Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 02380248101

Issued 05/28/02
Expires 11/28/02
Revenue Code 3157

Establishment
ORVILLE A GERTSCH JR
T8N R5E SEC 6 QTR NW
11800 SW 142 ST-DENTON

FEES: $200.00

Permittee
ORVILLE A GERTSCH JR
606 E 14 ST
CRETE NE 68339

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002339

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

A

Permit Number: 023802481

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 11800 SW 142ND ST. City DENTON, NE. NE, Zip 68339

(no rural route)

Legal Description NW (1/4) 6 (1/4) Section 8N Township 5E 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 GERTSCH FAMILY TRUST

Name DBA ORVILLE A. GERTSCH TR Signature Orville A. Gertsch TR.

Address 11800 SW 142ND ST. City/State/Zip DENTON, NE. 68339

☐ Check if owner designed system Home Phone 402-826-3623 Work Phone 402-826-3567

C. Contractor

Name BEN EARNEST Company Name EARNEST WELL DRILLING INC.

Address 2796 W. MILFORD RD City/State/Zip MILFORD, NE. 68405

☒ Check if contractor designed system Work Phone 402-761-2281

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

Designer Name BEN EARNEST Firm EARNEST WELL DRILLING Work Phone 402-761-2281

E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms ____ Is there a Whirlpool Bathtub YES (NO)

☒ Commercial Establishment/Other Facility Specify 1/2 BATH IN WIENER (MORTON BLDG)

Design flow in gallons per day ____ Type of Wastewater: ☒ Domestic ☒ Non-Domestic. 4 TO 6 PART TIME EMPLOYEES PLOT ADD'L THRU SEPTEMBER

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 5/28/02 Date frwd 5/29/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 5/29/02 Date frwd 5/29/02 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 5/29/02 Date frwd 5/29/02 ACTION ☒ Approved ☐ Disapproved Signature

Line tank, lateral – D.S. 7/11/02 Need drawing

Installation Final Written Approval

By Doug Ambuel

Date 7/18/02

Business Office Use Only

Date Rec'd 5/28/02

Amt Paid 200.00

Rec'd By ____ Cash/Check No. 4888

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: 02380248 1

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 11800 SW 142ND ST. City DENTON NE, Zip 68339
(no rural route)

Owner GERTSCH FAMILY TR. Addresss 11800 SW 142ND ST. DENTON, NE. 68339

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

Date of Tests _____ to _____ Weather: Precipitation _____ Temperature _____

Percolation Test Data Table SEE ATTACHED SCHEDULE

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)

Person Conducting Percolation Tests

Name: _____

Phone: _____

Address _____

_____

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

_____

_____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section 6
Township 8 Range 5
1/4 Section NW

Owner: Orville Gertsch
Address: 11800 SW 142nd
DENTON, NE. 68339

Property Dimensions: 160 acres

Soil Type: Silty Clay ____ Silty Clay Loam ____ Sandy Loam ____ Silty Loam ____ Clay Loam X (BURCHARD) Sandy Clay ____

