Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

002784

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380266301

Issued 06/13/03
Expires 12/13/03
Revenue Code 3157

Establishment

GREGORY K EDWARDS
T7N R7E SEC 36
GOLDEN POND ESTS LOT 5
29151 GOLDEN POND RD-FIRTH

FEES: $200.00

Permittee

GREGORY K EDWARDS
7340 S 18 ST
LINCOLN NE 68512

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

JUN 2 4 2003

A

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

Permit Number: Q3380266301

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 29151 Golden Pond Rd. (no rural route) City Firth Ne NE, Zip 68358

Legal Description 4.26 ac (1/4) 36 (1/4) Section Firth-7N Township 7E Range Golden Pond Estates Subdivision Addition 5 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 Gregory K Edwards Signature Gregory K Edwards

Address 7340 S 18th City/State/Zip Lin Ne 68512

☐ Check if owner designed system Home Phone 423-1190 Work Phone 423-1190

C. Contractor

Name Same - Gy Edwards 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 Gordon Lukes Firm G+A Backhoe Service Work Phone 450-2409

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 6/13/03 Date frwd 6/25/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6-20-03 Date frwd 6-21-03 ACTION ☒ Approved ☐ Disapproved Signature [illegible]
3. **City or County Engineer** Date rec'd 6-25-03 Date frwd 6-25-03 ACTION ☒ Approved ☐ Disapproved Signature [illegible]

7/10/03 Dark, sewer distribution boxes, level

Installation Final Written Approval

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

Date JULY 28, 2003

Business Office Use Only

Date Rec'd 6/13/03

Amt Paid 200.00

Rec'd By cw Cash/Check No. 8801

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: ~~233~~ 033802663

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 29151 Goldon Pond Rd (no rural route) City Firth Ne NE, Zip 68358

Owner Gregory K Edwards Addresss 7340 S 18th

Soil Type (SCS): STEINAUER SILT LOAM. Percolation Rate: _____ min./inch

Date of Tests 4-25 to 4-26 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	34"	4-25	8:10	4-25	3:50	4-26	8:50	14"	4-26	4:20	30	1"	30 MIN/IN
2	36"	4-25	8:10	4-25	3:50	4-26	8:50	15"	4-26	4:20	30	1½	20 MIN/IN
3	34"	4-25	8:12	4-25	3:52	4-26	8:52	14"	4-26	4:22	30	1¼	24 MIN/IN
4	33"	4-25	8:12	4-25	3:52	4-26	8:52	13"	4-26	4:22	30	1¼	24 MIN/IN
5	36"	4-25	8:14	4-25	3:54	4-26	8:54	15"	4-26	4:24	30	1⅛	27 MIN/IN
6	36"	4-25	8:14	4-25	3:54	4-26	8:54	16"	4-26	4:24	30	1¼	24 MIN/IN

Person Conducting Percolation Tests

Name: Greg Edwards

Phone: 423-1190

Address 7340 S 18th

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 25 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

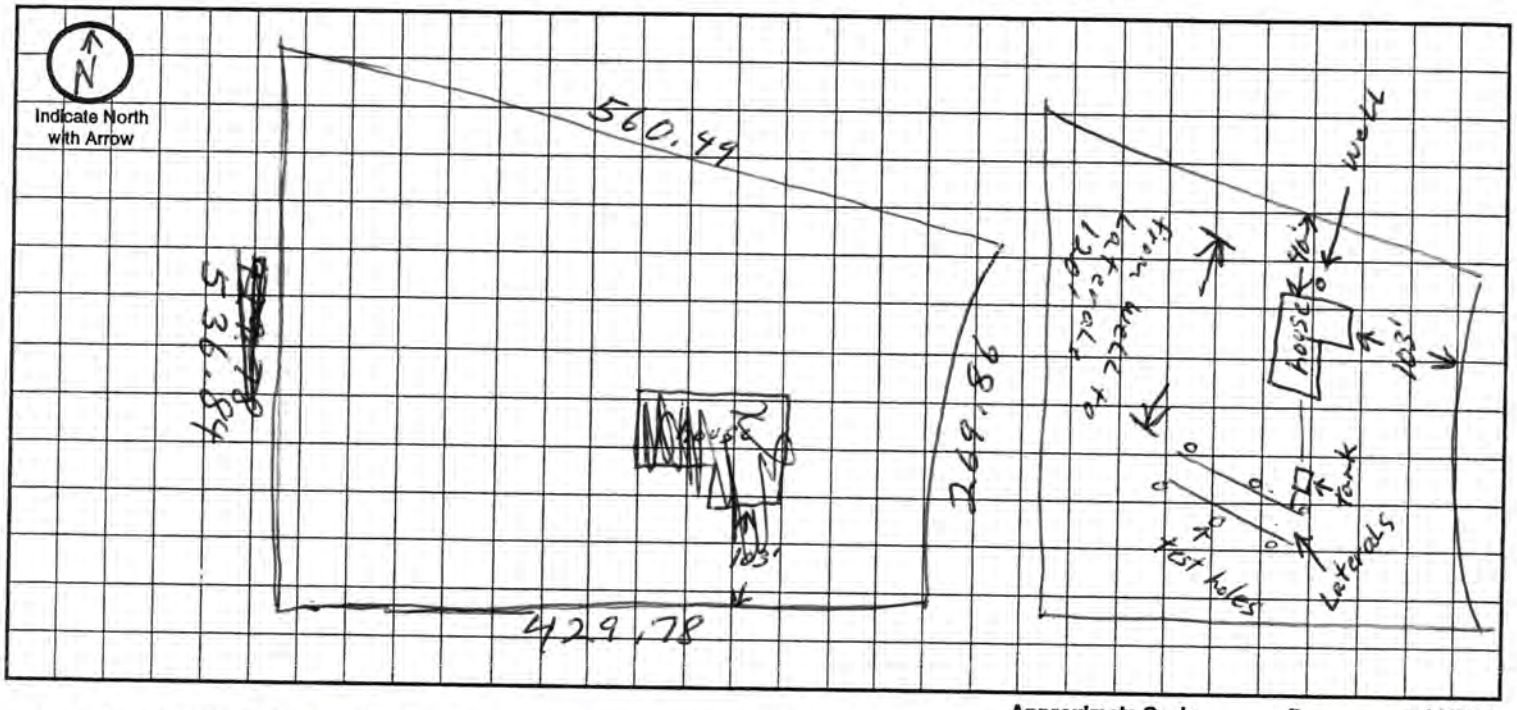
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C

Permit Number: ~~233~~ 033802663

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) 29151 GoldenPond Rd. 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 30 (min. per inch) Soil Type: _____ Land Slope: 20 %

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

Total Square Feet of Field Required: 1000 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: Infiltrator H10 Standard

Capacity of Septic Tank 1500 gals Number of Absorption Beds: 1 Number of Distribution Laterals per Bed 1

Total Length of Laterals 250 ft. Number of Trenches 2 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 Greg Edwards Date 3/16/03

Installer Gordon Lukes Date 6-13-2003

FORM 23-102 10-96

JUL 2 1 2003

G & A

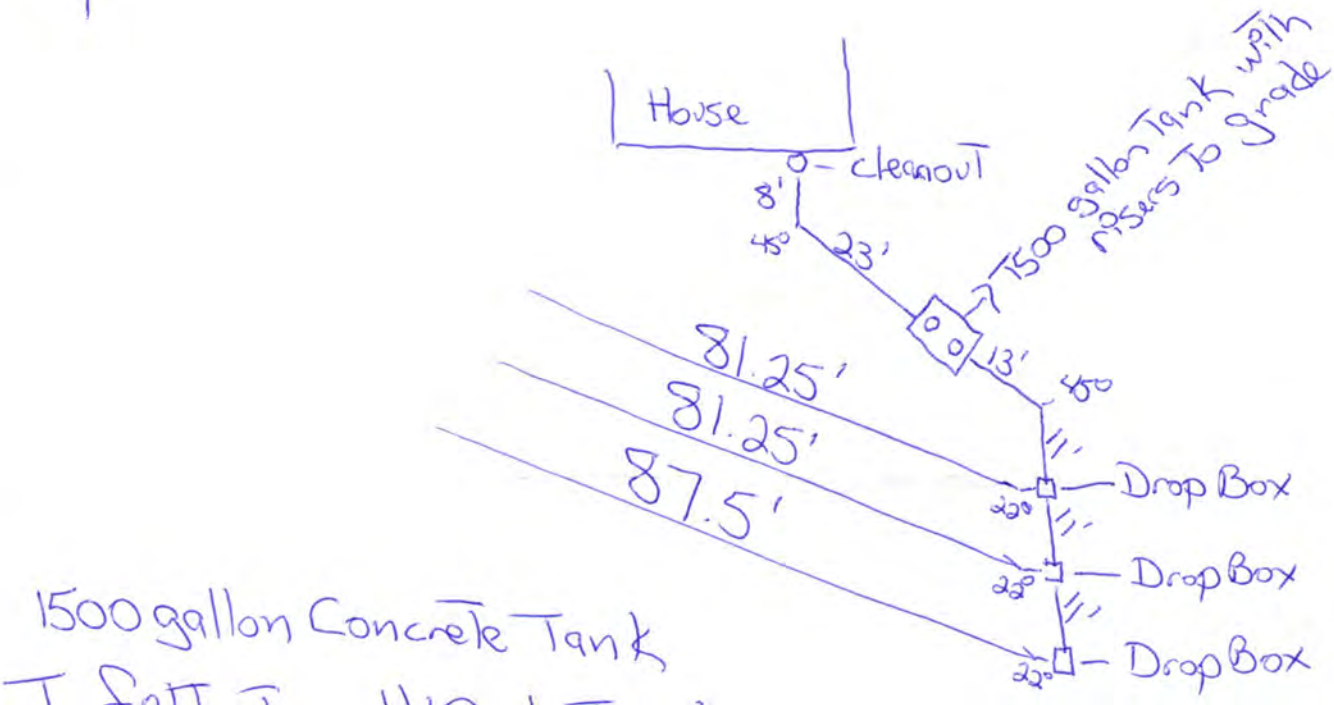
BACKHOE SERVICE

Gordon Lukes - Owner/Operator
2319 South 214th Street
Eagle, NE 68347-1995
Bus. (402) 781-2400
Cell. (402) 450-2409
Fax. (402) 781-2411

07/17/03

To Jerry Hood,
This is the as built drawing for Greg Edwards @ Golden Pond Road. 29151 North Golden Pond

North



1500 gallon Concrete Tank
Infiltrator H10 Lateral