Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009052

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Establishment: NICK HEETDERKS
T7N R8E SEC 33 QTR NE
NW 1/4 OF NE 1/4
14171 FIRTH RD-FIRTH

Permittee: NICK HEETDERKS
14171 FIRTH RD
FIRTH NE 68358

Permit # 06380320901

Issued 06/19/06
Expires 06/19/07
Revenue Code 3157

FEES: $275.00

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

A

Permit Number: 06380320901

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 14171 FIRTH ROAD (no rural route) City Firth NE, Zip 68358

Legal Description NW NE 33 7N 8E PORTION OF S.I.T.
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 Nick Heatherly Signature Nick Heatherly

Address Same City/State/Zip _____

☐ Check if owner designed system Home Phone (402) 540-7191 Work Phone Same

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 Scott Prange Firm Prange Construction Work Phone 402-590-1875

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 2 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 6/19/06 Date frwd 6/19/06	ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 6/19/06 Date frwd 6/19/06	ACTION ☒ Approved ☐ Disapproved Signature	
3. City or County Engineer	Date rec'd 6-19-06 Date frwd 6-19-06	ACTION ☒ Approved ☐ Disapproved Signature	

SEWER WAS COVERED PRIOR TO INSPECTION.

Installation Final Written Approval

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

Date JUNE 23, 2006

Business Office Use Only

Date Rec'd 06/19/06
Amt Paid 275.00
Rec'd By _____ ~~Cash~~/Check No. 1135

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

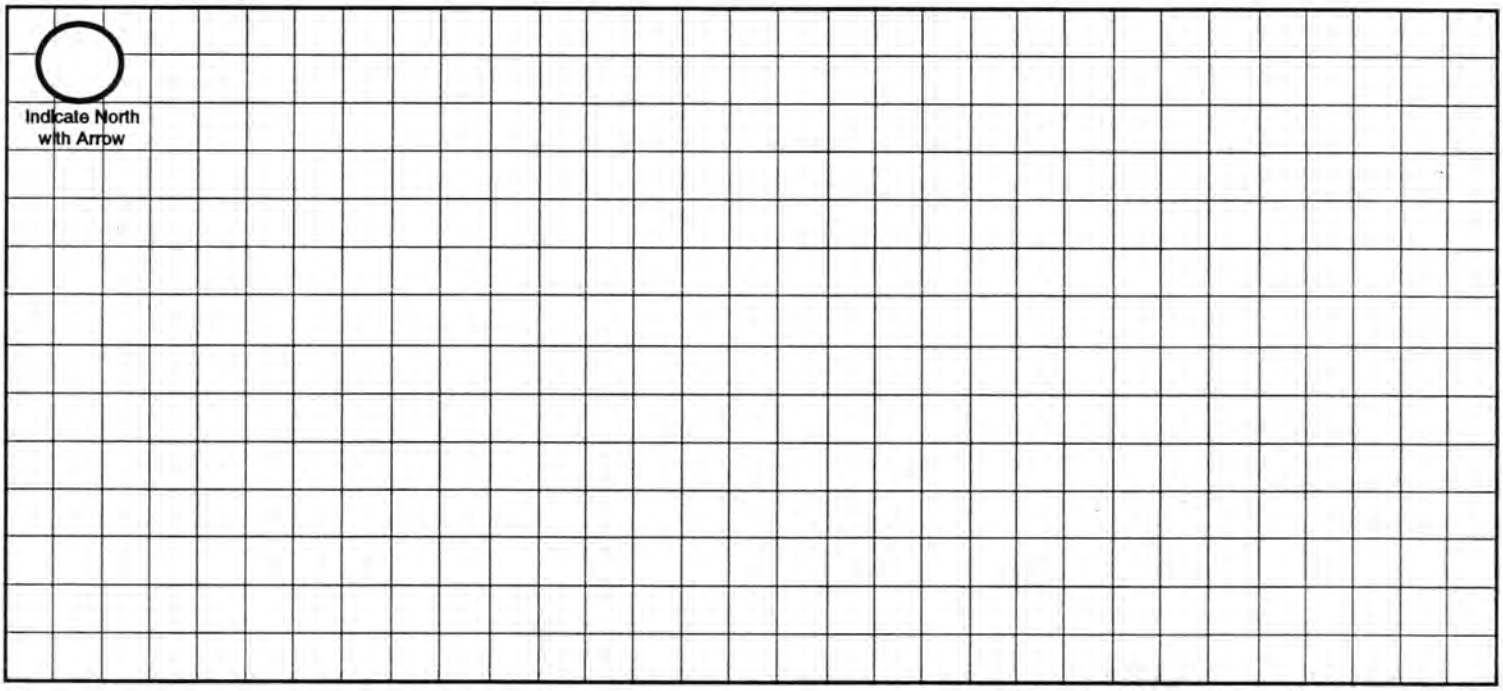
C

Permit Number: 063803209

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) _____ City _____ NE, Zip _____

