SEP 1 2 1997

A

Permit Number:

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

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 X 8501 Lightner Lane (no rural route) City Holland NE, Zip

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

Geographical Location (if known): Longitude Latitude

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

B. Owner

Name Fowler Const. Signature X

Address 6250 Queens Dr. City/State/Zip Lincoln 16

☐ Check if owner designed system Home Phone 4 Work Phone 420-2950

C. Contractor

Name Larry Schwarck Company Name Schwarck trenching

Address 8200 old cheney City/State/Zip Lincoln, Ne. 68516

☒ Check if contractor designed system Work Phone 489-7294

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 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 9/12/97 Date frwd 9/15/97 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9/15/97 Date frwd 9/15/97 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 9-15-97 Date frwd 9-15-97 ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

By Paul Drotzmann

Date 12-3-97

Business Office Use Only

Date Rec'd 9/15/97

Amt Paid $150.00

Rec'd By CW Cash/Check No. 12757

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

Holland Acres.

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

X Address 8501 Lightner Lane (no rural route) City Holland NE, Zip _____

Owner Fowler Custom Homes Address 6250 Queens Drive

Soil Type (SCS): Morrill Clay Loam Percolation Rate: 60 min./inch

Date of Tests 9-4 to 9-4-97 Weather: Precipitation — Temperature 75°

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	9-4	11:00	9-5	8:15	9-5	10:15	14 1/2	9-5	10:45	30	1/2	
2	28							15 1/4				3/4	
3	28							14 3/4				1/2	
4	32							13 1/2				1/2	
5	30							11				1	
6	30							11 1/2				1/2	
7	30							13				1 1/4	
8	28							9				3/4	
9	28							14				1/2	

Person Conducting Percolation Tests

Name: Larry Schewack

Phone: 489-7294

Address 8200 S/L Cheney

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 60 min/inch

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Wood Date SEPTEMBER 15, 1997

FORM 23-101 10-96

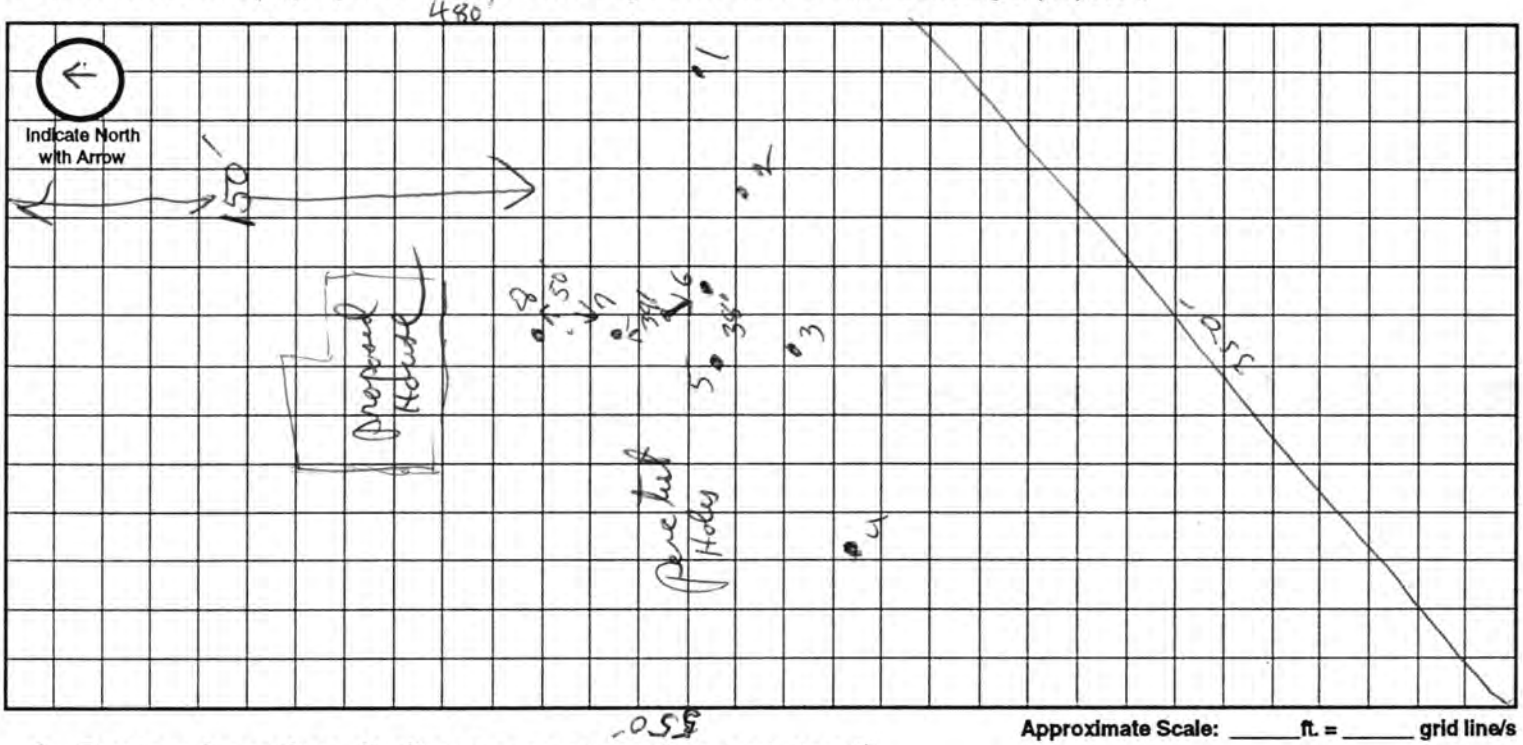
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) Lightner Lane 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: Marshall Silty Clay Loam Land Slope: 4 % %

