Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

011031

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEWAGE REPAIR

Permit # 07380335301

Issued 06/27/07
Expires 06/27/08
Revenue Code 3157

Establishment

CHARLES BRUNKE
T8N R5E SEC 2 QTR NE
LOT 13
7601 W SALTILLO RD-MARTELL

FEES: $160.00

Permittee

CHARLES BRUNKE
7601 W SALTILLO RD
MARTELL NE 68404

TOTAL: $160.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

07380335301
Haf

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☐ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

LCR 5992

1. **Legal description of property:**
   Township 8 Range 5 Section 2 1/4 Section NE
   Block _____ Lot 13 Addition _____
   Parcel ID 02 - 02 - 200 - 011 - 000 (i.e. 99-99-999-999-999)
   Street Address 7601 W. Saltillo Rd, Martell, NE 68404

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** add new drop box and 206' of laterals

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Thrasher, Raymond Contracting, Inc.

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

NE 68404

Print Name Charles Brutke Address 7601 W Saltillo Rd Martell, Phone 402-797-3470
Applicant Signature (owner or lessee) Charles F Brutke

$160

Please include the permit fee (~~$100~~) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 06/26/07 REVIEW: ☒ Approved ☐ Disapproved By: Doug Smith

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 06/27/07 By Doug Smith

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 06/27/07 Amount 160.00 Check No. 6458 Initials ms

White - Division Copy Pink - Business Office Revised 9/00

Application to Alter, Extend or Repair an Individual Sewage Disposal System

☐ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto. LCR 5992

1. **Legal description of property:**
   Township 8 Range 5 Section 2 1/4 Section NE
   Block _____ Lot 13 Addition _____
   Parcel ID 02 - 02 - 200 - 011 - 000 (i.e. 99-99-999-999-999)
   Street Address 7601 W. Saltillo Rd, Martell, NE 68404

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe _____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** add new Drop box and 206' of Laterals

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jakubek, Raymond Contracting, Inc.

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Charles Brutke Address 7601 W Saltillo Rd Martell, NE 68404 Phone 402-797-3470
Applicant Signature (owner or lessee) Charles J Brutke

$160

Please include the permit fee (~~$100~~) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 06/26/07 REVIEW: ☒ Approved ☐ Disapproved By: Doug Smith

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date 06/27/07 By Doug Smith

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 06/27/07 Amount 160.00 Check No. 6458 Initials LO

White - Division Copy Pink - Business Office Revised 9/00

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

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 7601 W Saltillo (no rural route) City Martell NE, Zip 68404

Owner Charles Brunke Addresss same ↑

Soil Type (SCS): Steinauer Loam Percolation Rate: 33 min./inch

Date of Tests 6-19-07 to 6-20-07 Weather: Precipitation 0 Temperature 80°

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	32	6-19	8:00a	6-19	12:00p	6-20	8:00a	6	6-20	12:00p	30	1	30
2	31	"	"	"	"	"	"	"	"	"	"	11/16	43
3	29	"	"	"	"	"	"	"	"	"	"	15/16	23
4	32	"	"	"	"	"	"	"	"	"	"	1 1/4	24
5	29	"	"	"	"	"	"	"	"	"	"	7/8	34
6	30	"	"	"	"	"	"	"	"	"	"	11/16	43

Sum of Percolation Rates: 197

Average of Rates: 33

Rate Used for Calculation: 33

Person Conducting Percolation Tests

Name: Terri Jakoubek, Raymond Contracting, Inc

Phone: 402-783-2663 or 402-890-3878

Address 13800 NW 70th St

Raymond NE 68428 #C1197

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 6/27/07 Repair 6/27/07

System Location (Indicate correct number and street)

Address 7601 W Saltillo Rd (no rural route) City Martell NE, Zip 68404

A. Building Sewer

1. Material: old Sewer
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ 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: old concrete
   Number of compartments: one
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   middle Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade At grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18" in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 2' ft.