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 _____ Date _____

Installer _____ Date _____

RNER, SEC. 33-7-8
LAN. CO. SURVEY MARKER
PIPE, NE-70.00, SE-85.00
-65.00' & NW-62.00'

So. 148th STREET

BOUNDARY SURVEY
THE NE 1/4 OF
SEC. 33, T 7 N, R 8 E
LANCASTER COUNTY, NEBRASKA

LEGAL DESCRIPTION

PARCEL A
THAT PART OF LOT 5 IRREGULAR TRACT, LOCATED IN THE NORTHEAST QUARTER OF SECTION 33 TOWNSHIP 7 NORTH, RANGE 8 EAST OF THE 6th P.M., LANCASTER COUNTY, NEBRASKA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT THE NORTHWEST CORNER OF THE NORTHEAST QUARTER OF SAID SECTION 33; THENCE SOUTHERLY ON THE WEST LINE OF SAID NORTHEAST QUARTER, ON AN ASSIGNED BEARING OF S 0°21'39"W A DISTANCE OF 50.00', TO A POINT ON THE SOUTH RIGHT OF WAY LINE OF FIRTH ROAD, SAID POINT ALSO BEING THE POINT OF BEGINNING; THENCE EASTERLY ON SAID SOUTH RIGHT OF WAY OF FIRTH ROAD FOR THE NEXT FIVE (5) COURSES, S 89°40'17"E 270.78'; THENCE NORTHERLY, N 0°19'43"E 17.00'; THENCE EASTERLY, S 89°40'17"E 113.00'; THENCE SOUTHERLY, S 0°19'43"W 17.00'; THENCE EASTERLY, S 89°40'17"E 49.72'; THENCE SOUTHERLY, S 0°21'39"E 1030.56'; THENCE WESTERLY, N 89°40'17"W 433.50', TO A POINT ON THE WEST LINE OF SAID NORTHEAST QUARTER; THENCE NORTHERLY ON SAID WEST LINE, N 0°21'39"E 1030.56', TO THE POINT OF BEGINNING, SAID TRACT CONTAINING AN AREA OF 10.30 ACRES, MORE OR LESS.

SURVEYOR'S CERTIFICATE

I, THE UNDERSIGNED, A DULY REGISTERED LAND SURVEYOR IN AND FOR THE STATE OF NEBRASKA, DO HEREBY CERTIFY THAT I CAUSED A SURVEY TO BE MADE OF THE FORGOING DESCRIBED PROPERTY, AND THAT THE RESULTS OF SAID SURVEY ARE TRULY AND ACCURATELY DEPICTED HEREON, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

IN TESTIMONY WHEREOF WITNESS MY HAND AND SEAL THIS 8th DAY OF JUNE, 2006.