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

Total Square Feet of Field Required: 1320 sq. ft.

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

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

Total Length of Laterals 330 ft. Number of Trenches 4 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 Zeleny Pres Date 9-8-97

Installer Larry Schwarck Date 9-7-97

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: 97380165601

Sewage Disposal System
As Built Plans & Specifications

HOLLAND ACRES
FOWLER HOMES

Date 12-3-97

System Location (Indicate correct number and street)

Address 5501 LIGHTNER LN (no rural route) City Holland NE, Zip

A. Building Sewer

1. Material: CLS 160
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 15 in.
3. Distance between dwelling and septic tank: 132 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line NA ft.
   stream 100+ ft.
   pressure line 50+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: CONC
   Number of compartments: 1
2. Capacity: 1200 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☑ above ☐ below grade 6 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 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 35 ft.

C. Distribution Box

1. Material: CONC
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 10 ft.

D. Absorption Field

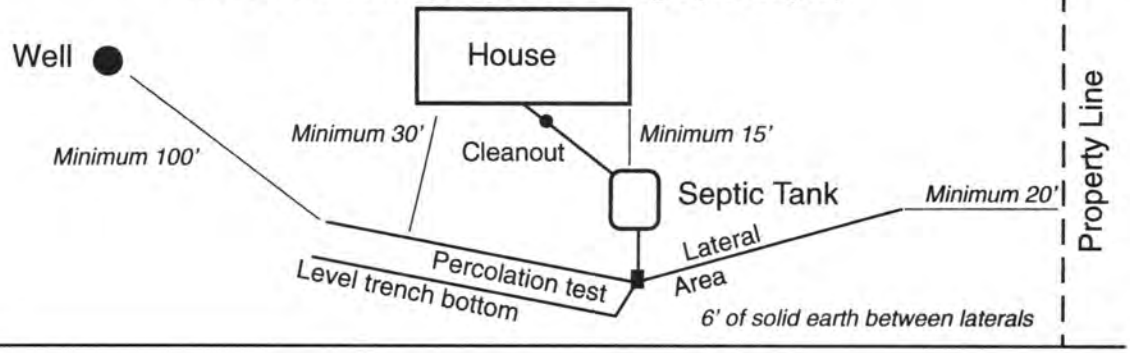
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: ✓
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other INFILTRATOR
2. Lateral lines: Number 4
   Length of each line: 105 ft. 105 ft.
   100 ft. 100 ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 2 in/100 ft.
   Average depth 24 in
4. Filter material: GRAVEL
   Depth of material 18 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 25 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit No. 97380165601

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 09/15/97
Expires 03/15/98
Revenue Code 18754