D. Absorption Field

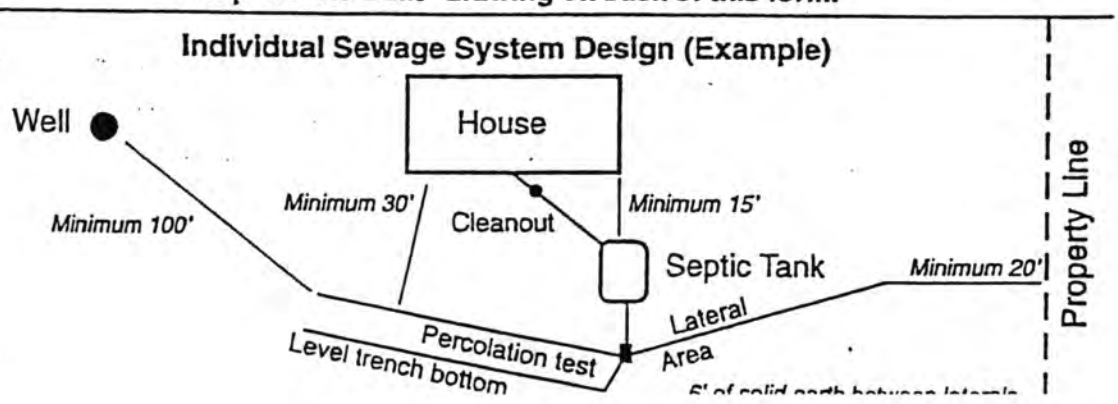
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 34" x 12" x 210' Long
   or perforated pipe: _____
   Material: ☒ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 105 New
   Length of each line: 105 New ft. 80' old ft.
   old 80' ft. old 80' ft., _____ ft.
3. Trench dimensions: Width 48" ft.
   Slope Flat in/100 ft.
   Average depth 30-36 in
4. Filter material: Dirt
   Depth of material 30-36 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1000 -C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

August 4, 1977 — THIS PERMIT EXPIRES

Charles Brunke — ISSUED TO

7317 Baldwin, Lincoln,nNE 68507 — ADDRESS

T8N; R5E: Section 2; Lot 13 I.T.

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$30.00	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

FRANK GOLDEN, Lancaster County Treasurer

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1000-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: _____

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 8N ; Range 5E ; Section 2
Block _____ ; Lot 13 I.T ; Addition _____
Street Address _____

2. Property Use: Residential ✓ ☒ ; Commercial _____ ☐
No. of Bedrooms 3 . Describe: _____
Other Use _____ ☐
Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: _____ ft.

AP 680 Signed Easement

Charles F. Brunke
Signature of Applicant (Owner or Lessee)

7317 Baldwin, Lincoln, 68507
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 2/4/77 . ACTION: Approved ☒ Disapproved ☐
Date Frwd. 2/4/77 . Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. _____ . ACTION: Approved ☐ Disapproved ☐
Date Frwd. _____ . Signature: _____

3. City or County Engineer: Date Rec'd. 2/4/77 . ACTION: Approved ☒ Disapproved ☐
Date Frwd. 2/4/77 . Signature: Dennis Bradley Reed Dubas 2/14/77

REMARKS OR REASONS FOR DISAPPROVAL _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 [ ]
County Resolution No. 2832 [X]

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1000-C

DATE: _____

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 8N ; Range 5E ; Section 2 ; Block _____ ; Lot 13 Irr; Addition _____.
Street Address _____.

2. Property Use: Residential _____ [X]; Commercial _____ [ ]
No. of Bedrooms 3
Describe: _____
Other Use _____
Describe: _____

3. Type of Individual Sewage Disposal System: Septic Tank [X]; Other [ ]

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Charles J Brunke
Signature of Applicant (owner or lessee)

7317 Baldwin
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 30.00

2. Site Visits:
Date: 6-14-77 by: jw
Date: _____ by: _____
Date: _____ by: _____

3. Date: Approved [X]; Disapproved [ ] 2/4/77
by: Gerald C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6-14-77 by: James Weverka

FORM HD-43 (73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 474-1541)

FILE NO. 1000-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____: Range _____
Section & ¼ Sect. _____
Property Dimensions: _____ft. x _____ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: _____
Address: _____

Dates of Tests: _____ to _____. Weather: Precip._____Temp._____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Signature of Person Conducting Test

Address _____

Phone _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: Owner will construct what ever is indicated by percolation test