BILLY JOE KERR, LS #483

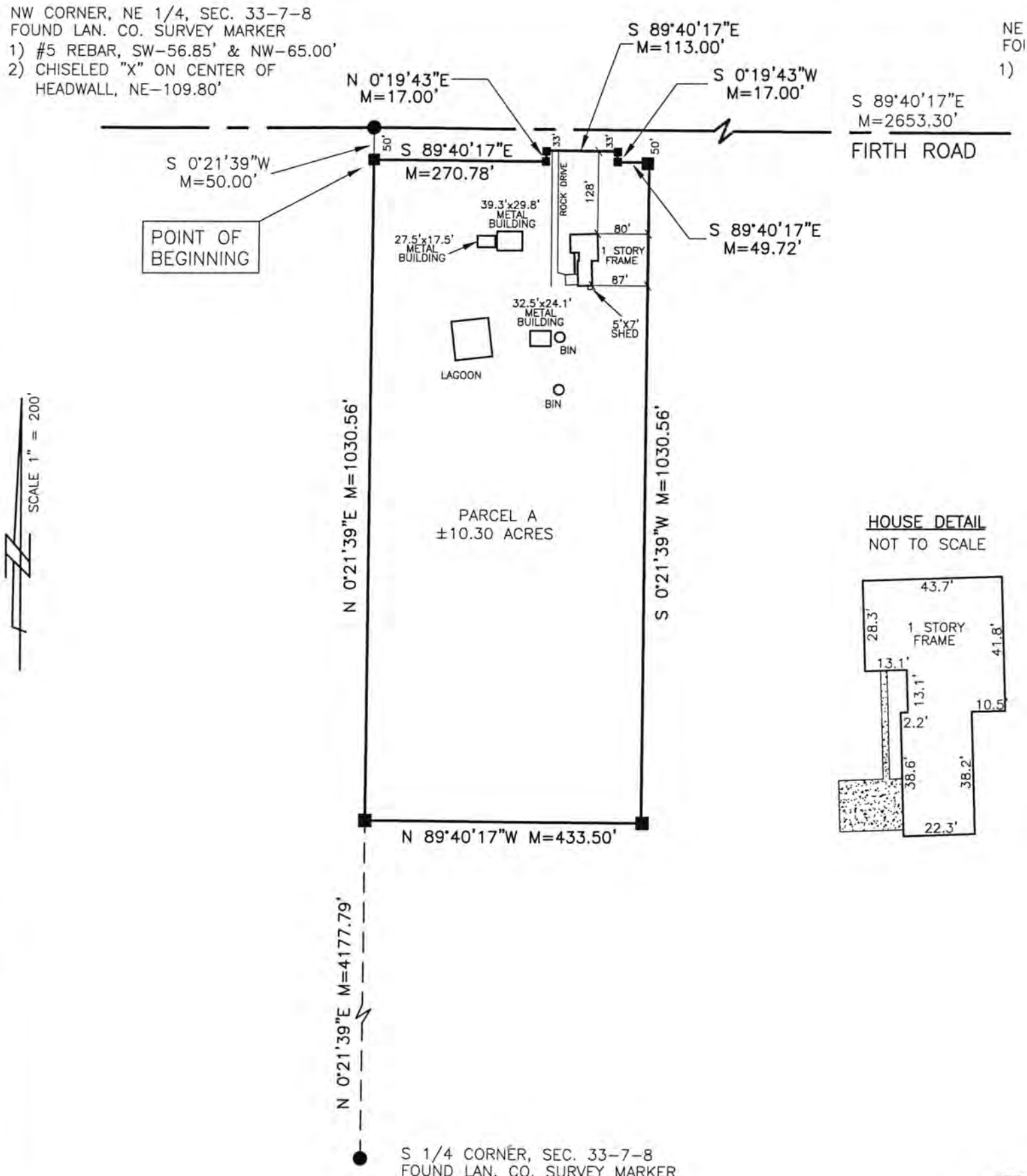
NEBRASKA REGISTERED LS-483 LAND SURVEYOR BILLY JOE KERR

LOCATION SKETCH
NOT TO SCALE

NW	LOT 5
	S 1/2 NE 1/4
SW	SE

TANCE
DISTANCE
UMENT AS NOTED
ENT (#5 REBAR & CAP)
POINT

K & M INC.
LAND SURVEYING
540 W. INDUSTRIAL LAKE DR. #1
LINCOLN, NE 68528
(402) 476-3020
(402) 476-3138 FAX


NW CORNER, NE 1/4, SEC. 33-7-8
FOUND LAN. CO. SURVEY MARKER
1) #5 REBAR, SW-56.85' & NW-65.00'
2) CHISELED "X" ON CENTER OF HEADWALL, NE-109.80'
N 0°19'43"E M=17.00'
S 89°40'17"E M=113.00'
S 0°19'43"W M=17.00'
S 89°40'17"E M=2653.30'
FIRTH ROAD
50'
33'
33'
50'
S 0°21'39"W M=50.00'
S 89°40'17"E M=270.78'
POINT OF BEGINNING
ROCK DRIVE
128'
39.3'x29.8' METAL BUILDING
27.5'x17.5' METAL BUILDING
80'
1 STORY FRAME
87'
S 89°40'17"E M=49.72'
32.5'x24.1' METAL BUILDING
5'X7' SHED
BIN
LAGOON
BIN
SCALE 1" = 200'
N 0°21'39"E M=1030.56'
S 0°21'39"W M=1030.56'
PARCEL A
±10.30 ACRES
N 89°40'17"W M=433.50'
N 0°21'39"E M=4177.79'
S 1/4 CORNER, SEC. 33-7-8
FOUND LAN. CO. SURVEY MARKER
1) #5 REBAR, SW-42.00'
2) 1" PIPE, S-32.97', N-32.85'
HOUSE DETAIL
NOT TO SCALE
43.7'
28.3'
1 STORY FRAME
41.8'
13.1'
13.1'
10.5'
2.2'
38.6'
38.2'
22.3'
PROJ. # 0605022

