	20
2	32	"	0703	"	"	"	0730	6		1130	30	1.0	30
3	32	"	0704	"	"	"	0730	6		1130	30	1.0	30
4	32	"	0706	"	"	"	0731	6		1131	30	1.25	24
5	32	"	0708	"	"	"	0731	6		1131	30	2.5	12
6	32	"	0710	"	"	"	0732	6		1132	30	4.0	7.5
7	32	"	0711	"	"	"	0732	6		1132	30	1.25	24
8	32	"	0712	"	"	"	0733	6		1133	30	1.0	30
9	32	"	0714	"	"	"	0733	6		1133	30	1.0	30
10	32	"	0714	"	"	"	0734	6		1134	30	1.0	30

Sum of Percolation Rates: 237.5
Average of Rates: 23.75
Rate Used for Calculation: 30/IN.

Person Conducting Percolation Tests

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

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

B

Permit Number: 053803046

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2200 STAGECOACH RD (no rural route) City MARTELL NE, Zip 68404

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Date of Tests 032605 to 032705 Weather: Precipitation NONE Temperature 30°-50°

Percolation Test Data Table

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		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	32	03/26	0702	0326	1430	0327	0730	6" IN HOLE	0327	1130	LAST 30 MIN	LAST 30 MIN 1.5 IN.	20
2	32	"	0703	"	"	"	0730	6		1130	30	1.0	30
3	32	"	0704	"	"	"	0730	6		1130	30	1.0	30
4	32	"	0706	"	"	"	0731	6		1131	30	1.25	24
5	32	"	0708	"	"	"	0731	6		1131	30	2.5	12
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10	32	"	0714	"	"	"	0734	6		1134	30	1.0	30

