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

**A**

Permit Number: 06380323601

# Sewage Disposal System

## Request for Site Clearance and Permit

**Include Form B, Form C and Applicable Fees with this Application.**

☐ Septic System ☒ Sealed 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 7855 PRENCETON ROAD (no rural route) City FIRTH NE, Zip NE 68538

Legal Description NE¼ (1/4) 22 (Section) 7N (Township) 7E (Range) _____ (Subdivision) _____ (Addition) _____ (Block) 19 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

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

### B. Owner

Name GARY + DIANE KUBICEK Signature Gary Kubicek

Address 1025 RD 6 City/State/Zip SCHUYLER NE 68661-7159

☐ Check if owner designed system Home Phone _____ Work Phone (402) 480-0882

### C. Contractor

Name GRUBER CONTRACTING, LLC Company Name STEVE GRUBER

Address 2150 W. PANAMA RD City/State/Zip MARTELL, NE 68404

☐ Check if contractor designed system Work Phone (402) 525-8110

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

Designer Name GARY L. HOLLY Firm HOLLY CONTRACTIN 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 _____ 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 8/14/06 Date frwd 8/15/06 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature Gail McGee
3. **City or County Engineer** Date rec'd 08/15/2006 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____

* Spaces in tank may be larger than 4"

**Installation Final Written Approval**

By _____

Date 5/8/07

***Business Office Use Only***

Date Rec'd 08/15/06
Amt Paid 275.00
Rec'd By _____ Cash/Check No. 875

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

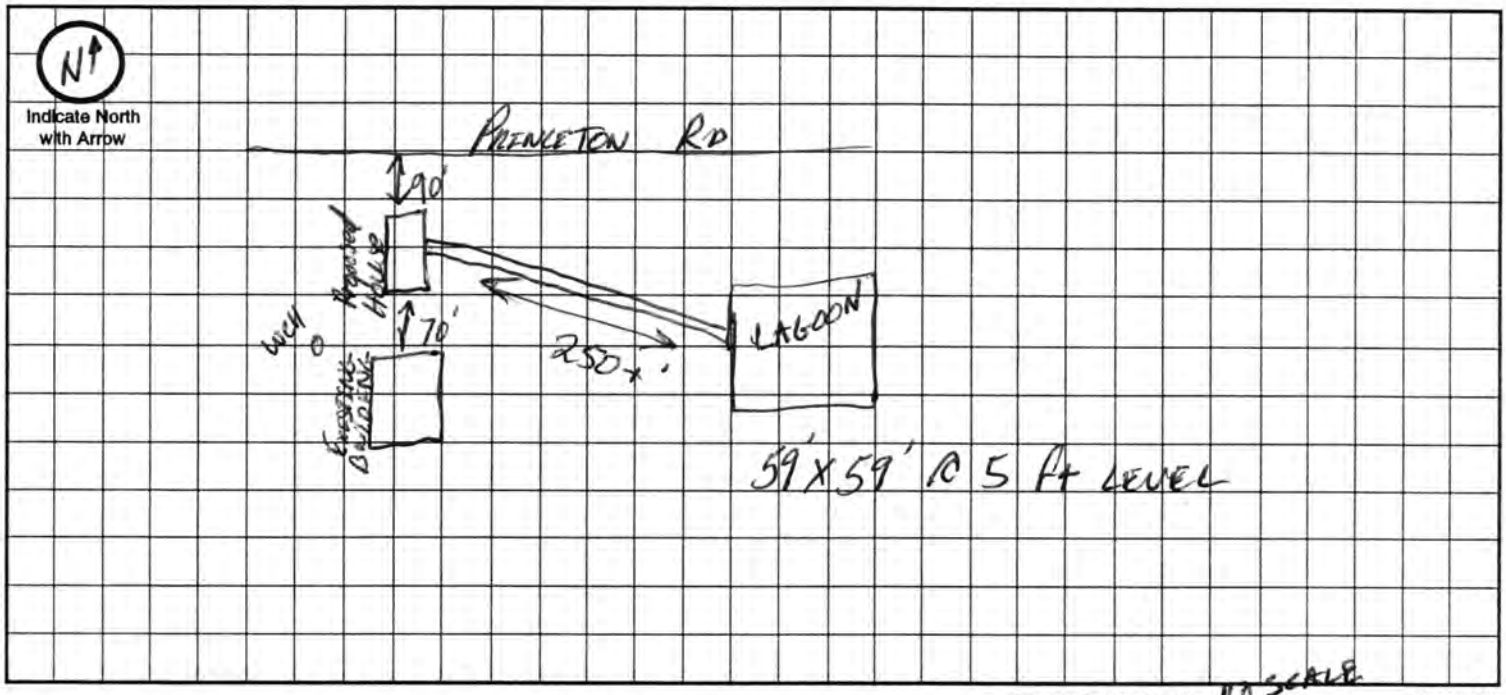
**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**C**

