Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
LAGOON

Permit # 99380209701

Issued 10/08/99
Expires 04/08/00
Revenue Code 3157

Establishment

WALLACE & CARLA SCHROEDER
T7N R7E SEC 16 QTR SE
SE 1/4 OF SE 1/4
6500 PRINCETON RD-FIRTH

FEES: $150.00

Permitee

WALLACE & CARLA SCHROEDER
7551 S 32 ST
LINCOLN NE 68516-4884

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

011066

432-2494 432-7880

A

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

Permit Number: 993802097

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 6500 Princeton Road (no rural route) City Firth NE, Zip 68358

Legal Description SE 1/4 SE 1/4 16 Section 7N Township 7E Range SEE ATTACHED 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 Wallace D. & Carla M. Schroeder Signature _____

Address 7551 S 32nd St. City/State/Zip Lincoln, NE 68516-4884

☐ Check if owner designed system Home Phone 402-421-1338 Work Phone 402-430-6700

C. Contractor

Name _____ Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Claude Oie PE Firm Percolation Test Performed Work Phone 402-423-0614

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 10/8/99 Date frwd 10/11/99 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Nood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10/11/99 Date frwd 10/11/99 ACTION ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 10/11/99 Date frwd 10/11/99 ACTION ☒ Approved ☐ Disapproved Signature _____

10/11/99 Hours fence/Sign

Installation Final Written Approval

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

Date JUNE 28, 2000

Business Office Use Only

Date Rec'd 10/8/99
Amt Paid 150.00
Rec'd By 10/8/99 Cash/Check No. 4207

ant

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

B

Permit Number: 9938020 97

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

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

Owner _____ Addresss _____

Soil Type (SCS): _____ Percolation Rate: 52 min./inch

Date of Tests 9/18 to 9/19 Weather: Precipitation none Temperature 70°

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	44	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	5/8	48
2	40	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	1/2	60
3	36	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	5/8	48
4	36	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	5/8	48
5	36	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	5/8	48
6	36	9/18	8:00	9/19	8:00	9/19	11:30		9/19	12:00	30	1/2	60

Sum of Percolation Rates: 312
Average of Rates: 52
Rate Used for Calculation: 52

Person Conducting Percolation Tests

Name: Claude Oie PE
Phone: 402-423-0614
Address 5910 So. 52nd st. Ct.
Lincoln Ne: 68516

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks MUST BE SEALED.

Signature of Reviewing Official Jerrold C. Hood Date OCTOBER 8, 1999

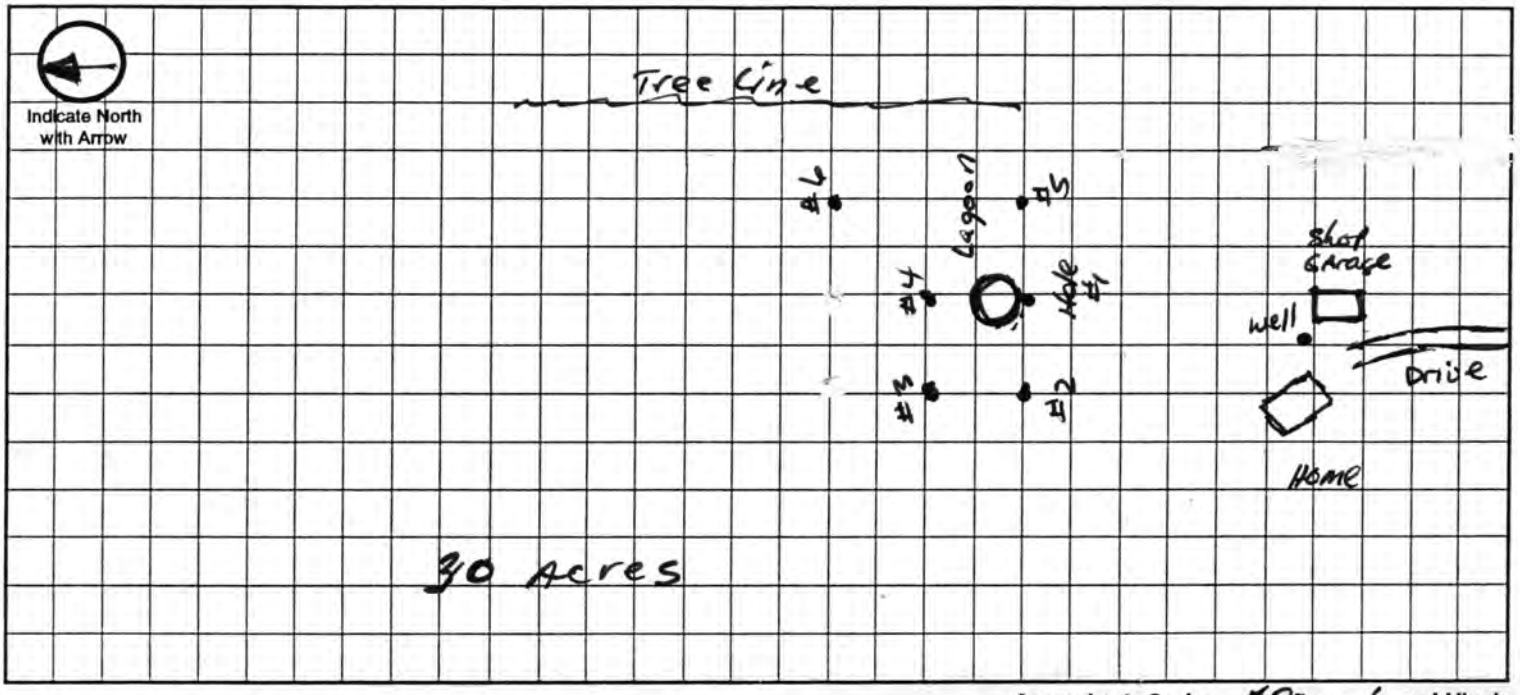
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 993802097