Dates of Tests: 5-14-02 to 5-15-02. **Weather:** Precip. 0 Temp. 70°

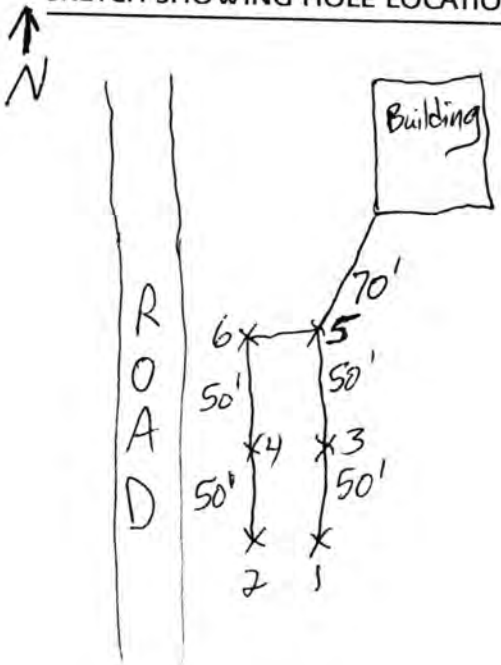
a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
		Pre-Saturation Period				Percolation Readings					Results	
		Start		End		Start			End			Water
	Hole	Date	Time	Date	Time	Date	Time	Water	Time	Water	Elapsed	Level
Hole	Depth	(Mo.	(Hr.	(Mo.	(Hr.	(Mo.	(Hr.	Level	(Hr.	Level	Time	Drop
No.	(in.)	Day)	Min.)	Day)	Min.)	Day)	Min.)	(in.)	Min.)	(in.)	(Min.)	(in.)
1	36	5-14	6:30 pm	5-14	10:30 pm	5-15	6:30 pm	6	7:00 pm	5 1/4	30	3/4
2	35	5-14	6:30 pm	5-14	10:30 pm	5-15	6:35 pm	6	7:05 pm	5 1/4	30	3/4
3	36	5-14	6:30 pm	5-14	10:30 pm	5-15	6:40 pm	6	7:10 pm	5	30	1
4	36	5-14	6:30 pm	5-14	10:30 pm	5-15	6:45 pm	6	7:15 pm	4 1/2	30	1 1/2
5	34	5-14	6:30 pm	5-14	10:30 pm	5-15	6:50 pm	6	7:20 pm	5	30	1
6	36	5-14	6:30 pm	5-14	10:30 pm	5-15	6:55 pm	6	7:25 pm	4 3/4	30	1 1/4

Sum of Water Level Drops (in.) [Column m]: 6 1/4
Average of Water Level Drops (in.) [Column m]: _____
Inches per Minute: _____

PERSON CONDUCTING TEST:
Name: Justyn Peterson
Address: 7421 1st Street
Milford, NE 68405
Phone: (402) - 761-4414
Signature: Justyn L. Peterson

Square Feet of Lateral per Bedroom: _____
(contact Sergy Hood)

SKETCH SHOWING HOLE LOCATION:



Official's Signature

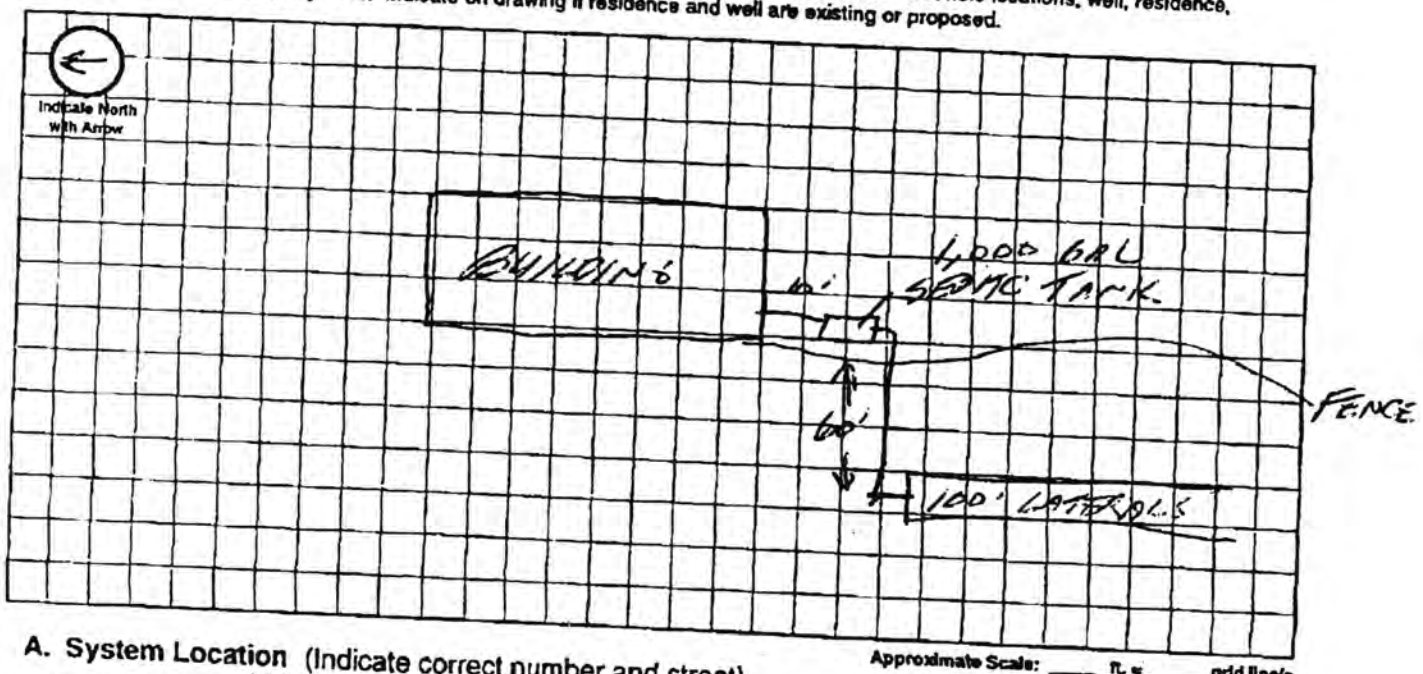
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) 11800 SW 142ND ST. City DENTON NE, Zip 68339