Sum of Percolation Rates: 237.5

Average of Rates: 23.75

Rate Used for Calculation: 30/IN

Person Conducting Percolation Tests

Name: GARY L HOLLY

Phone: 402-587-0120

Address 71860-567 AV
FAIRBURY, NE. 68352

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

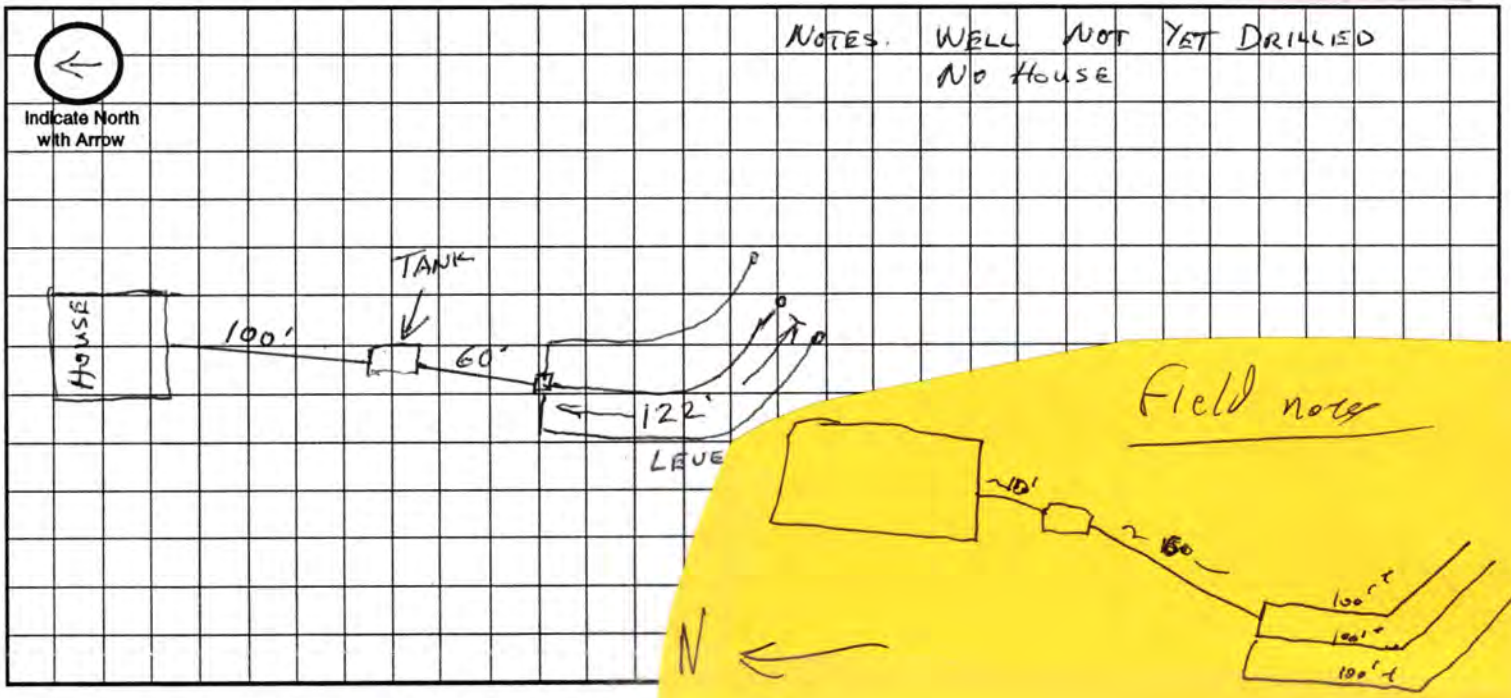
Permit Number: 05380346

Sewage Disposal System

Preliminary Plan Specifications

JUN 2 1 2005

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.



A. System Location (Indicate correct number and street)

Address (no rural route) 2200 W. STAGECOACH RD City MARTELL NE, Zip 68404

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other _____

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

Percolation Rate 23.75 (min. per inch) Soil Type: SILTY Land Slope: 0 %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other ~~GRAVELLESS CHAMBERS~~

Total Square Feet of Field Required: 1250 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed _____

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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 ☐	☐