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: 50 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 6500 Princeton Rd City Hickman NE, Zip 68372

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 52 (min. per inch) Soil Type: _____ Land Slope: 2 %

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 10-8-99

Installer Capital City Trenching Harold Gisement Date 9-22-99

FORM 23-102 10-96

Official Survey Record

LANCASTER County, Nebraska

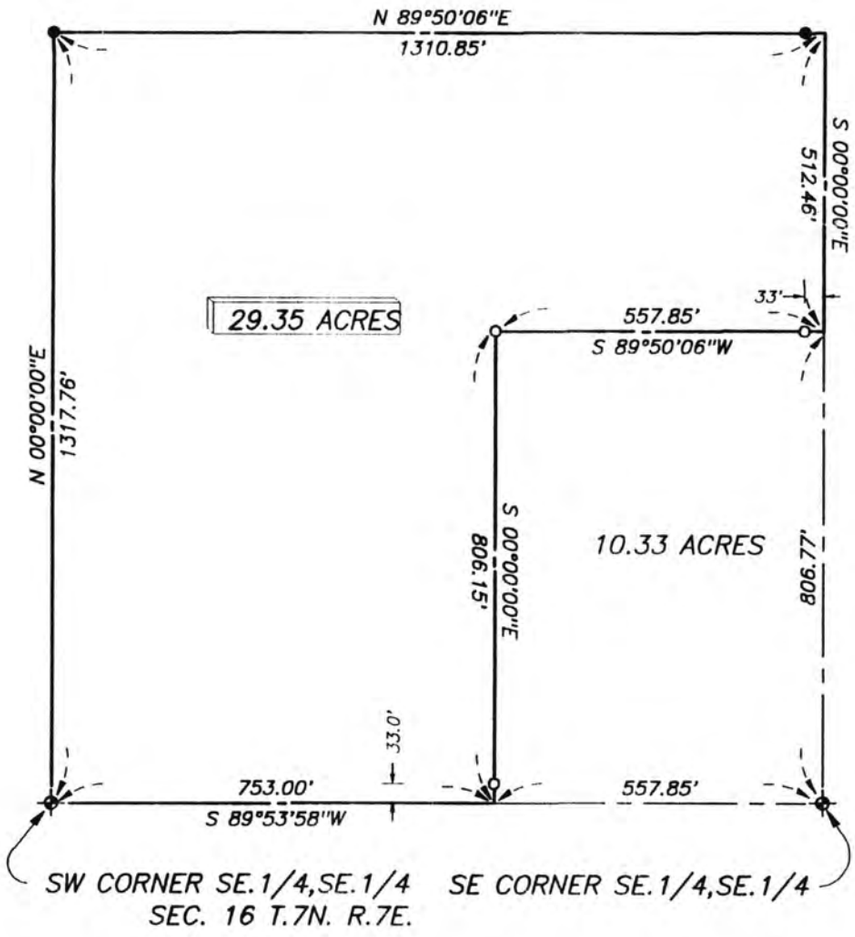
Phone (402) 434-2686
Fax (402) 434-2687

ALLIED SURVEYING AND MAPPING, INC.
6120 South 58th Street – Suite "A" – Lincoln, Nebraska 68516