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: INFILTRATOR (NO GRAVEL)

Capacity of Septic Tank 1400 gals Number of Absorption Beds: 1 Number of Distribution Laterals per Bed ____

Total Length of Laterals 30 ft. Number of Trenches 1 Trench Width 3'

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 BY Quality Custom Fence Trust Date 5-28-02

Installer ____ Date 5/24/02

FORM 23-102 10-96

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

JUL 15 2002

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 7/11/02

Orville Gertsch

System Location (Indicate correct number and street)

Address 11800 SW 142nd (no rural route) City Denton NE, Zip NE 68339

A. Building Sewer

1. Material: SDR 26 160PSI
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 16' ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line N/A ft.
   stream N/A ft.
   pressure line N/A ft.
   property line N/A ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1000 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: 10 in.
8. Distances to: Well or suction line N/A ft.
   Stream N/A ft.
   Pressure line N/A ft.
   Property line N/A ft.

C. Distribution Box

1. Material: N/A
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

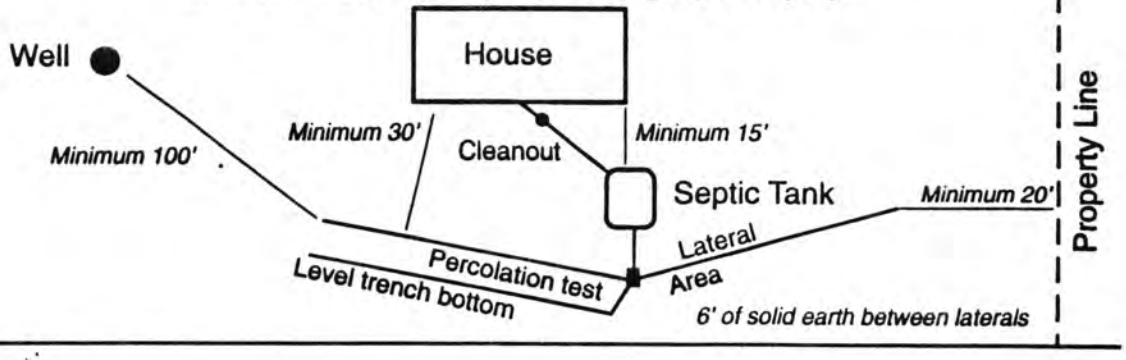
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 36"
   or perforated pipe: _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other Infiltrator High Capacity
2. Lateral lines: Number 1
   Length of each line: 100 ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 2 in/100 ft.
   Average depth 40 in
4. Filter material: Graveless
   Depth of material _____ in.
5. Distances to: Well or suction line N/A ft.
   Stream N/A ft.
   Pressure line N/A ft.
   Property line N/A ft.