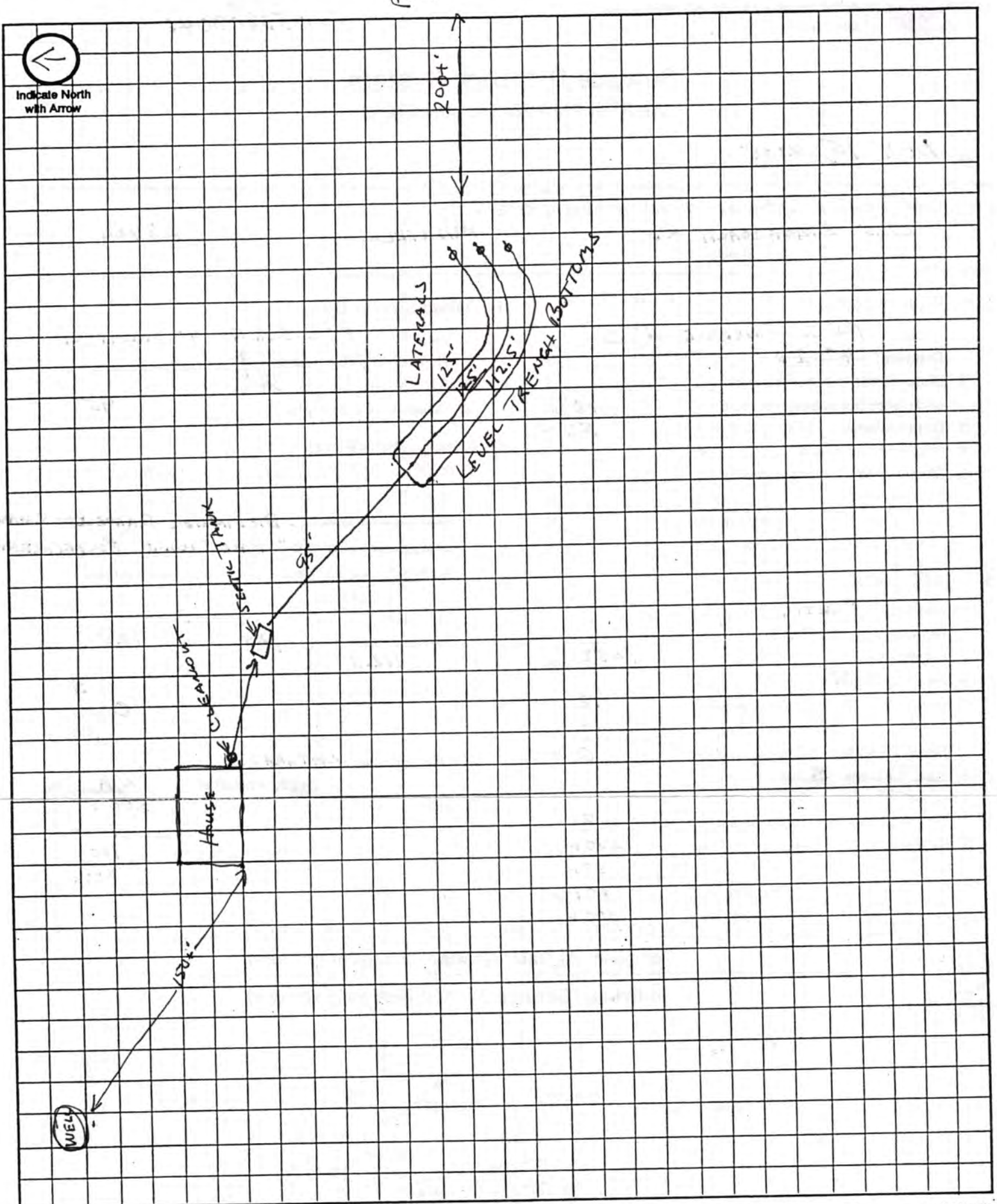
E. Required Signatures

Home Building Contractor Steve Stuber - Stuber Contracting Date 6/21/05

Installer _____ Date _____

FORM 23-102 10-96

As Built Drawing



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

Riskowski Residence

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JUN 24 2005

EXHIBIT "A"

