# Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

007805

(402) 441-8000

ermit SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380303401

Issued 05/17/05
Expires 05/17/06
Revenue Code 3157

Establishment RUSSELL R DLOUHY
T7N R7E SEC 34
FIRTH MEADOWS LOT 2
28155 BROOKIE PL-FIRTH

FEES: $200.00

Permittee RUSSELL R DLOUHY
12500 S 82 ST
ROCA NE 68430

TOTAL: $200.00

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

MAY 17 2005

MAY 23 2005 A

Permit Number: 05380303401

# 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 28155 Brookie Place (no rural route) City Firth NE, Zip

Legal Description 1/4 34 1/4 Section 7N Township 7E Range Firth Meadow's Subdivision Addition 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 Dlouhy Signature Russell R Dlouhy

Address 12500 So. 82 City/State/Zip Roca NE

☐ Check if owner designed system Home Phone Work Phone

### C. Contractor

Name RussDlouhy Company Name Dlouhy homes

Address 12500 So. 82 City/State/Zip Roca NE 68430

☐ Check if contractor designed system Work Phone 560 5545

### 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 5/17/05 Date frwd 5/24/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 5-21-05 Date frwd 5-21-05 ACTION ☒ Approved ☐ Disapproved Signature Melinda Myers
3. **City or County Engineer** Date rec'd 5/24/05 Date frwd 5/24/05 ACTION ☒ Approved ☐ Disapproved Signature

### Installation Final Written Approval

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

Date OCTOBER 27, 2005

***Business Office Use Only***

Date Rec'd 05/17/05

Amt Paid 200.00

Rec'd By Cash/Check No. 7025

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

MAY 17 2005

A

Permit Number: 053803034

# Sewage Disposal System

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Legal Description ____ ____ ____ Firth Meadow's 2
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude Latitude

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☐ Check if owner designed system Home Phone Work Phone

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3. **City or County Engineer** Date rec'd Date frwd ACTION ☐ Approved ☐ Disapproved Signature

J. C.H. 5/20/05 Need drawing.

### Installation Final Written Approval

By

Date

***Business Office Use Only***

Date Rec'd 05/17/05

Amt Paid 200.00

Rec'd By Cash/Check No. 7025

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
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**B**

Permit Number: 053803034

# Sewage Disposal System

## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

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

Address 28155 (no rural route) City Firth NE, Zip

Owner Russ Dlouhy Addresss 12500 So. 82 Roca NE 68430

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

Date of Tests to Weather: Precipitation Temperature

## 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 | 36" | 5-8-5 | 8:00 | 5-8-5 | 12:00 | 5-9 | 8:00 | 6" | 5-9-5 | 12:00 | 30 | 1/2 | 60 MIN/IN |
| 2 | | | | | | | | | | | | 1/2 | 60 MIN/IN |
| 3 | | | | | | | | | | | | 3/4 | 40 MIN/IN |
| 4 | | | | | | | | | | | | 5/8 | 48 MIN/IN |
| 5 | | | | | | | | | | | | 5/8 | 48 MIN/IN |
| 6 | | | | | | | | | | | | 5/8 | 48 MIN/IN |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