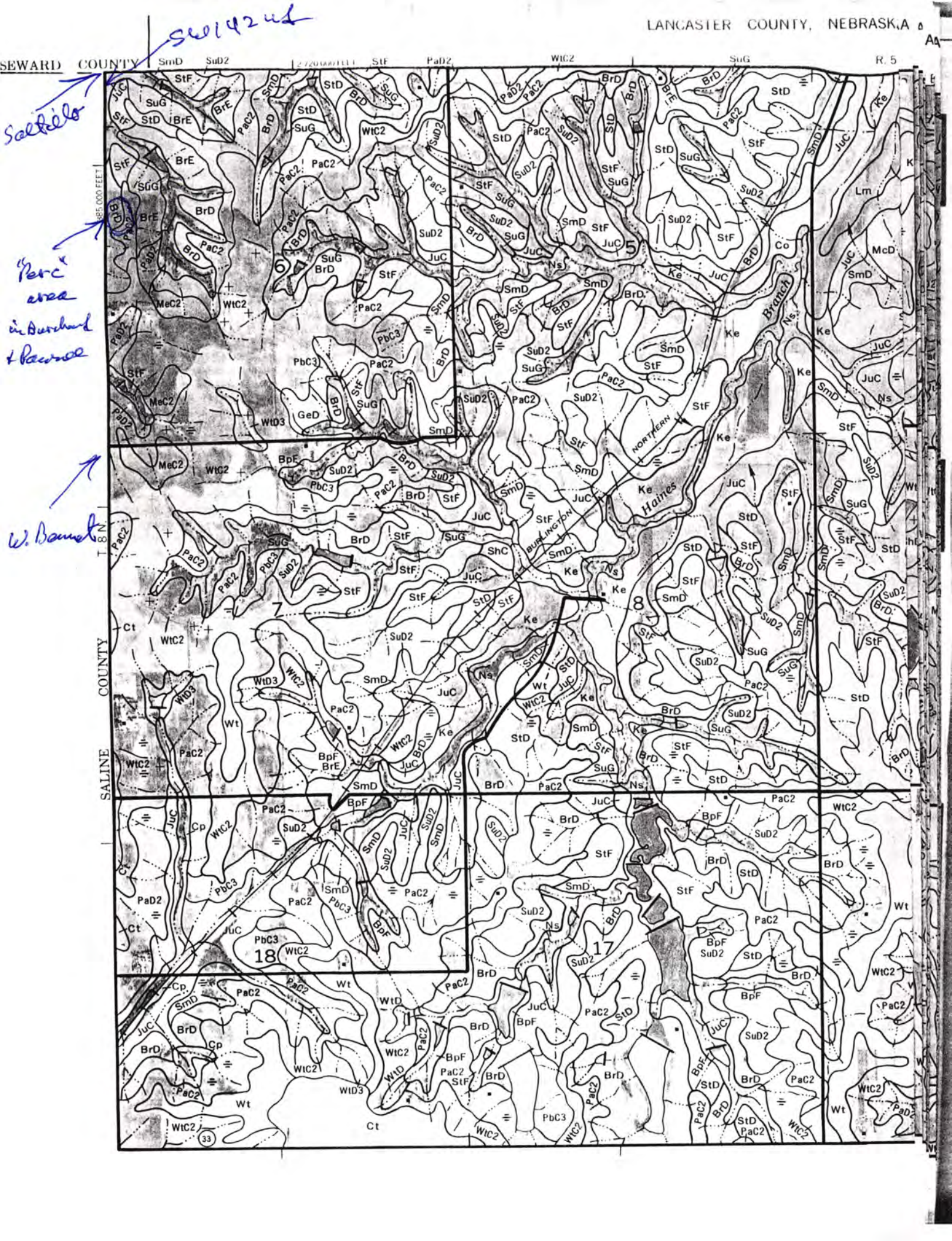
Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96


LANCASTER COUNTY, NEBRASKA
SEWARD COUNTY
SALINE COUNTY
T. 8 N.
R. 5
Seward
Saltillo
"Berc" area in Burchard & Pawnee
W. Burnett
Haines Branch
NORTHERN
BURLINGTON
StF
SuD2
SmD
PaC2
WtC2
BrD
JuC
Ke
Ns
StD
SuG
PbC3
BpF
BrE
MeC2
WtD3
GeD
PaD2
Ct
Wt
Cp
SuC
Lm
McD
Co
ShC
BrF
WtD
6
7
8
5
17
18
33

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit No. 96380146801

SEWAGE INSTALLATION

Issued 08/12/96
Expires 02/12/97
Revenue Code 18754

Establishment

ORVILLE GERTSCH
T8N R5E SEC 6

FEES: $150.00

TOTAL $150.00

Permittee

ORVILLE GERTSCH
606 E 14 ST
CRETE NE 68333

Issued By M. Jane Ford
Health Director

2450

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 471-7800

A

FILING FEE: $150.00

FILE NO. _____

DATE: 8-7-96

The undersigned hereby requests SITE CLEARANCE and PERMIT 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 6 NW¼
   Block _____: Lot _____: Addition _____
   Street Address 14200 + SALINO RD
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4. Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐
4. Distance to public sewer: NONE AV. ft.