Establishment

FOWLER CONSTRUCTION
T7N R7E SEC 2
HOLLAND ACRES BLK 1 LOT 2
8501 LIGHTEN LANE

FEES: $150.00

Permittee

FOWLER CONSTRUCTION
6250 QUEENS DR
LINCOLN NE 68516

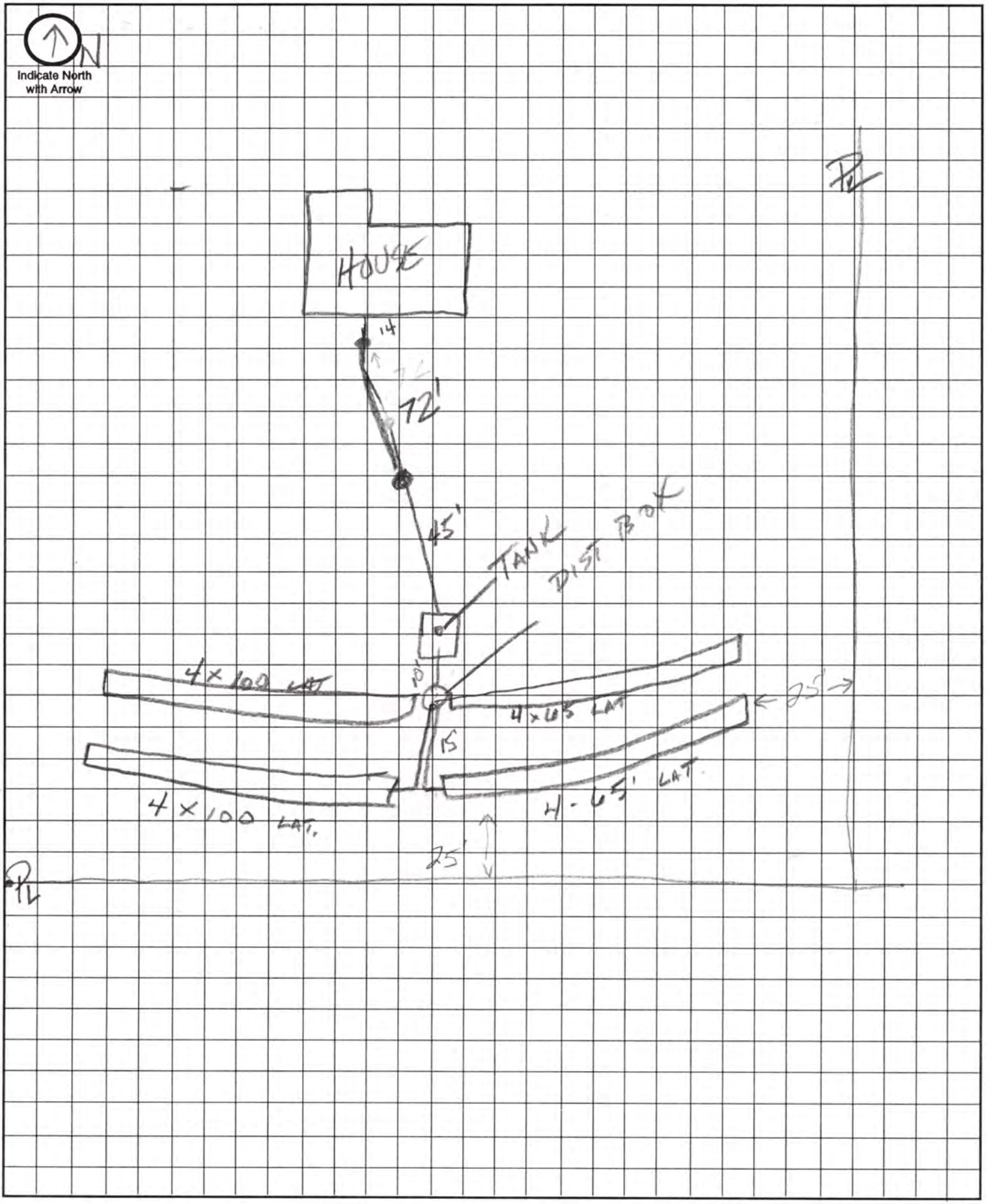
TOTAL $150.00

5239

Issued By M. Jane Ford
Health Director

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

As Built Drawing



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