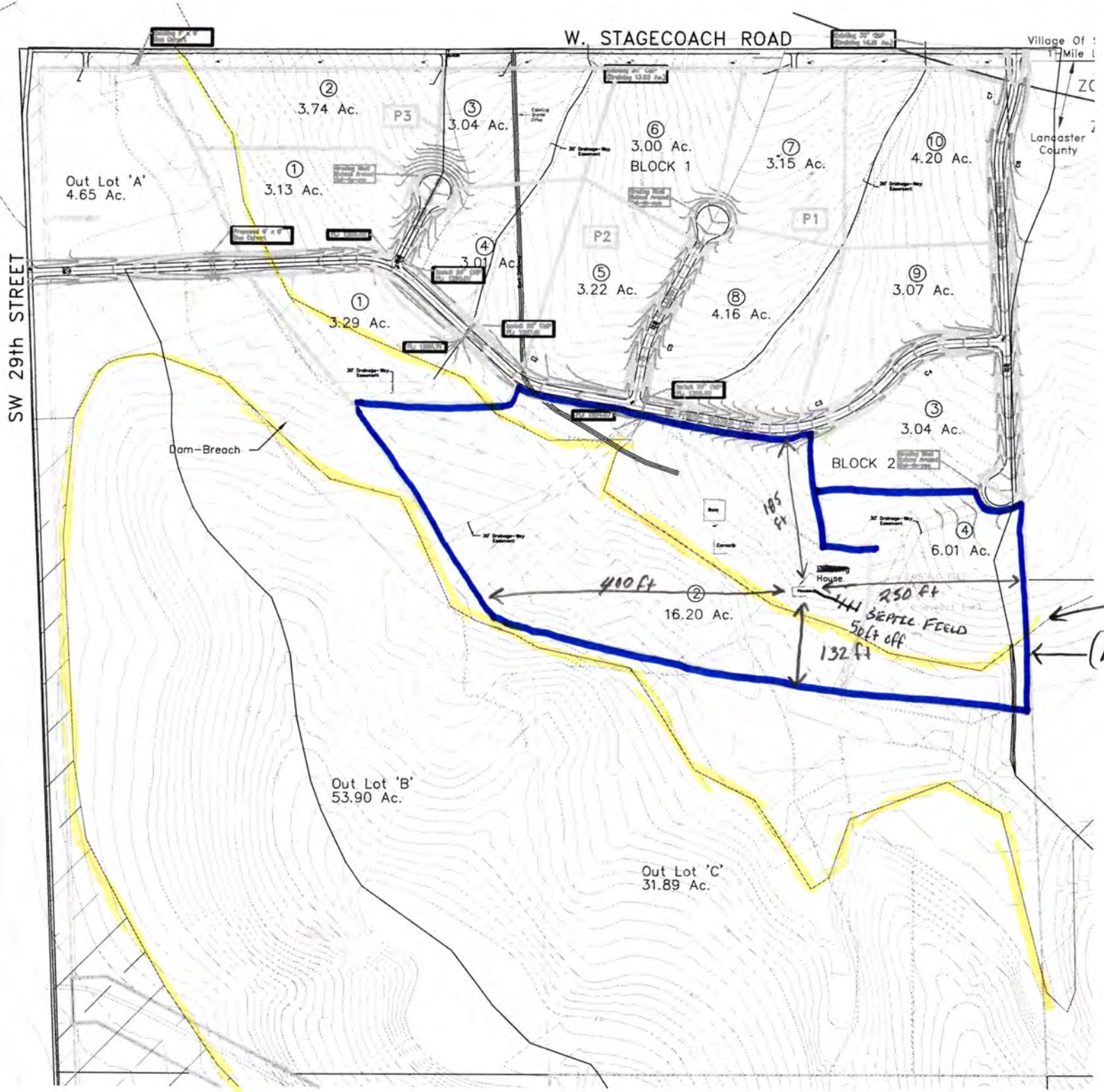
PROPERTY LEGAL DESCRIPTION

PARCEL 'B'

A tract of land located in the Northwest 1/4 of Section 4, Township 7 North, Range Six East of the 6th P.M., Lancaster County, Nebraska, more particularly described as follows:

Commencing at the West 1/4 Corner of said Section 4 and extending thence N 89^59'32" E, 2630.14 feet;

Thence N 02^27'55" E, 965.90 feet to the point of beginning;
Thence N 83^53'36" W, 643.41 feet;
Thence N 77^32'57" W, 807.03 feet;
Thence N 33^11'23" W, 697.34 feet;
Thence S 88^56'24" E, 414.53 feet;
Thence N 30^17'07" E, 46.06 feet to a point on a circular curve to the right with a central angle of 10^03'38", a radius of 230.00 feet and whose chord (80.12 feet) bears S 69^44'42" E;
Thence along the arc of said curve 80.53 feet;
Thence S 79^46'31" E, 546.06 feet to a point on a circular curve to the left with a central angle of 21^31'03", a radius of 430.00 feet and whose chord (160.54 feet) bears N 89^27'57";
Thence along the arc of said curve 161.49 feet;
Thence S 11^17'34" E, 140.39 feet;
Thence S 89^36'00" E, 425.68 feet to a point on a circular curve to the right with a central angle of 182^51'54", a radius of 60.00 feet and whose chord (119.96 feet) bears N 88^58'03" E;
Thence along the arc of said curve 191.50 feet;
Thence S 02^27'55" E, 597.03 feet to the point of beginning containing 21.98 acres, more or less.



