LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit No. 98380172801

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 03/03/98
Expires 09/05/98
Revenue Code 3157

Establishment

B & K HOMES
17N R7E SEC2
HOLLAND ACRES BLK 2 LOT 5
8901 LIGHTNER CIR-HOLLAND

FEES: $150.00

PAID

TOTAL $150.00

Permittee

B & K HOMES
6250 QUEENS DRIVE
LINCOLN NE 68516-3162

Gregg Wright MO.

Issued By M. Jane Ford
Health Director

6210

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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

A

Permit Number:

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 8901 Lightner Circle (no rural route) City Holland NE, Zip

Legal Description 1/4 2 1/4 Section 7N Township 7E Range Holland Acres Subdivision 2 Addition 5 Block Lot

Geographical Location (if known): Longitude Latitude

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

B. Owner

Name B+K Homes Signature Barry Fowler

Address 6250 Queens Dr. City/State/Zip 6250 Queens Dr.

☐ Check if owner designed system Home Phone 421-2750 Work Phone Same

C. Contractor

Name Excavating Inc. Company Name (B+K) Fowler Custom Homes

Address 6667 N.W 48th City/State/Zip 6250 Queen Dr

☐ Check if contractor designed system Work Phone 421-2750

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

Designer Name John Strahmyer Firm Excavating Inc. Work Phone 470-3100

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 3/5/98 Date frwd 3/5/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3.5.98 Date frwd 3.5.98 ACTION ☒ Approved ☐ Disapproved Signature TK
3. **City or County Engineer** Date rec'd 03/06/98 Date frwd ACTION ☒ Approved ☐ Disapproved Signature

5/21/98 Sewer, Depth + distribution box L.C.H.
5/22/98 Need drawing of B.F.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date MAY 28, 1998

Business Office Use Only

Date Rec'd 03/05/98
Amt Paid 150.00
Rec'd By Cash/Check No. 9179

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

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 8901 Lightner Cir. (no rural route) City Holland NE, Zip

Owner Fowler Custom Homes Addresss 6250 Queens Dr

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 33 min./inch

Date of Tests 2/18/98 to 2/19/98 Weather: Precipitation Temperature 60°

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)
1	30	2/18	10 AM	2/19	10 AM	2/19	1:30	6"	2/19	2:00	30	7/8	34 MIN/IN
2	28	2/18	10 AM	2/19	10:00	2/19	1:30	6"	2/19	2:00	30	1"	30 MIN/IN
3	31	2/18	10:00	2/19	10:00	2/19	1:30	6"	2/19	2:00	30	3/4	40 MIN/IN
4	30	2/18	10:00	2/19	10:00	2/19	1:30	6"	2/19	2:00	30	1"	30 MIN/IN
5	27	2/18	10:00	2/19	10:00	2/19	1:30	6"	2/19	2:00	30	7/8	34 MIN/IN
6	28	2/18	10:00	2/19	10:00	2/19	1:30	6"	2/19	2:00	30	1"	30 MIN/IN

Person Conducting Percolation Tests

Name: John Stuhmer

Phone: 470-3100

Address 6667 NW 48th

Sum of Percolation Rates:

Average of Rates: 33

Rate Used for Calculation: 33

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date MARCH 5, 1998

FORM 23-101 10-96

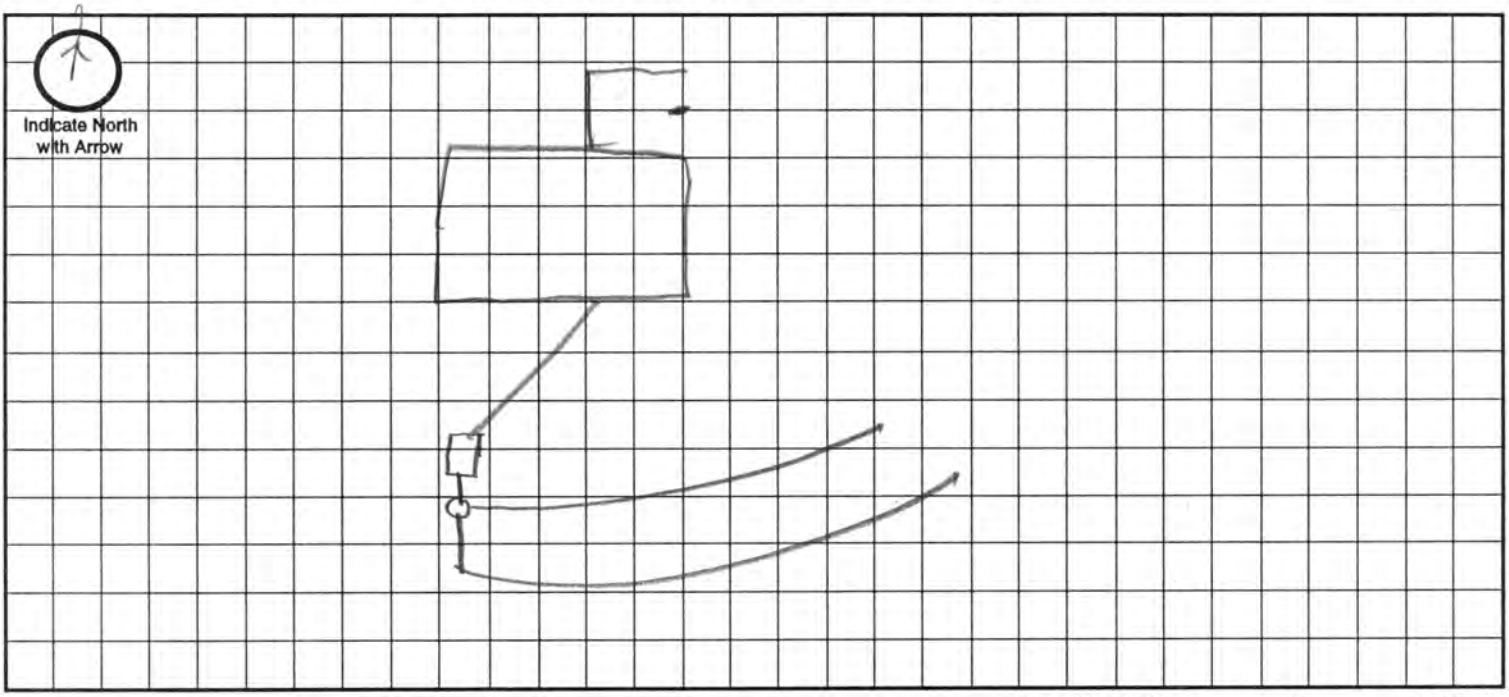
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) 8901 Lightner Cir. City Holland NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate _____ (min. per inch) Soil Type: WYMORE SILTY clay loam Land Slope: 2 %

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

Total Square Feet of Field Required: 786 sq. ft.

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

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

Total Length of Laterals 197 ft. Number of Trenches _____ Trench Width 4'

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 Barry Fowler Date 3/5/98

Installer John Stedman (Excavating Inc) Date 3/5/98

FORM 23-102 10-96

MAY 28 1998

B

Permit Number:

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

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 8901 Lightner Lane (no rural route) City Holland NE, Zip _____

X Owner _____ Addresss _____

Soil Type (SCS): Wymore ~~+ Shelby~~ Pawnee Percolation Rate: _____ min./inch

Date of Tests 5-18 to 5-18-98 Weather: Precipitation _____ Temperature 80°

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)
1	28"	5-17	5:15	5-18	7:10	5-18	9:40	17 3/4		10:10	30	1/2	
2			PM		AM			17 1/2				3/4	
3								13 1/2				1/2	
4								11 1/2				1/2	
5								11				1/2	
6								11 3/4				1/2	
7								17 1/2				1/2	
8								19				1 1/2	
9								16				1 1/4	