### Person Conducting Percolation Tests

Name: Tim Heier
Phone: 432 8848
Address: P.O. Box 97
Firth NE 68358

Sum of Percolation Rates:
Average of Rates:
Rate Used for Calculation: 48 MIN/IN

DO NOT WRITE BELOW THIS LINE

### Reviewing Action

Remarks

Signature of Reviewing Official: Gerald C. Hood R.E.H.S. Date

FORM 23-101 10-96

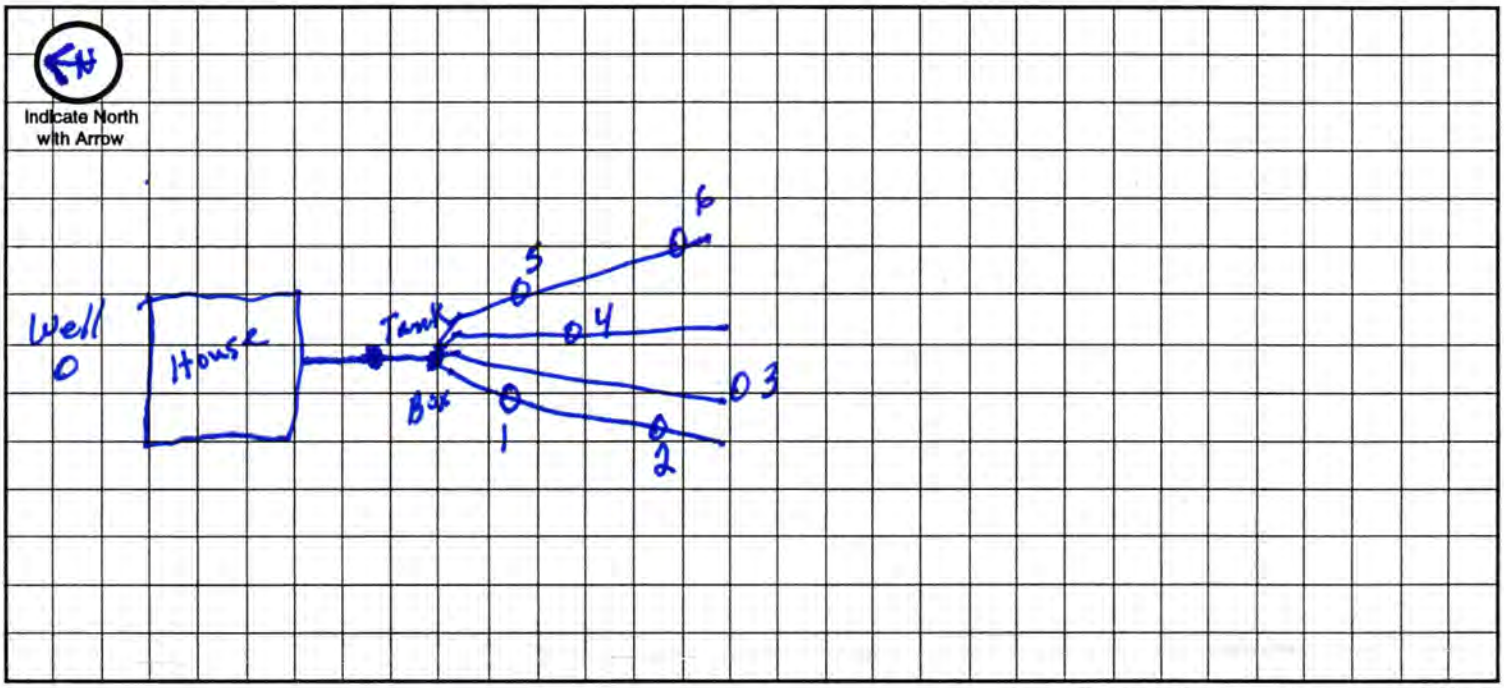
**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

**C**

Permit Number:

# 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) 2855 Fifth Meadows City Firth NE, Zip _____

## B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 48 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 330 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 Russell R Hawley Date 5-11-05

Installer M. [illegible] Date 5-12-05

FORM 23-102 10-96

SEP 3 0 2005

D

Lincoln-Lancaster County Health Department
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Permit Number:

# Sewage Disposal System

## As Built Plans & Specifications

Date 5-11-5

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

Address 28155 Firth Meadow's (no rural route) City Firth NE, Zip

## A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: 4' in.
   or distance below basement floor: ____ in.
3. Distance between dwelling and septic tank: 15' ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 300' ft.
   stream ____ ft.
   pressure line ~~Broken~~ ____ ft.
   property line 75' ft.

## B. Septic Tank

1. Material: Concrete
   Number of compartments: 2
2. Capacity: 1750 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☐ above ☒ below grade 12" in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12" in.
8. Distances to: Well or suction line 300' ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 75' ft.

## C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 6' ft.

## D. Absorption Field

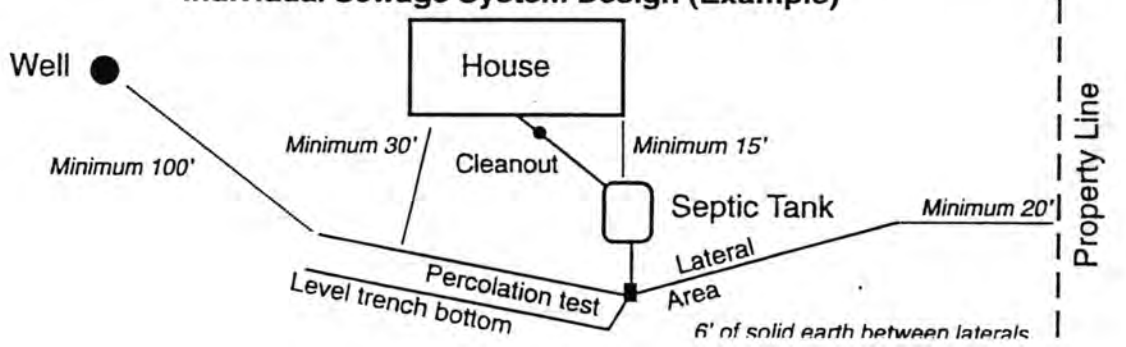
*(Provide as-built drawings on back of this form)*

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 36"
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 4
   Length of each line: 60 ft. 72 ft.
   100 ft. 100 ft., ____ ft.
3. Trench dimensions: Width 4' ft.
   Slope 1" in/100 ft.
   Average depth 3' in
4. Filter material: Gravel / Clay
   Depth of material 16" in.
5. Distances to: Well or suction line 500' ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 30' ft.

Indicate North with Arrow

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

### Individual Sewage System Design (Example)




FORM 23-103 10-96

28155 Brookie PL.

# As Built Drawing