Signature of Applicant (Owner or Lessee)

606 E. 14TH ST. CRETE, NE. 68333
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/7/96. Date Frwd. 8/7/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 8/7/96. Date Frwd. 8/7/96. ACTION: Approved ☒ Disapproved ☐ Signature: _____
3. City or County Engineer: Date Rec'd. 08/07/96. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5/15/97 by: J. C. H. Need drawing
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/20/97 By: Jerrold C. Hood

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

FORM 23-43

FORM 20105-0477
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
3140 N STREET
LINCOLN, NE 68510
(402) 441-8000

B

FILE NO. _____

SW. 142nd & Saltillo

PROPERTY WHERE SOIL TESTED:

Location: Township 6 ; Range 8 ; Section & ¼ Section 5 .
Property Dimensions: ½ MILE E. x 1 MILE E. Area: 320 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 7-30-96 to 7-31-96 . Weather: Precip. 0 Temp. 75 .

OWNER: Orville Gurtsch

Address: _____

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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5½"	30min	½	60MIN/IN
2	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5¼"	30min	¾	40MIN/IN
3	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5½"	30min	½	60MIN/IN
4	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5"	30min	1	30MIN/IN
5	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5"	30min	1	30MIN/IN
6	36"	7-30	6:45P	7-31	7:15P	7-31	7:15P	6"	8:15P	5"	30min	1	30MIN/IN

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

Brian Shafer
Signature of Person Conducting Test

Address 2700 Dawn Ave. Phone 464-0638

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: dw Burchard 5/15/97
Soil Type (SCS): JUDSON SILT LOAM WITH BURCHARD CLAY CLOSE
Date: AUGUST 7, 1996

Gerald C. Hood
Signature of Reviewing Official


Lancaster Co. 1987
T-8-R-5
50
HEL/NW
4491
T9274
6058
3702
MT8689
T1501
3.9
5.9
9.4
HEL/NW
House
WELL
BLANS
96.6
HEL/NW
MT8689
T3907
22.8
26.7
HEL/NW
ALF
39.0
HEL/NW
124.2
HEL/NW
BENNET RD
4491
T9274
32.8

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR 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: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are exisiting or proposed.

REVIEWING ACTION

Remarks:_____

Date: AUGUST 7, 1996

Minimum Design Requirement
1. Capacity of Septic Tank 1250 gals.
2. Total Length of Laterals_____ ft.
3. With a Trench Width of_____ in.
4. Total Area of Lateral needed 1320 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

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

MAY 20 1997

D

Permit Number: 96380146801

Sewage Disposal System

As Built Plans & Specifications

Date 5/15/97 Orville Gertsch

System Location (Indicate correct number and street)

Address 11800 SW 142nd (no rural route) City Denton NE NE, Zip 68339

A. Building Sewer

1. Material: SDR26
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 10 in.
3. Distance between dwelling and septic tank: 73 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 200 ft.
   stream N/A ft.
   pressure line over 200 ft.
   property line over 100 ft.

B. Septic Tank

1. Material: Precast Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 10 in.
   Riser: ☑ above ☐ below grade N/A in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 10 to 24 in.
8. Distances to: Well or suction line over 200 ft.
   Stream N/A ft.
   Pressure line over 200 ft.
   Property line over 200 ft.

C. Distribution Box

1. Material: Precast Concrete
   Number available outlets: 1
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 19 ft.

D. Absorption Field

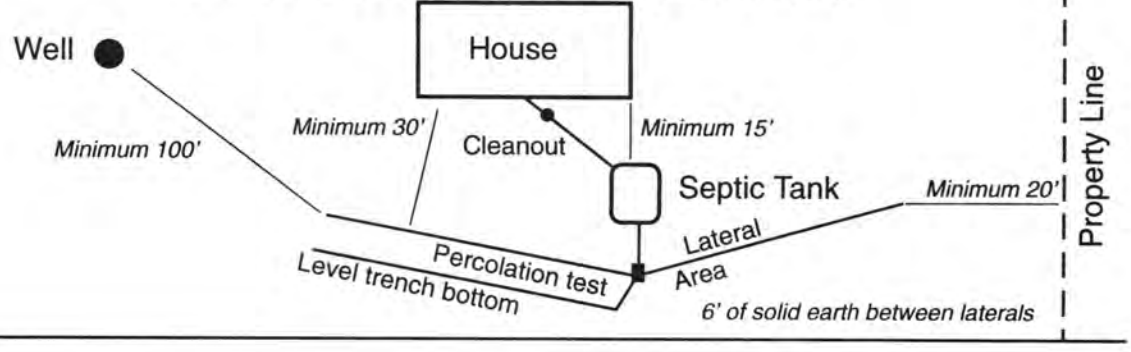
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 15"
   or perforated pipe: _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other EQ24
2. Lateral lines: Number 4
   Length of each line: 88 ft. 88 ft.
   80 ft. 80 ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 0" to 2" in/100 ft.
   Average depth 36 in
4. Filter material: Road Gravel
   Depth of material 24 in.
5. Distances to: Well or suction line over 400 ft.
   Stream N/A ft.
   Pressure line over 200 ft.
   Property line over 100 ft.