Person Conducting Percolation Tests

Name: Larry Schwarek

Phone: 489-7294

Address 8200 Old Cheney Rd

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

M30-8915 Barry Fowler

MAY 28 1998

C

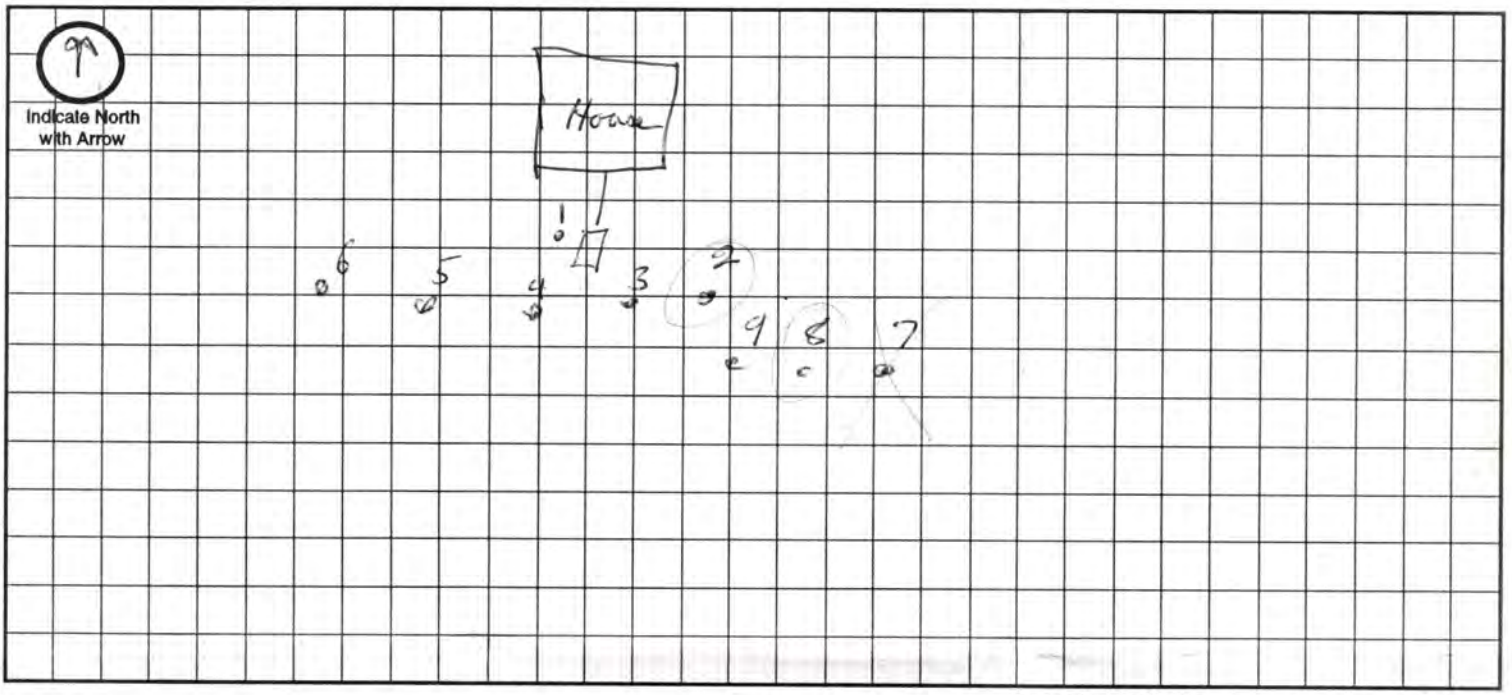
Permit Number:

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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) 8901 Lightner Ln City Holland NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: Wymore Pawnee Land Slope: 1% %

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

330
247 Total Square Feet of Field Required: 990 sq. ft.

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

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

Total Length of Laterals 250 ft. Number of Trenches 3 Trench Width 4

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 Larry Schwarck Date 5-18-98

FORM 23-102 10-96

MAY 2 8 1998

D

Permit Number:

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

Sewage Disposal System

As Built Plans & Specifications

Date 5-22-98

System Location (Indicate correct number and street)

Address 8901 Leighton Ln (no rural route) City Holland NE, Zip

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 60 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line ____ ft.
   stream ____ ft.
   pressure line ____ ft.
   property line ____ ft.

B. Septic Tank

1. Material: Pre Cast
   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. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 10 in.
8. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

C. Distribution Box

1. Material: Precast
   Number available outlets: ____
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 24' ft.

D. Absorption Field

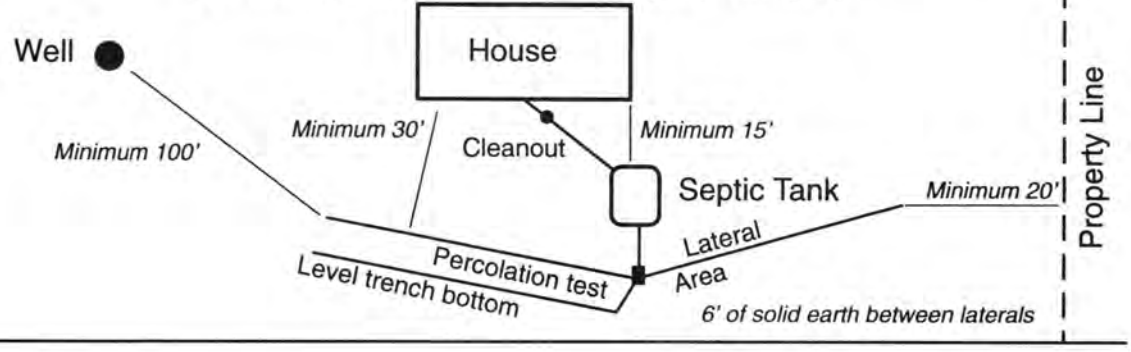
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 7 Infiltrator
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 94 ft.
   56 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 28 in
4. Filter material: Road Gravel
   Depth of material ____ in.
5. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