Survey a part of the Southeast Quarter of the Southeast Quarter of Section 16 T. 7 N., R. 7E of the 6th P.M.

Job No. 27179

Febuary, 1999





SCALE: 1" = 300'

o = Set 5/8"x 24" Rebar
● = Found 5/8" Rebar



SURVEYORS CERTIFICATE

I hearby certify that I have accurately surveyed the property in the above plat. Iron Rebar were set at points marked o. All dimensions are in feet and decimals of a foot.

Signed this 9th day of Febuary, 1999

NAME Kerry W. Simonds
KERRY W. SIMONDS

Surveyor's License #333
Nebraska L.S. (SEAL)

LEGAL DESCRIPTION:

Description of a 29.35 acre tract of land located in the Southeast Quarter of the Southeast Quarter of Section 16, Township 7 North, Range 7 East of the 6th P.M., Lancaster County, Nebraska and more particularly described as follows:

Beginning at the Southwest corner of the Southeast Quarter of the Southeast Quarter of said Section 16: THENCE in a Northerly direction, along the West line of the Southeast Quarter of the Southeast Quarter of said Section 16, on an assumed bearing of North 00 degrees 00 minutes 00 seconds East for a distance of 1317.76 feet to the Northwest corner of the Southeast Quarter of the Southeast Quarter of said Section 16

THENCE South 89 degrees 50 minutes 06 seconds West, along the North line of the Southeast Quarter of the Southeast Quarter of said Section 16, for a distance of 1310.85 feet to the Northeast corner of the Southeast Quarter of the Southeast Quarter of said Section 16

THENCE South 00 degrees 00 minutes 00 seconds East, along the East line of the Southeast Quarter of the Southeast Quarter of said Section 16, for a distance of 512.46 feet

THENCE South 89 degrees 50 minutes 06 seconds West for a distance of 557.85 feet

THENCE South 00 degrees 00 minutes 00 seconds East for a distance of 806.15 feet to a point on the South line of the Southeast Quarter of the Southeast Quarter of said Section 16

THENCE South 89 degrees 53 minutes 58 seconds West, along the South line of the Southeast Quarter of the Southeast Quarter of said Section 16, for a distance of 753.00 feet to the Point of Beginning

Together with and subject to covenants, easements, and restrictions of record.

Said property contains 29.35 acres more or less.

Jerry Hood Harold Hensmut 432-24 94

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 10-15-99

System Location (Indicate correct number and street)

Address 6500 Princeton Rd. (no rural route) City Hickman NE, Zip

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: [redacted] in.
   or distance below basement floor: 36 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

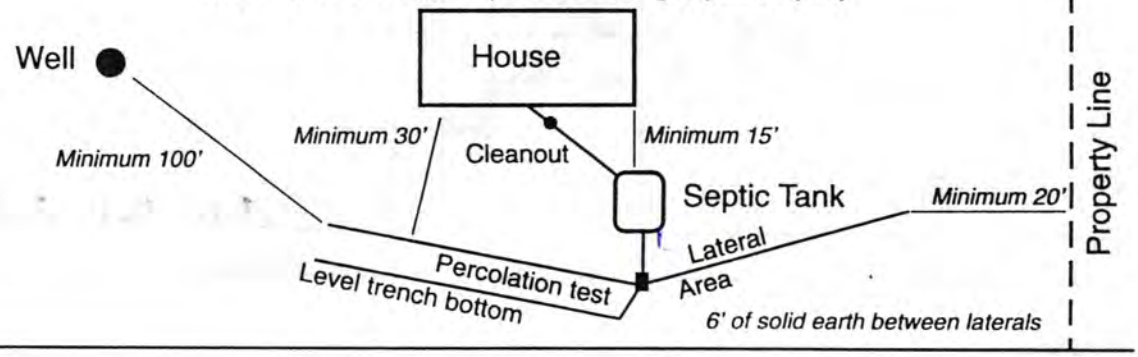
(Provide as-built drawings on back of this form)

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.