Indicate North with Arrow

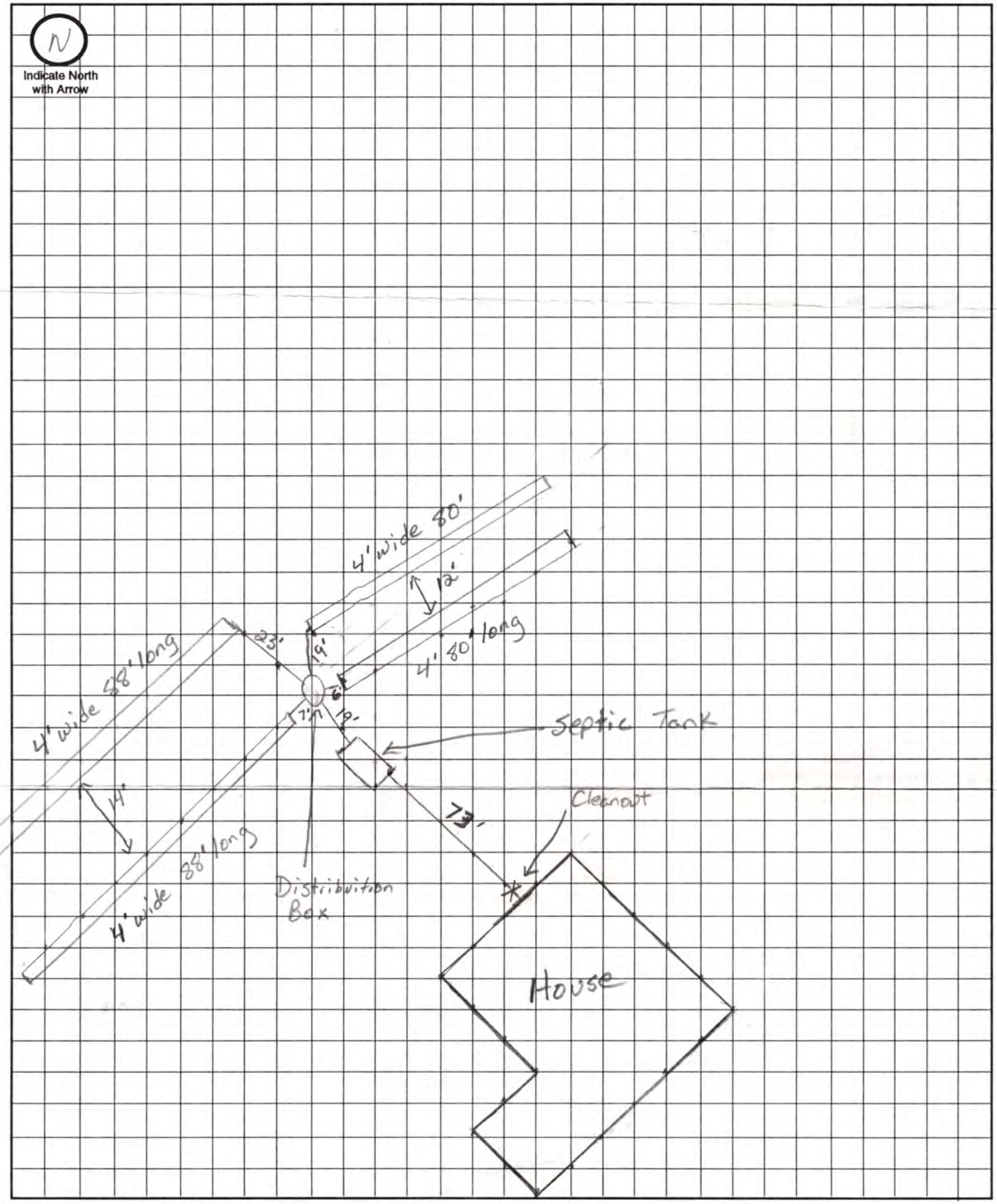
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