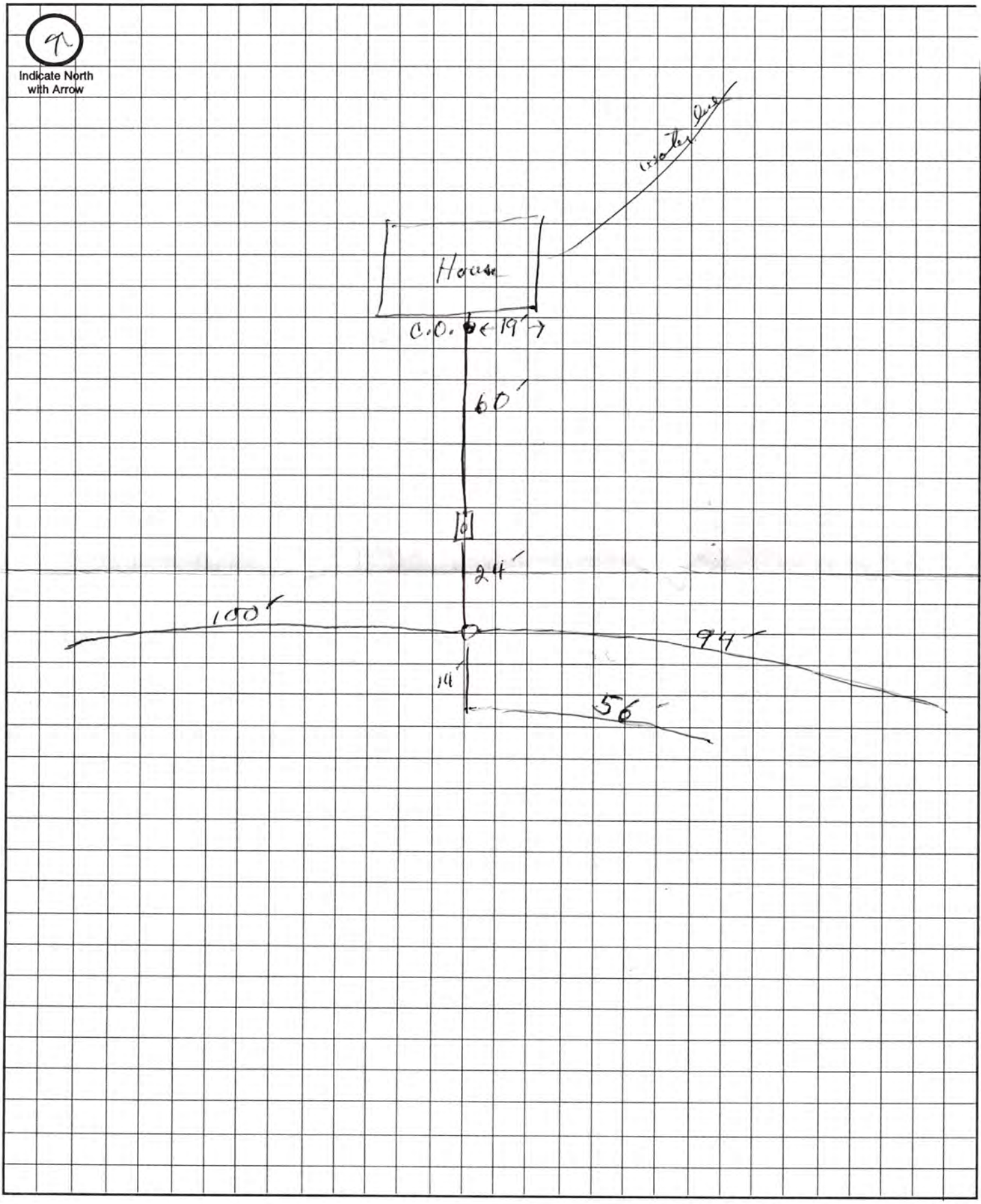
Indicate North with Arrow

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

Individual Sewage System Design (Example)



As Built Drawing by Larry Schwarck 5-22-98



Approximate Scale: _____ft. = _____ grid line/s