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

A

Permit Number: 07380335901

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:

20 cows

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 24255 SW 2nd (no rural route) City _____ NE, Zip _____

Legal Description LCR 6000 — 1/4 _____ 1/4 _____ Section 15 Township 7N Range 6E Subdivision _____ Addition _____ Block _____ Lot 5

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Sullivan's owns property, home is building the house

Name Bugbee Homes - Troy W/ Bugbee Signature _____

Address 5901 N 27th City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name ~~Dave~~ Bugbee Homes Company Name ~~Vogt~~ Troy Bugbee

Address 5901 N 27th City/State/Zip Lincoln, NE 68521

☑ Check if contractor designed system Work Phone ~~560-4267~~ 580-7339

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name Dave Firm Vogt Work Phone 560-4267

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 7/11/07 Date frwd 7/11/07 ACTION ☑ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 7/12/07 Date frwd 7/12/07 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 7-12-07 Date frwd 7-12-07 ACTION ☒ Approved ☐ Disapproved Signature Jim Blaugh

Asked installer to verify setback — West Partial lagoon — D.S. 9/12/07 Confirmed setbacks are met. D.S.

Installation Final Written Approval

By _____

Date 1/3/2008

Business Office Use Only

Date Rec'd 7/12/07
Amt Paid 290.00
Rec'd By _____ Cash/Check No. 10502

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

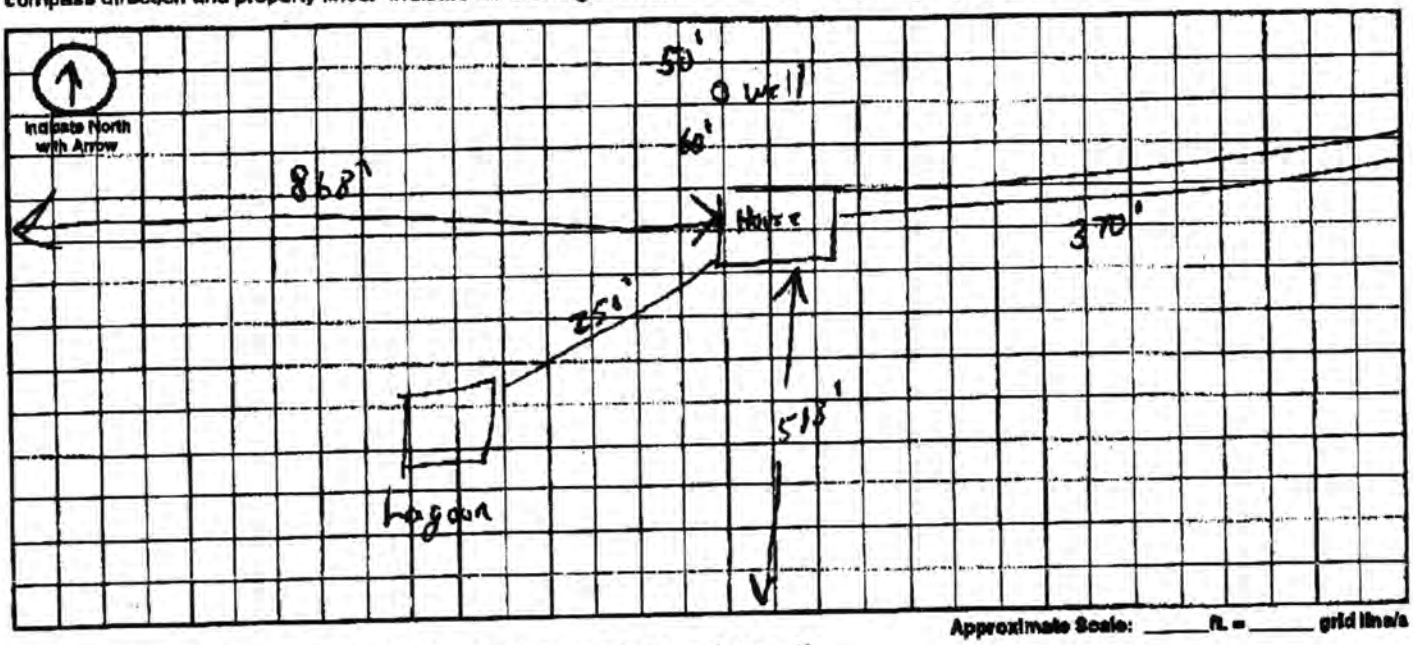
C

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Permit Number:

