Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008640

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 06380315001

Issued 02/13/06
Expires 02/13/07
Revenue Code 3157

Establishment: JERALD & KRISTI ACTON
T7N R7E SEC 36 QTR SW
CYRUS ACRES LOT 3
NA-FIRTH

FEES: $275.00

Permittee: JERALD & KRISTI ACTON
423 VILLAGE VW
HICKMAN NE 68372

TOTAL: $275.00

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

FEB 13 2006

A

Permit Number: 06380315001

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: Not yet available (no rural route) City: Firth NE, Zip: 68358

Legal Description: SW 36 7N 7E Cyrus Acres 3
1/4 | 1/4 | Section | Township | Range | Subdivision | Addition | 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: Jerry + Kristi Acton Signature: Jerald R Acton

Address: 423 Village View City/State/Zip: Hickman NE 68372

☐ Check if owner designed system Home Phone: 402-792-3181 Work Phone: 402

C. Contractor

Name: Jerry maher Company Name: Mahris Construction

Address: P.O. Box 22272 City/State/Zip: Lincoln, NE 68542

☐ Check if contractor designed system Work Phone: 402-432-1505

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

Designer Name: Lloyd Jakoubek Firm: Raymond Contracting, Inc. Work Phone: 402-890-6609

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 2/13/06 Date frwd 2/14/06 ACTION ☒ Approved ☐ Disapproved Signature Jerald C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 1/30/06 Date frwd 2/6/06 ACTION ☒ Approved ☐ Disapproved Signature Michael O. Dwyer
3. **City or County Engineer** Date rec'd 2-14-06 Date frwd 2-14-06 ACTION ☒ Approved ☐ Disapproved Signature

line lagoon - need fence 3/17/06

Installation Final Written Approval

By Doug Amen

Date 1/17/07

Business Office Use Only
Date Rec'd 2/13/06
Amt Paid $275.00
Rec'd By CW Cash/Check No. 6060

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

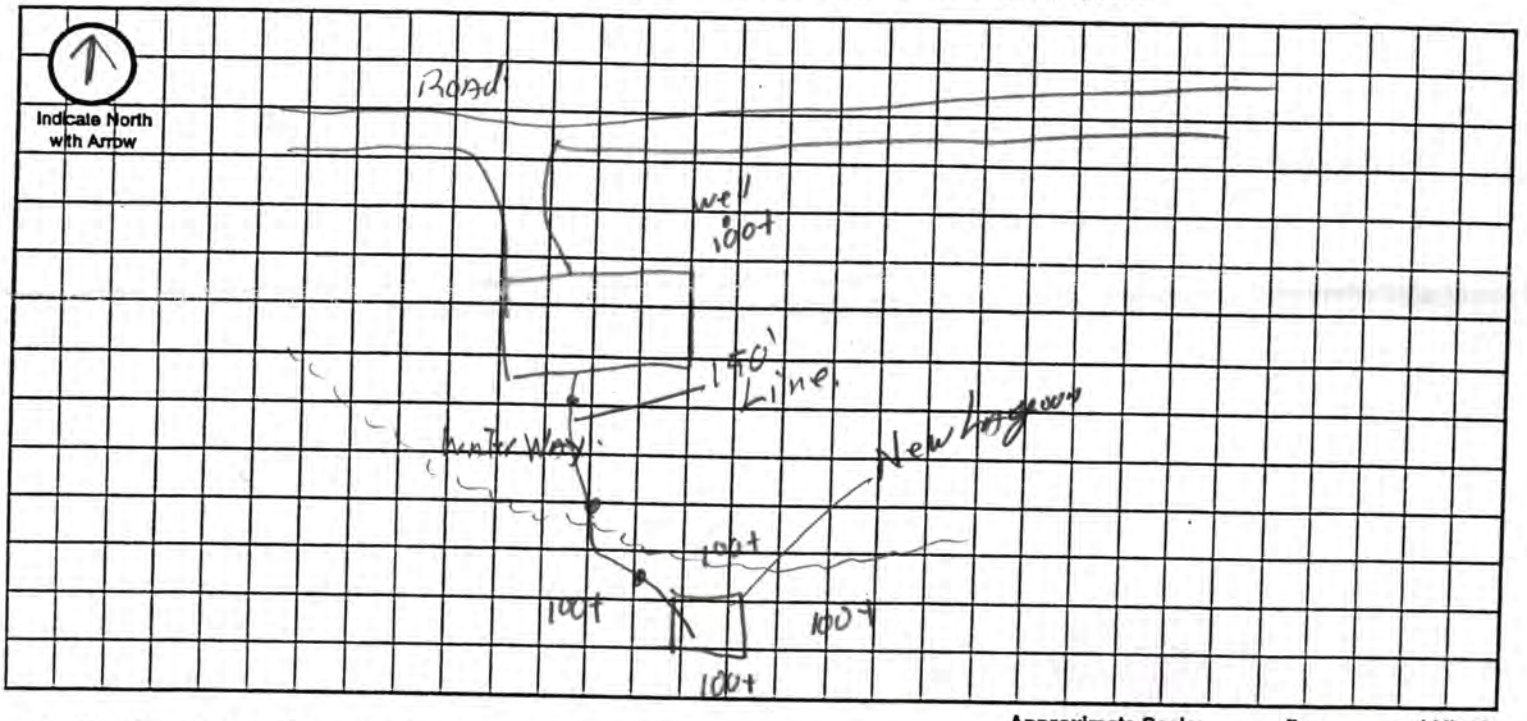
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C

Permit Number: 063803150

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) Not yet available SW 14 36-7-7 Lot 3 Cyrus Acres City Firth NE, Zip 68358

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 Jay Maher Date 1-23-06

Installer Kevin D. Johnson Date 1-16-06

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

ATTN LA-Dougy
↗ Thats French

Date 3/17/06 (Lagoon)

System Location (Indicate correct number and street)

Address _____ (no rural route) City Firth NE, Zip 68358

Cyrus Acres
SW1/4 36-7-7 Lot 3

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 39" in.
3. Distance between dwelling and ~~septic tank~~ Lagoon: 227 middle ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 50 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

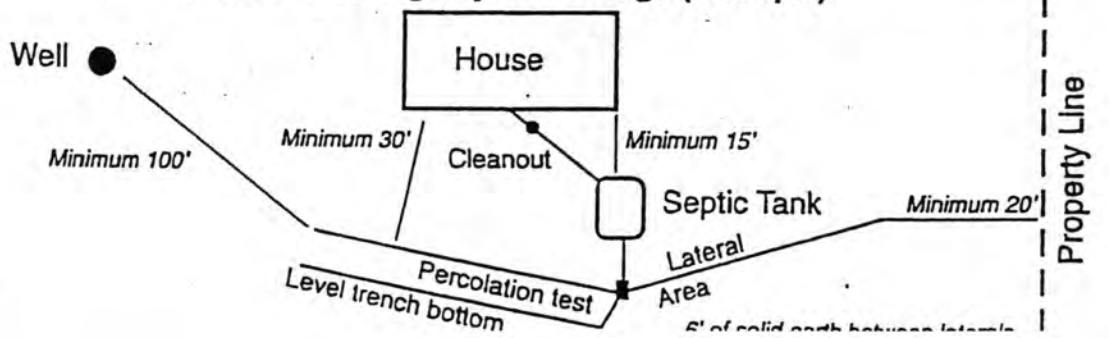
(Provide as-built drawings on back of this form)

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.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