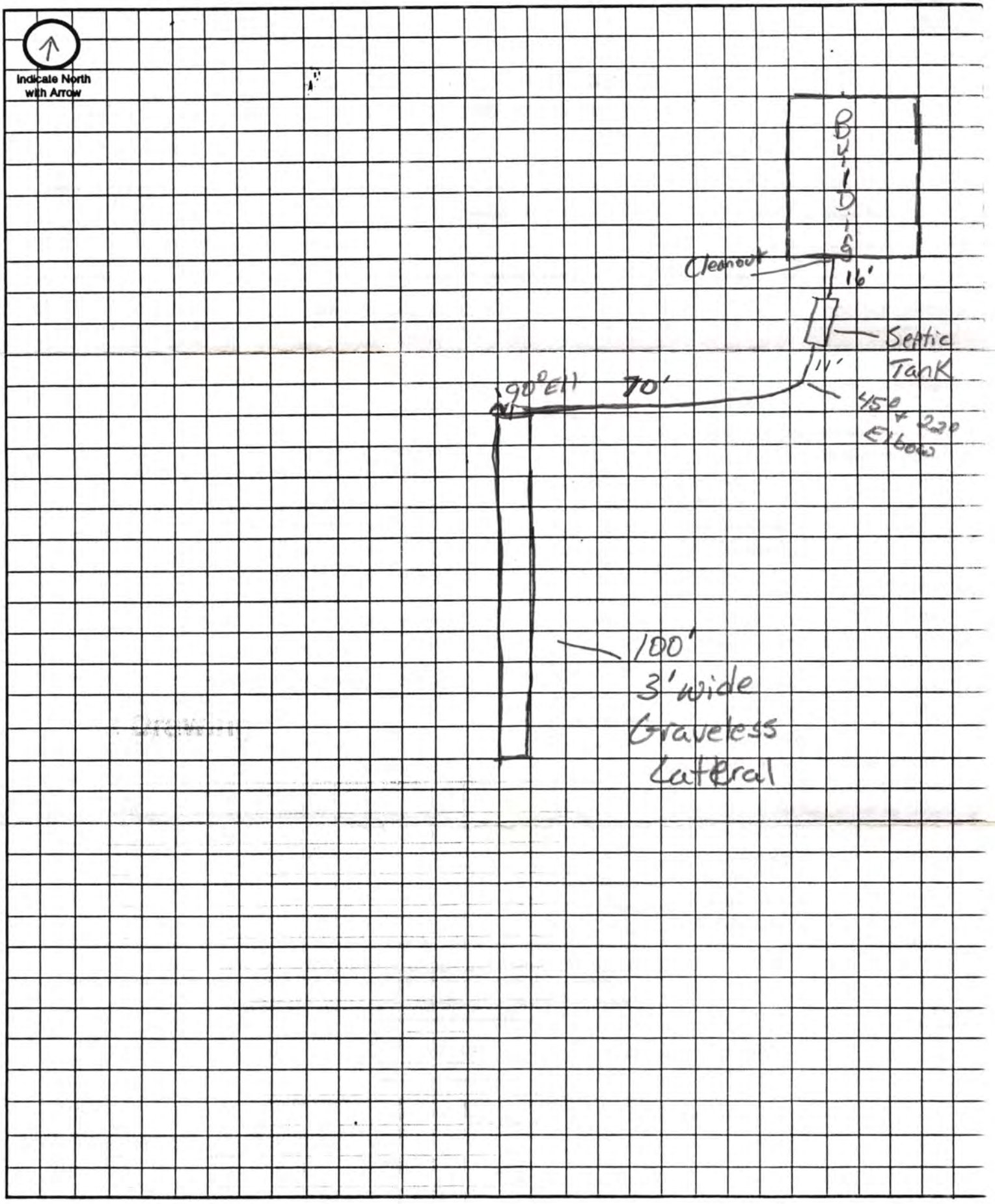
FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s

As Built Drawing



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