Permit Number: 063803236

# 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: NO SCALE ft. = _____ grid line/s

## A. System Location (Indicate correct number and street)

Address (no rural route) 7855 Princeton RD City Firth NE, Zip 68539

## 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: _____ 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 _____

Installer Dan Holly HOLLY CONTRACTING CO Date 081406

FORM 23-102 10-96

JAN 31 2007

D

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

Permit Number: 06380323601

HOLLY CONTRACTING CO.
71860 567 Ave.
Fairbury, NE 68352

# Sewage Disposal System
## As Built Plans & Specifications

Date DEC. 5 2006 GARY KUBICEK

**System Location (Indicate correct number and street)**

Address 7855 PRINCETON RD (no rural route) City _____ NE, Zip _____

## A. Building Sewer * SEALED LAGOON

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

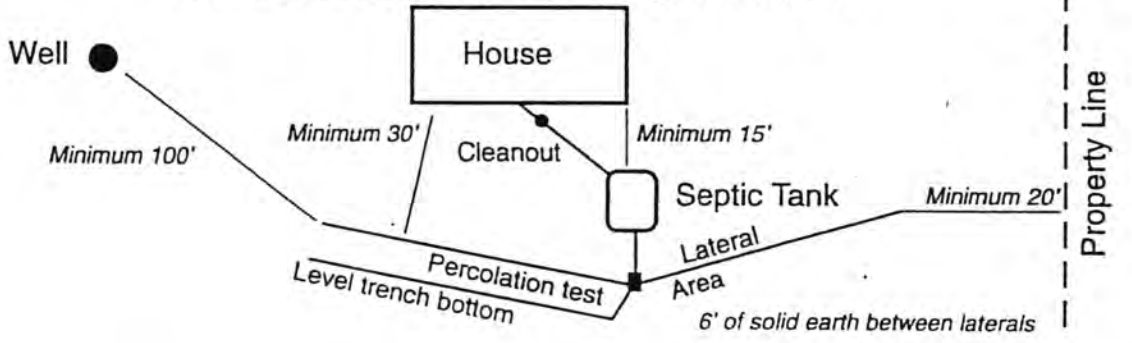
*(Provide as-built drawings on back of this form)*

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.

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

ndicate North with Arrow

### Individual Sewage System Design (Example)



# Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009505

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEALED LAGOON

Permit # 06380323601

Issued 08/14/06
Expires 08/14/07
Revenue Code 3157

Establishment:
GARY & DIANE KUBICEK
T7N R7E SEC 22 QTR NE
LOT 19
7855 PRINCETON RD-FIRTH