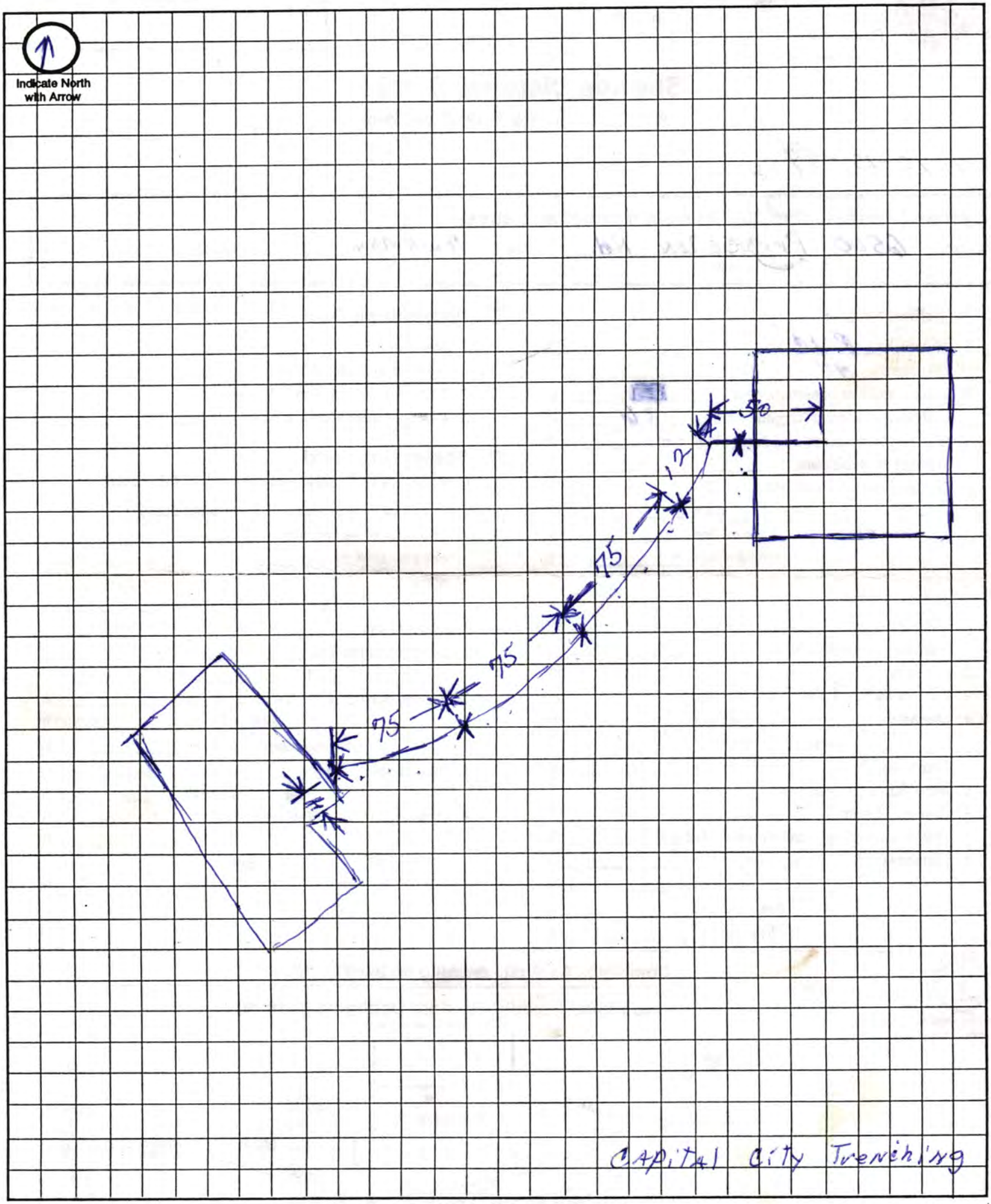
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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