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

JUN 2 0 2006

D

Permit Number: 06380320 9

Sewage Disposal System

As Built Plans & Specifications

Date 6-19-06

System Location (Indicate correct number and street)

Address 14171 Smith Road (no rural route) City Smith NE, Zip Ne. 68358

A. Building Sewer

1. Material: dirt clay
   Diameter: 60' Square in.
2. Distance above basement floor: — in.
   or distance below basement floor: 25' in.
3. Distance between dwelling and septic tank: 500 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 500' ft.
   stream NA ft.
   pressure line NA ft.
   property line 150' 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

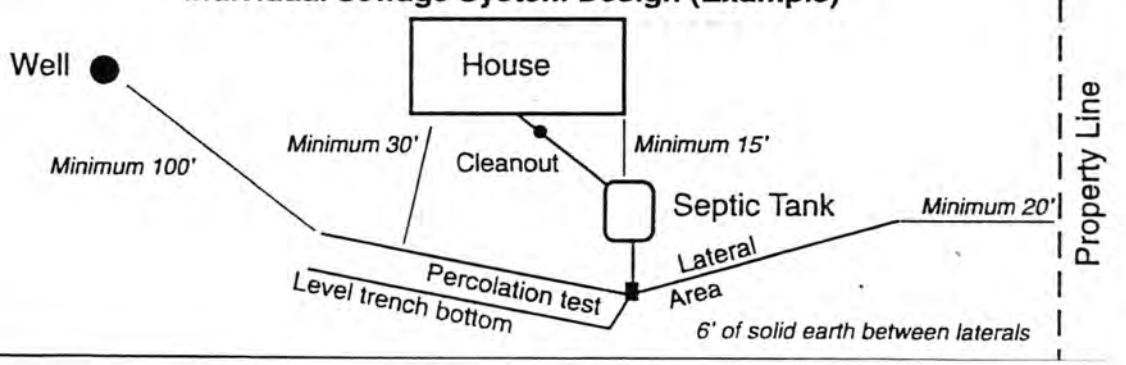
(Provide as-built drawings on back of this form)

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

JUN 19 2006

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

Laboratory Report Printed on: June 15, 2006

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Laboratory Analysis For: PRIVATE COLIFORM

Sample Comments:

Laboratory Number: **P29697-41**
Sampled By: **JERROLD HOOD**
Location: **14171 FIRTH ROAD**
Sample Point:

Date Collected: **14-Jun-2006 09:48 AM**
Date Received: **14-Jun-2006**

Parameter	Results	Units	Method	Analysis Date	Analyst
TOTAL COLIFORM	**Total coliform present - does not meet bacteriological standards**	cfu/100ml	9223B-PA	06/15/06	TW/JN
E. COLI	**E. coli absent**	cfu/100ml	9223B-PA	06/15/06	TW/JN

Note: see reverse side of report for description of acronyms and data qualifiers

For inquiries on result interpretation call: (402) 471-6435.

JUN 2 9 2006

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

Laboratory Report Printed on: June 28, 2006

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Laboratory Analysis For: PRIVATE COLIFORM

Sample Comments:

Laboratory Number: **P29697-45**
Sampled By: **JERROLD HOOD**
Location: **14171 FIRTH RD**
Sample Point:

Date Collected: **27-Jun-2006 12:25 PM**
Date Received: **27-Jun-2006**

Parameter	Results	Units	Method	Analysis Date	Analyst
TOTAL COLIFORM	**Total coliform absent - meets bacteriological standards**	cfu/100ml	9223B-PA	06/28/06	TW/JN
E. COLI	**E. coli absent**	cfu/100ml	9223B-PA	06/28/06	TW/JN

Note: see reverse side of report for description of acronyms and data qualifiers

For inquiries on result interpretation call: (402) 471-6435.

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

JUN 2 9 2006

Laboratory Report Printed on: June 27, 2006

LLCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

Laboratory Analysis For: PRIVATE COLIFORM

Sample Comments:

Laboratory Number: **P29697-43**
Sampled By: **JERROLD HOOD**
Location: **14171 FIRTH RD**
Sample Point:

Date Collected: **26-Jun-2006 02:16 PM**
Date Received: **26-Jun-2006**

Parameter	Results	Units	Method	Analysis Date	Analyst
TOTAL COLIFORM	**Total coliform absent - meets bacteriological standards**	cfu/100ml	9223B-PA	06/27/06	TW/JN
E. COLI	**E. coli absent**	cfu/100ml	9223B-PA	06/27/06	TW/JN

Note: see reverse side of report for description of acronyms and data qualifiers

For inquiries on result interpretation call: (402) 471-6435.