DATE: _____

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1000-C

SPECIFICATIONS

DATE: _____

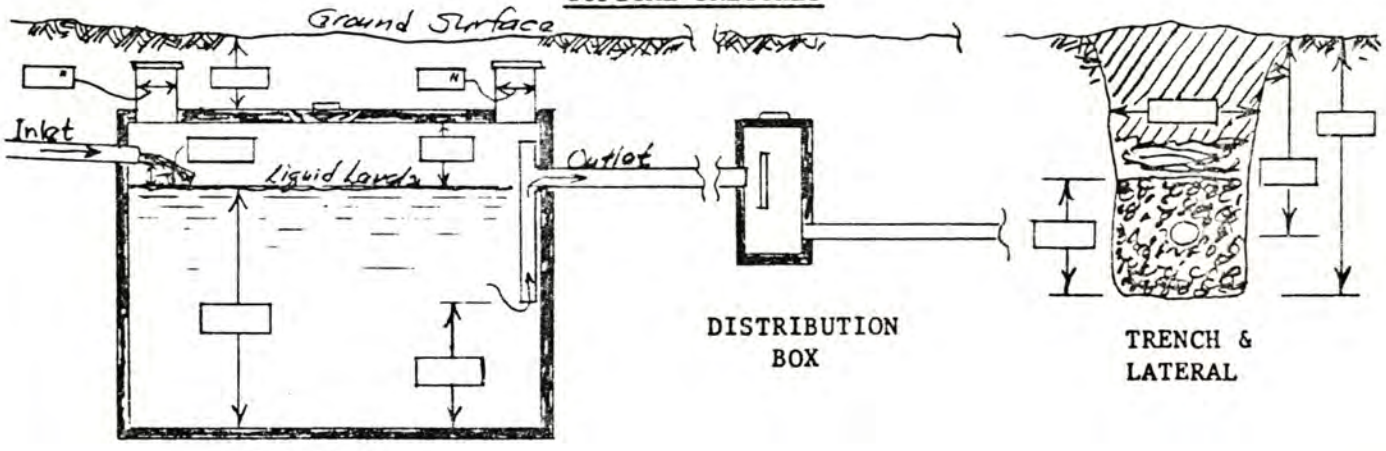
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____)
No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in.
Number ____; Length of each line ___ft
Total length of Laterals ____ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width ____in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: 44 minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM

(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 1000-C

SPECIFICATIONS

DATE: _____

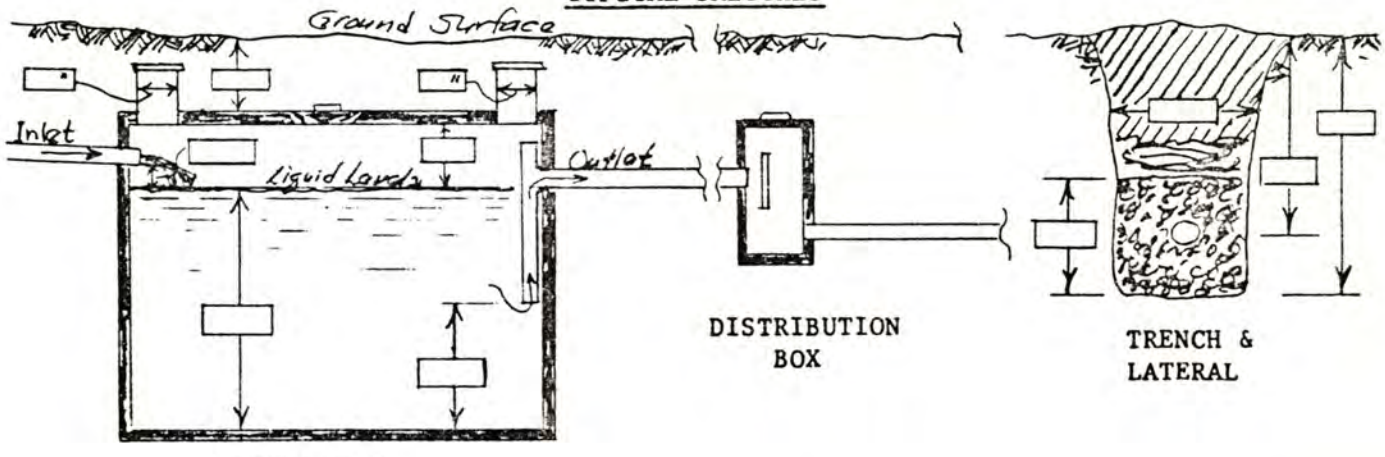
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity _____gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____)
No ☐
3. Dimension: Length ____in.; Width ___in.
Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in.
Number ____; Length of each line ___ft
Total length of Laterals 2980 ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.;
Width 36 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

Started with 12" of water

Hole	8:55	9:25	9:55	10:25	10:55	11:25
#1	2 3/4 (1)	3 3/4 (3/4)	4 1/2 (7/8)	5 3/8 (5/8)	6 (1/2)	6 1/2
#2	2 1/8 (5/8)	2 3/4 (3/8)	3 1/8 (0)	3 1/8 (3/4)	3 7/8 (3/4)	4 3/8
#3	2 7/8 (1 3/8)	4 1/4 (3/4)	5 (1)	6 (5/8)	6 5/8 (5/8)	7 1/4
#4	3 1/2 (1 1/2)	5 (1 1/4)	6 1/4 (1)	7 1/4 (1)	8 1/4 (7/8)	9 1/8
#5	2 (3/4)	2 3/4 (3/4)	3 1/2 (3/4)	4 1/4 (3/4)	5 (1/2)	5 1/2
#6	2 1/4 (1 1/4)	3 1/2 (1)	4 1/2 (3/4)	5 1/4 (3/4)	6 (7/8)	6 7/8