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: ____ ft. = ____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 24255 SW 2nd City NE, Zip

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other Lagoon

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	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 ☐	☐

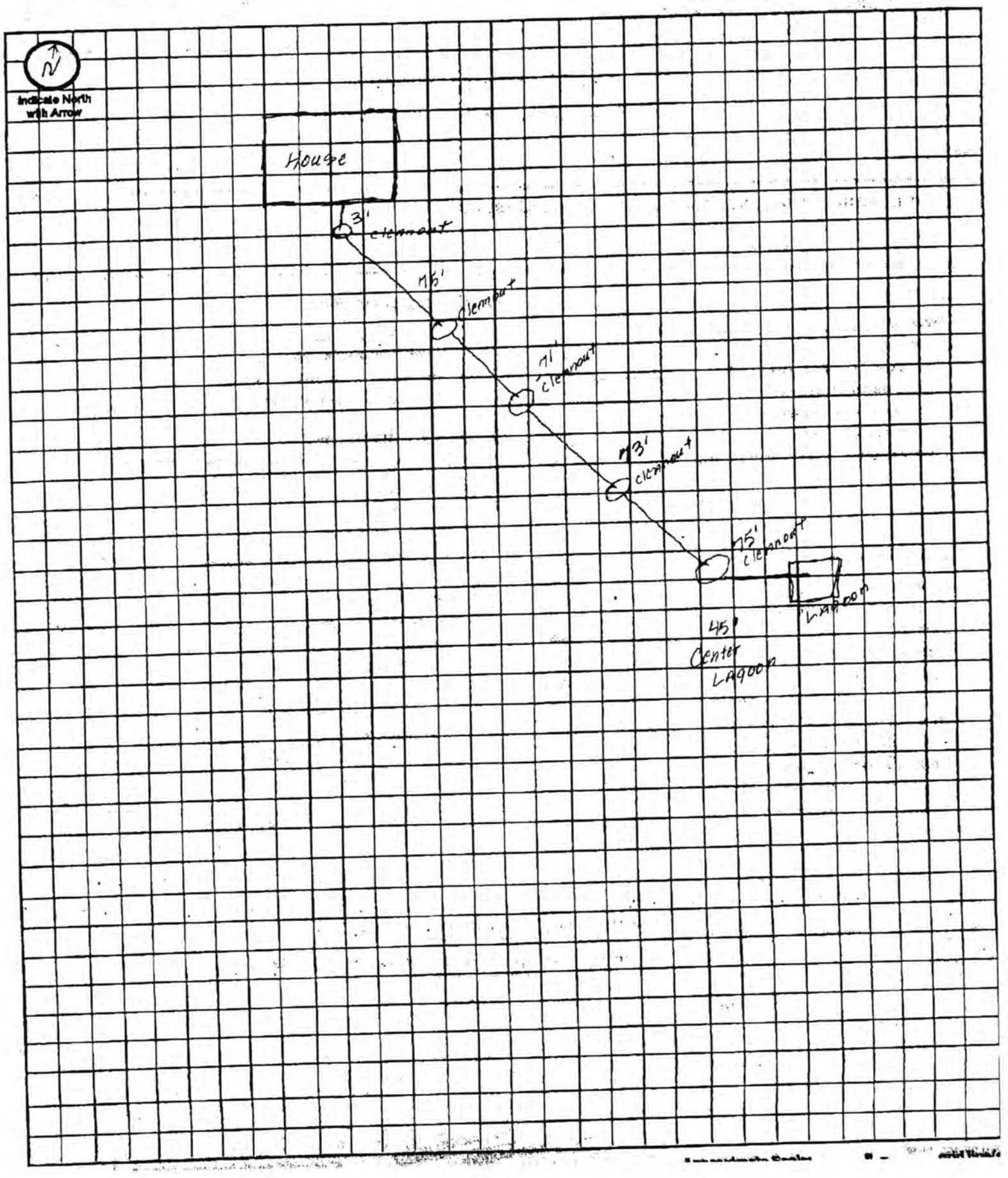
E. Required Signatures

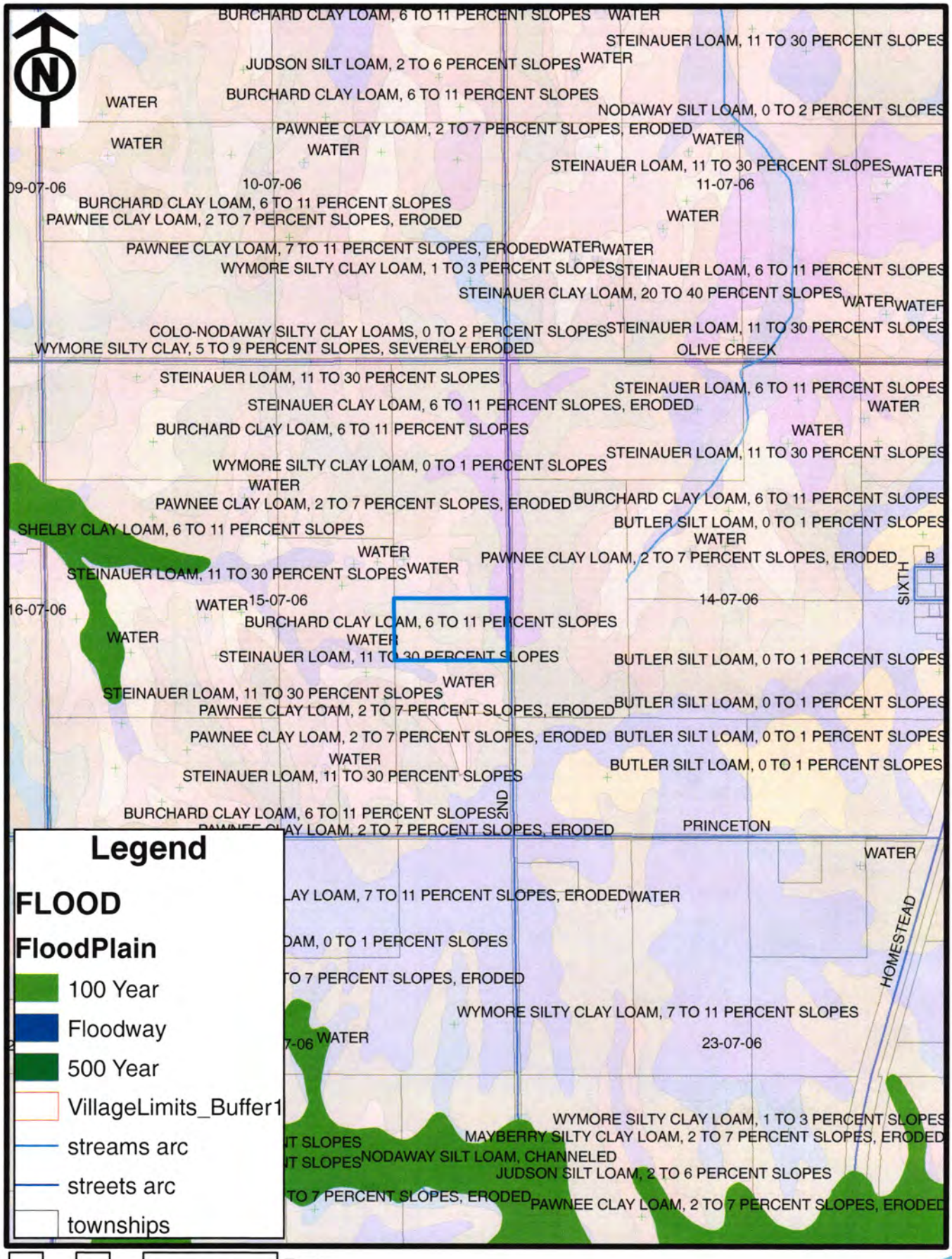
Home Building Contractor ____ Date 7-7-07