FEES: $275.00

Permittee:
GARY & DIANE KUBICEK
1025 #6 RD
SCHUYLER NE 68661-7159

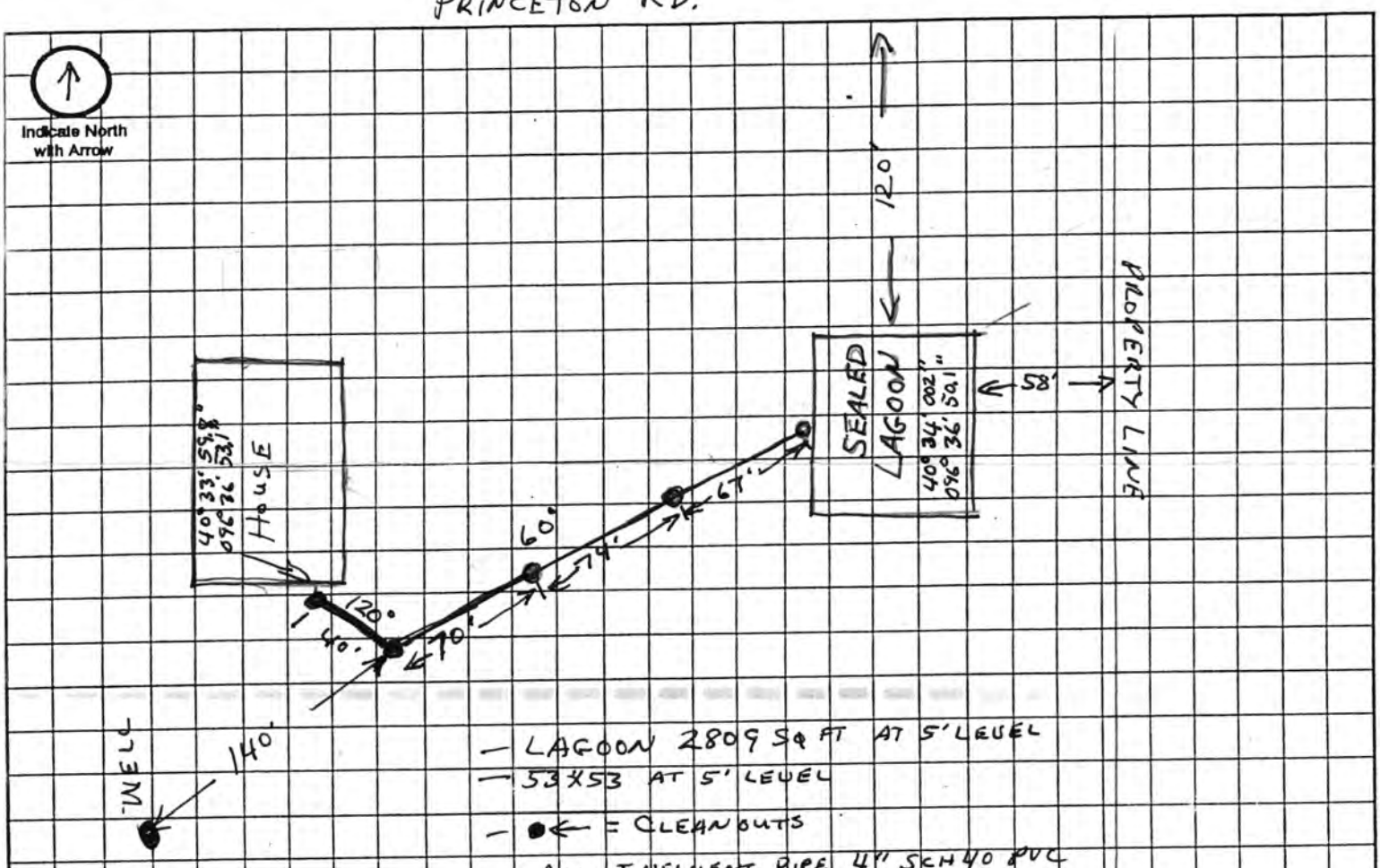
TOTAL: $275.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

# As Built Drawing




- LAGOON 2809 SQ FT AT 5' LEVEL
- 53 X 53 AT 5' LEVEL
- ● ← = CLEANOUTS
- ALL INFLUENT PIPE 4" SCH 40 PVC
- PIPE TO LAGOON CENTER
- DRAINS ON APPROVED BLK. SUPPORTED VERTICALLY + HORIZONTALLY
- DEPTH MARKER MARKED 2' & 5'
- WILL NOTIFY WHEN FENCE COMPLETE

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