FORM HD- 43(73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 475-6221)

FILE NO. _____

PROPERTY WHERE SOIL TESTED:
Location: Township 18N ; Range 5E of 6PM
Section & ¼ Sect. 2 NE
Property Dimensions: 200 ft. x 766 ft.
Area: 5.27 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☐; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☒

Owner: Charles F Brunker
Address 7317 Baldwin Lin

Dates of Tests: 2/19/77 to 2/20/77. Weather: Precip. 0 Temp. 45 F

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	3½"	90	8½	
2	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	6¾"	90	6¾	
3	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	2¼"	90	9¾	
4	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	1¼	90	10¾	
5	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	6½	90	5½	
6	30"	2/19	9:00AM	2/20	9:00AM	2/20	9:00AM	12"	10:30AM	4½	90	7½	

Sum of Percolation Rates _____
Average of Rates: _____
Mean of Rates: _____

Don Nilsen
Signature of Person Conducting Test

Address 4535 No 27th
Phone: 467-1627

(Do not write below this line)

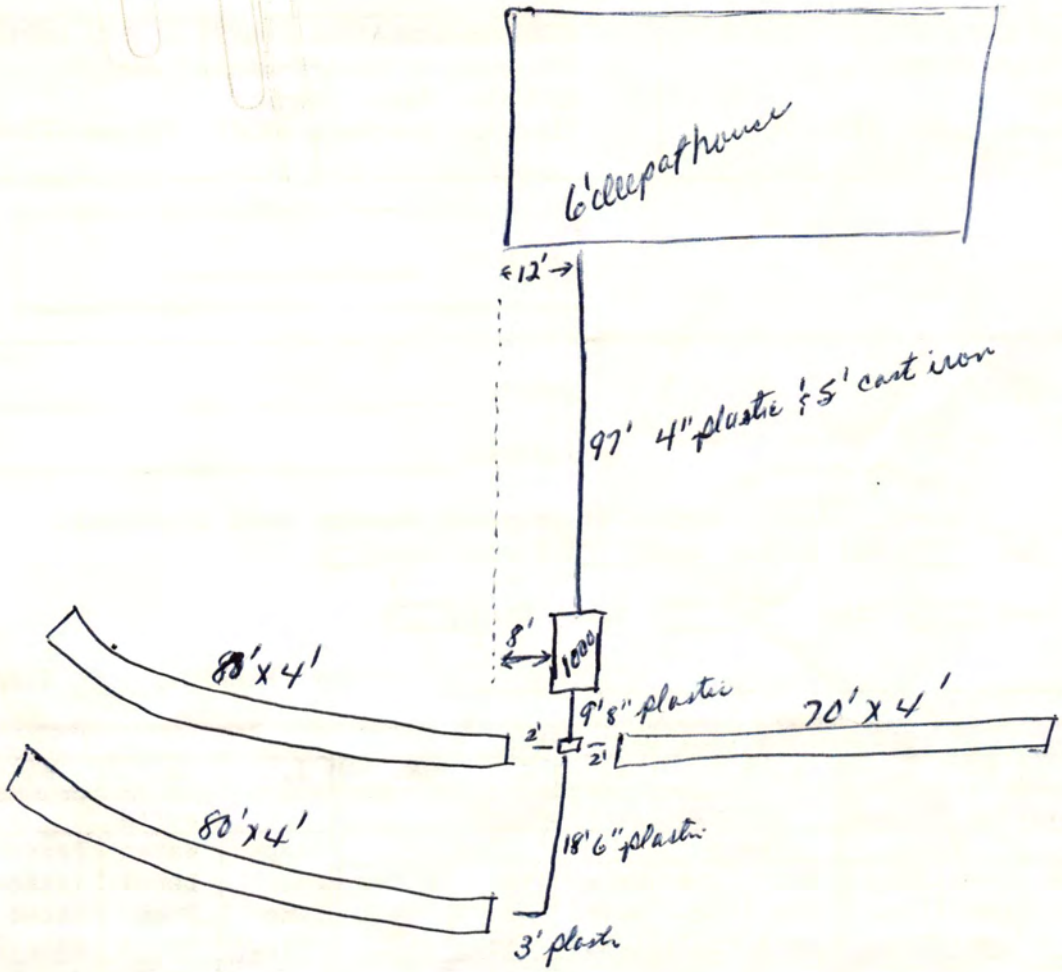
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

DATE: _____

_____
Signature of Reviewing Official



1" drop

Tank at ground level

N

BRUNKEY — 6/11/77

As Built Drawing

RCI
6/27/07