(YELLOW) FEMA FLOOD PLAIN

(Blue) Property Line

22.98 Acres

RECEIVED
JUN 24 2005

Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

007925

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380304601

Issued 06/22/05
Expires 06/22/06
Revenue Code 3157

Establishment: AL RISKOWSKI
T7N R6E SEC 4
~~2200~~ 2525 W STAGECOACH RD-MARTELL

FEES: $200.00

Permittee: AL RISKOWSKI
2129 WILDERNESS RIDGE DR
LINCOLN NE 68512

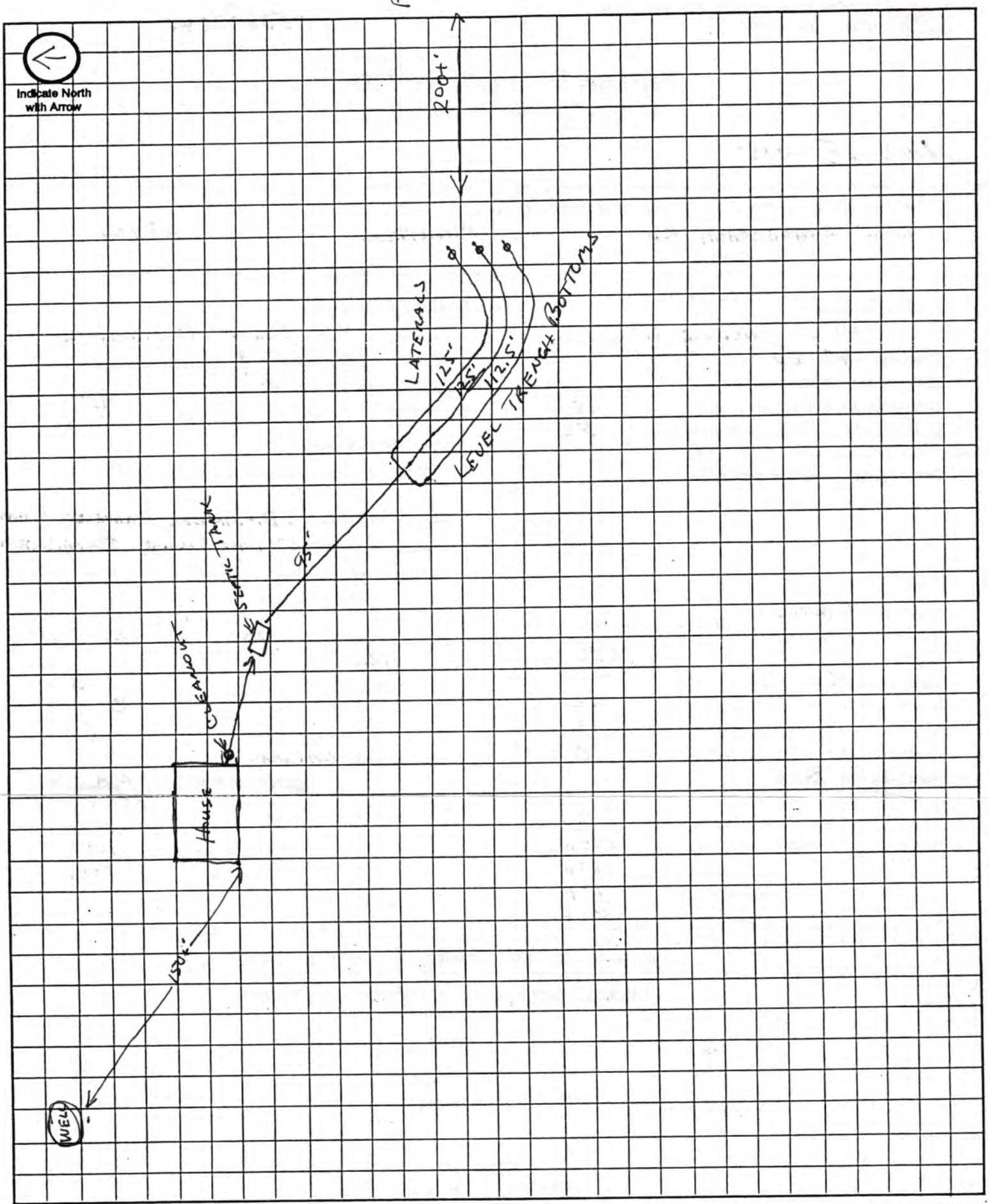
TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

As Built Drawing



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