INTER-DEPARTMENT COMMUNICATION

To: Jerry Hood

Date: 6/12/06

Department: County Health Dept.

From: Terry Kathe

Attention:

Department: Building & Safety

Copies To:

Subject: Farmstead subdivision
14171 Firth Road

P29697-41

Could you review the attached farmstead subdivision request and respond with any comments the County Health Department might have.

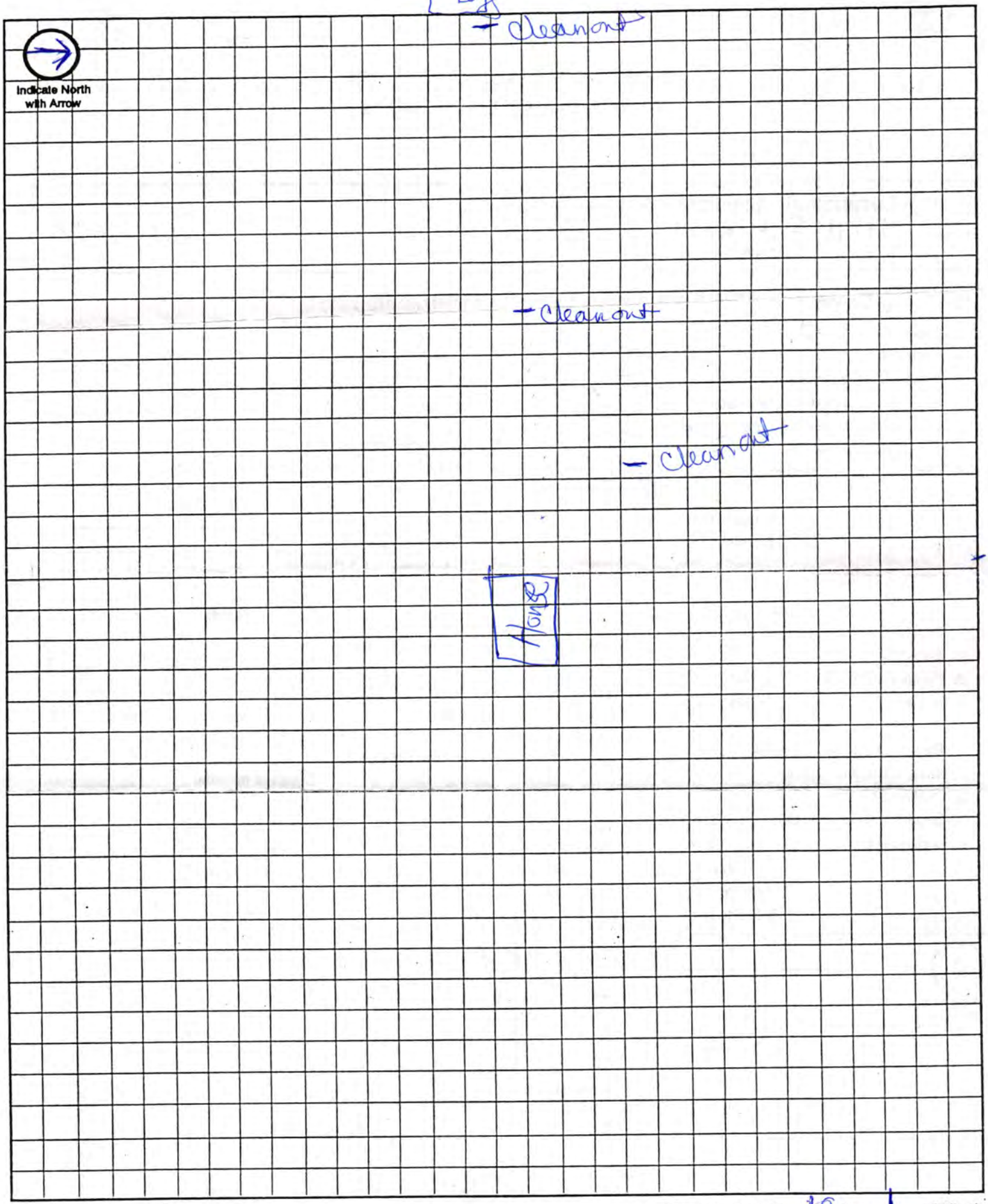
Owner: TenHulzen, Beverly
Applicant: Heetderks, Nicholas
3914 South 14th Street
Phone: 402-540-7191
Lincoln, Nebraska

P29697-43 - COLI 6/26/06

P29697-45 6/27/06 COLI

As Built Drawing

JUN 2 0 2006



Approximate Scale: 10 ft. = 1 grid line/s