Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
LAGOON

Establishment

RICK MATTHES
T7N R8E SEC 10
22500 S 148 ST-PANAMA

Permitee

RICK MATTHES
8140 S 84 ST
LINCOLN NE 68516

Permit # 00380215801

Issued 03/23/00
Expires 09/23/00
Revenue Code 3157

FEES: $150.00

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

011968

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

A

Permit Number: 003802158

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 22500 So 148th (no rural route) City PANAMA NE, Zip

Legal Description Pt. of S½ NW¼ 10 7N R8 SEE ATTACHED
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 Rick Matthes Signature

Address 8140 So 84 City/State/Zip

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

DAN BUSS Excavating Inc 786-7218 (Dug lagoon)

Name Schwanck Trench Company Name

Address City/State/Zip

☐ Check if contractor designed system Work Phone 430 6113 489 7294

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 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 3/22/00 Date frwd 3/22/00 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd Date frwd ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 3/24/00 Date frwd 3/24/00 ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

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

Date MAY 16, 2000

Business Office Use Only

Date Rec'd 03/22/00
Amt Paid 150.00
Rec'd By [illegible] Cash/Check No. 2401

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

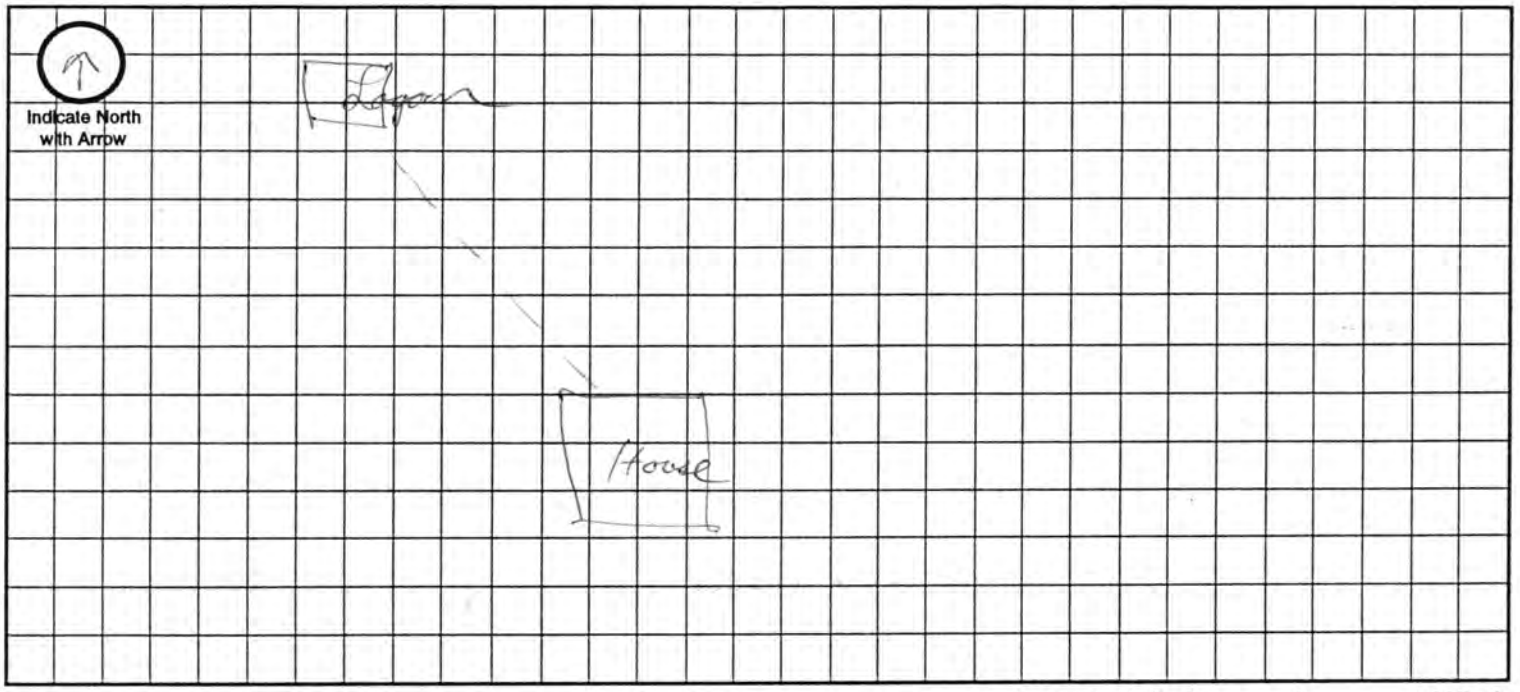
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
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C

Permit Number: 03802158

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) 22500 So 148th City _____ NE, Zip _____

B. Proposed Septic Tank/s

Lagoon

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

No perc test taken

Percolation Rate _____ (min. per inch) Soil Type: BURCHARD CLAY LOAM 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

X Home Building Contractor Rick Matthis Date 3-22

Installer Larry Schwarck Date 3-22

FORM 23-102 10-96

APR 3 2000

D

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

Permit Number: 03802158

Sewage Disposal System

As Built Plans & Specifications

Date 3-29-00

System Location (Indicate correct number and street)

Address 22500 So 148th (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 304 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

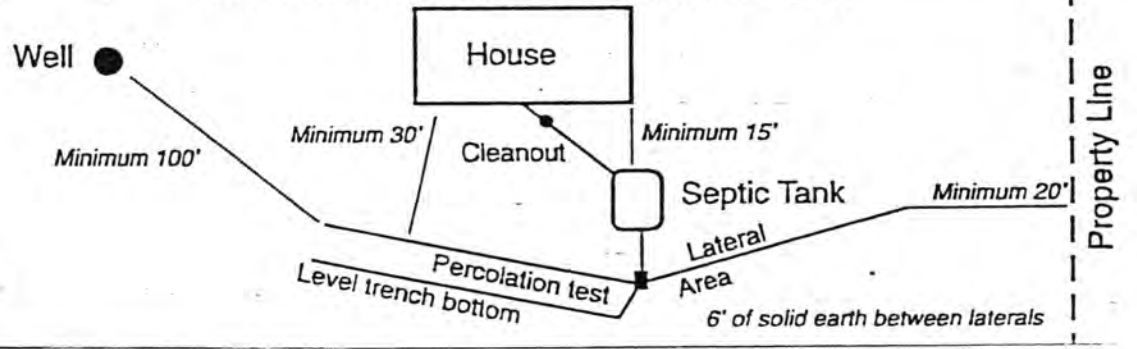
(Provide as-built drawings on back of this form)

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.

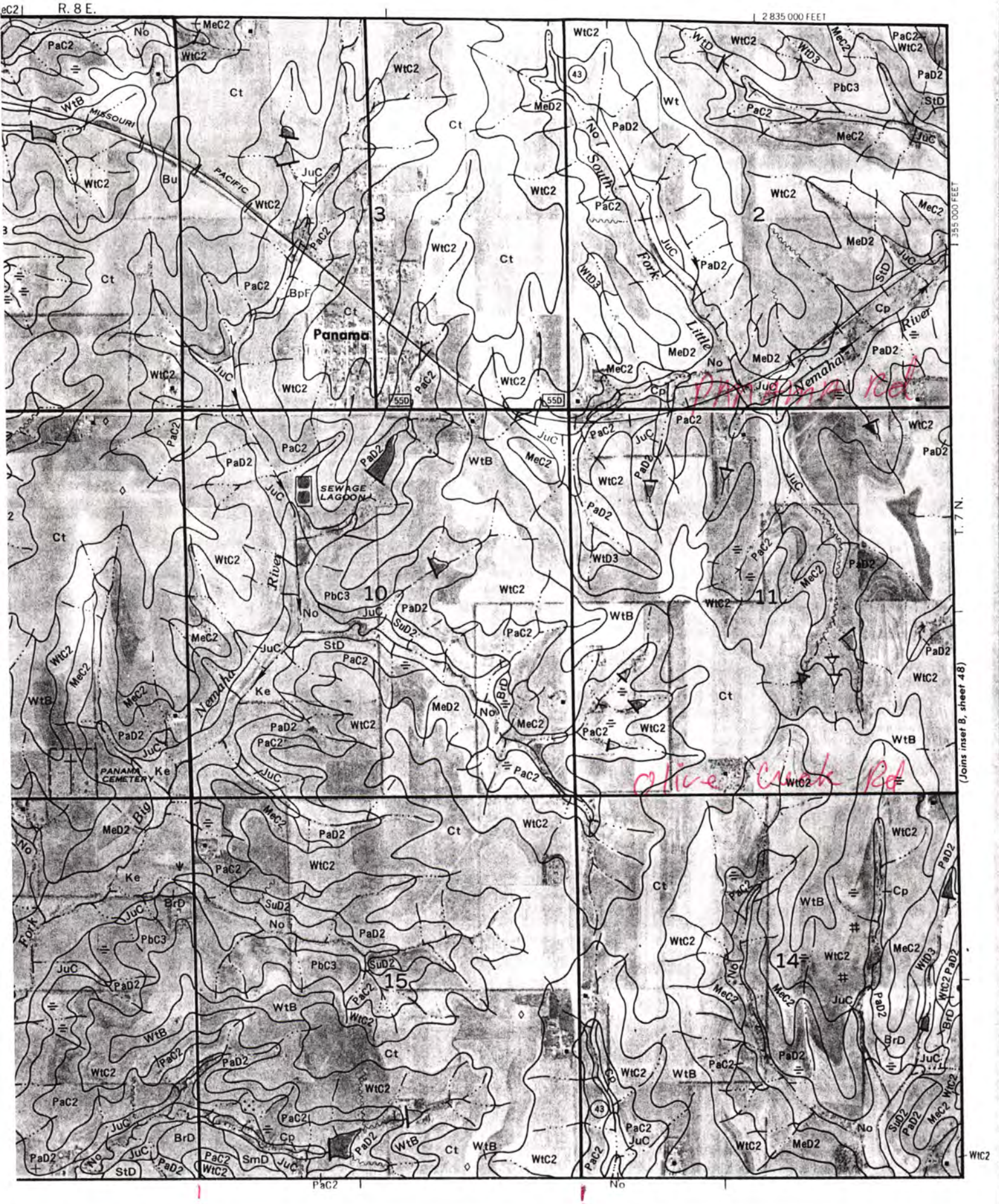
Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96


R. 8 E.
2 835 000 FEET
355 000 FEET
T. 7 N.
(Joins inset B, sheet 48)
Panama
SEWAGE LAGOON
PANAMA CEMETERY
MISSOURI PACIFIC
Nemaha River
Little Nemaha River
South Fork
Big Nemaha River
Panama Rd
Olive Creek Rd
1486 ft
1620

FILE: 99-675

EXHIBIT "A"

BEGINNING AT THE WEST ONE QUARTER CORNER OF SECTION 10, TOWNSHIP 7 NORTH, RANGE 8 EAST OF THE 6TH P.M., LANCASTER COUNTY, NEBRASKA. THENCE IN AN EASTERLY DIRECTION ON AN ASSUM3D BEARING OF S 89°22'28" E ON THE SOUTH LINE OF THE SOUTHWEST QUARTER OF THE NORTHWEST QUARTER OF SAID SECTION 10 A DISTANCE OF ONE THOUSAND SIX AND TWENTY-TWO HUNDREDTHS (1,006.22) FEET. THENCE N 00°00'56" W ON A LINE PARALLEL TO THE WEST LINE OF THE NORTHWEST QUARTER OF SAID SECTION 10 A DISTANCE OF NINE HUNDRED THIRTY-NINE AND NINETY-TWO HUNDREDTHS (939.92) FEET. THENCE N 89°22'25" W ON A LINE PARALLEL TO THE NORTH LINE OF THE SOUTHWEST QUARTER OF THE NORTHWEST QUARTER OF SAID SECTION 10 A DISTANCE OF ONE THOUSAND SIX AND TWENTY-TWO HUNDREDTHS (1,006.22) FEET TO A POINT ON THE WEST LINE OF THE NORTHWEST QUARTER OF SAID SECTION 10. THENCE S 00°00'56" E ON THE WEST LINE OF THE NORTHWEST QUARTER OF SAID SECTION 10 A DISTANCE OF NINE HUNDRED THIRTY-NINE AND NINETY-THREE HUNDREDTHS (939.93) FEET TO THE POINT OF BEGINNING.

ATTN:
JERRY HOOD

Well/Sewage System Inspection Form

Lincoln-Lancaster County Health Department
3140 "N" Street • Lincoln, NE 68510
402-441-8022

Legal Description T7 R8 Sec 10 **Location** _____

Owner/Requestor 22500 S. 14 & 4

Type of Inspection:

- ☐ New System - Initial
- ☐ New System - Follow-up
- ☐ Existing System - Repair
- ☐ Existing System - Follow-up
- ☐ Loan Approval
- ☐ Consultation
- ☐ Other (Specify)

Remarks Bentonite clay required splash pad, depth marker Fence, signs, locking gate, Barrel Test Results. Contact this office for final inspection.

Based on an inspection this day, the items circled below identify the violations in construction or operation. Some items may not apply. Components that could not be located are indicated as "unknown."

Water System

1. Approved Permit (Permit not applicable)
2. Sanitary Seal
3. Screened Vent/Conduit Sealed
4. Well Casing Material
5. Well House
6. Distance of Well from
   - A. Leach Field
   - B. Septic Tank
   - C. Sewer Line
   - D. Frost-Proof Hydrant
   - E. Lagoon
   - F. Accumulated Manure
   - G. Pit or Depression
7. Pressure Line from Sewage System
8. Other Deficiencies (Specify)

Sewage System: ☐ Septic ☑ Lagoon

1. Approved Permit (Permit not applicable)
2. Visible Discharge or Seepage
3. Location from Property Line, Building
4. Location from Water System Component
5. Lateral Construction, Length, Drop
6. Septic Tank Size + Installation
7. Distribution box
8. Lagoon Fencing, Warning Signs, Vegetation Dike Damage, Locked Gate, Water Depth
9. Constructed According to Sizing
10. Septic Tank: Constructed Properly, Maintained
11. Other Deficiencies (Specify)

Inspection by: Jim Bare **Received by:** Matt Mud

Date: 3-28-00

Inspfrm Revised 5/95

As Built Drawing by Schwarck trenching

3-29-00 for Rick Matthes