Installer ____ Date 7-7-07

FORM 20-102 10-96

As Built Drawing




BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
WATER
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
09-07-06
10-07-06
11-07-06
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
WYMORE SILTY CLAY LOAM, 1 TO 3 PERCENT SLOPES
STEINAUER LOAM, 6 TO 11 PERCENT SLOPES
STEINAUER CLAY LOAM, 20 TO 40 PERCENT SLOPES
COLO-NODAWAY SILTY CLAY LOAMS, 0 TO 2 PERCENT SLOPES
WYMORE SILTY CLAY, 5 TO 9 PERCENT SLOPES, SEVERELY ERODED
OLIVE CREEK
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
WYMORE SILTY CLAY LOAM, 0 TO 1 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
BUTLER SILT LOAM, 0 TO 1 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
SIXTH
16-07-06
15-07-06
14-07-06
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
2ND
PRINCETON
HOMESTEAD
WYMORE SILTY CLAY LOAM, 7 TO 11 PERCENT SLOPES
23-07-06
WYMORE SILTY CLAY LOAM, 1 TO 3 PERCENT SLOPES
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
NODAWAY SILT LOAM, CHANNELED
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
Legend
FLOOD
FloodPlain
100 Year
Floodway
500 Year
VillageLimits_Buffer1
streams arc
streets arc
townships
0
750
1,500
3,000
Feet

Lincoln-Lancaster County Health Department
Environmental Health Division
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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 9-17-07

System Location (Indicate correct number and street)

Address 24255 SW 2nd (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16" in.
3. Distance between dwelling and ~~septic tank~~ LAGOON: _____ ft.
4. Number of clean-outs: 5
5. Distances to: well or suction line _____ ft.
   stream NA ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: LAGOON
   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 100+ ft.

C. Distribution Box

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

D. Absorption Field

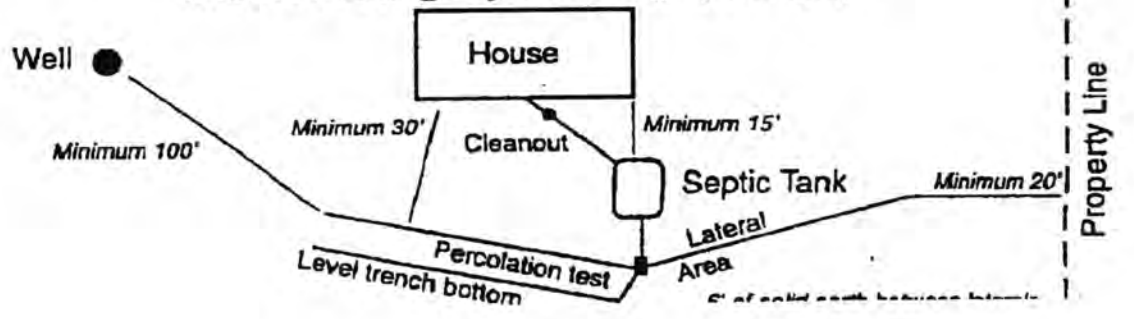
(Provide as-built drawings on back of this form)

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.

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

Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

011051

Permit: SEWAGE INSTALLATION
LAGOON

Establishment:
BUGBEE(TROY) HOMES
T7N R6E SEC 15
20 ACRES LOT 5
24255 SW 2ND ST

Permittee:
BUGBEE(TROY) HOMES
5901 N 27 ST
LINCOLN NE 68521

Permit # 07380335901

Issued 07/12/07
Expires 07/12/08
Revenue Code 3157

FEES: $290.00

TOTAL: $290.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY