Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003359

(402) 441-8000

Permit SEWAGE INSTALLATION
LAGOON-PROVIDED TOP OF LAGOON IS 1.0'
ABOVE THE 100 YR FLOOD PLAIN

Permit # 04380277701

Issued 02/12/04
Expires 08/12/04
Revenue Code 3157

Establishment CLYDE CARLSON
T8N R5E SEC 11 QTR NE
S 1/2
13445 SW 72 ST-MARTELL

FEES: $200.00

Permittee CLYDE CARLSON
5400 W WITTSTRUCK RD
MARTELL NE 68404

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

FEB 1 2 2004

A

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

Permit Number: 04380277701

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 13445 SW 72nd STREET (no rural route) City MARTELL NE NE, Zip 68404

Legal Description 1/2S/4 NE 1/4 - 11 8N 5E
(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 CLYDE CARLSON Signature Clyde Carlson

Address 5400 W WITTSTRUCK RD City/State/Zip MARTELL - NE 68404

☐ Check if owner designed system Home Phone 794.4195 Work Phone SAME

C. Contractor

Name Ronald Leichty Company Name LEICHTY EXCAVATING INC.

Address 2677 W. Milford City/State/Zip (City) Milford, NE 68405

☐ Check if contractor designed system Work Phone 402-761-2080

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 2/12/04 Date frwd 2/13/04 ACTION ☒ Approved ☐ Disapproved Signature Jerald C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2-13-04 Date frwd 2-13-04 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 2-13-04 Date frwd 2-13-04 ACTION ☒ Approved ☐ Disapproved Signature Jim Pharaoh

Provided top of lagoon is 1.0' above 100yr flodplain.

Installation Final Written Approval

By _____

Date 2/25/04

Business Office Use Only

Date Rec'd 02/12/04

Amt Paid 200.00

Rec'd By _____ Cash/Check No. 8914

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 28 Feb 04

System Location (Indicate correct number and street)

Address 4447 SW 112th (no rural route) City DENTON NE, Zip 68339

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: NA ft.
4. Number of clean-outs: 5
5. Distances to: well or suction line NA ft.
   stream NA ft.
   pressure line NA ft.
   property line NA ft.

B. Septic Tank

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

C. Distribution Box

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

D. Absorption Field

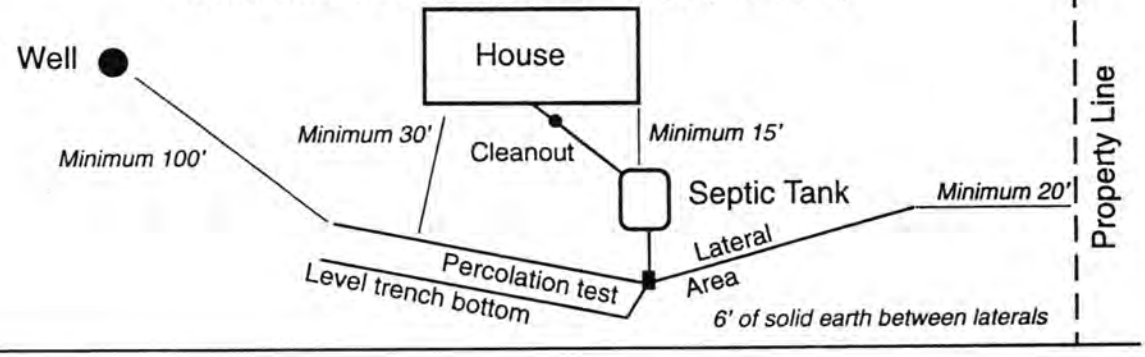
(Provide as-built drawings on back of this form)

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

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

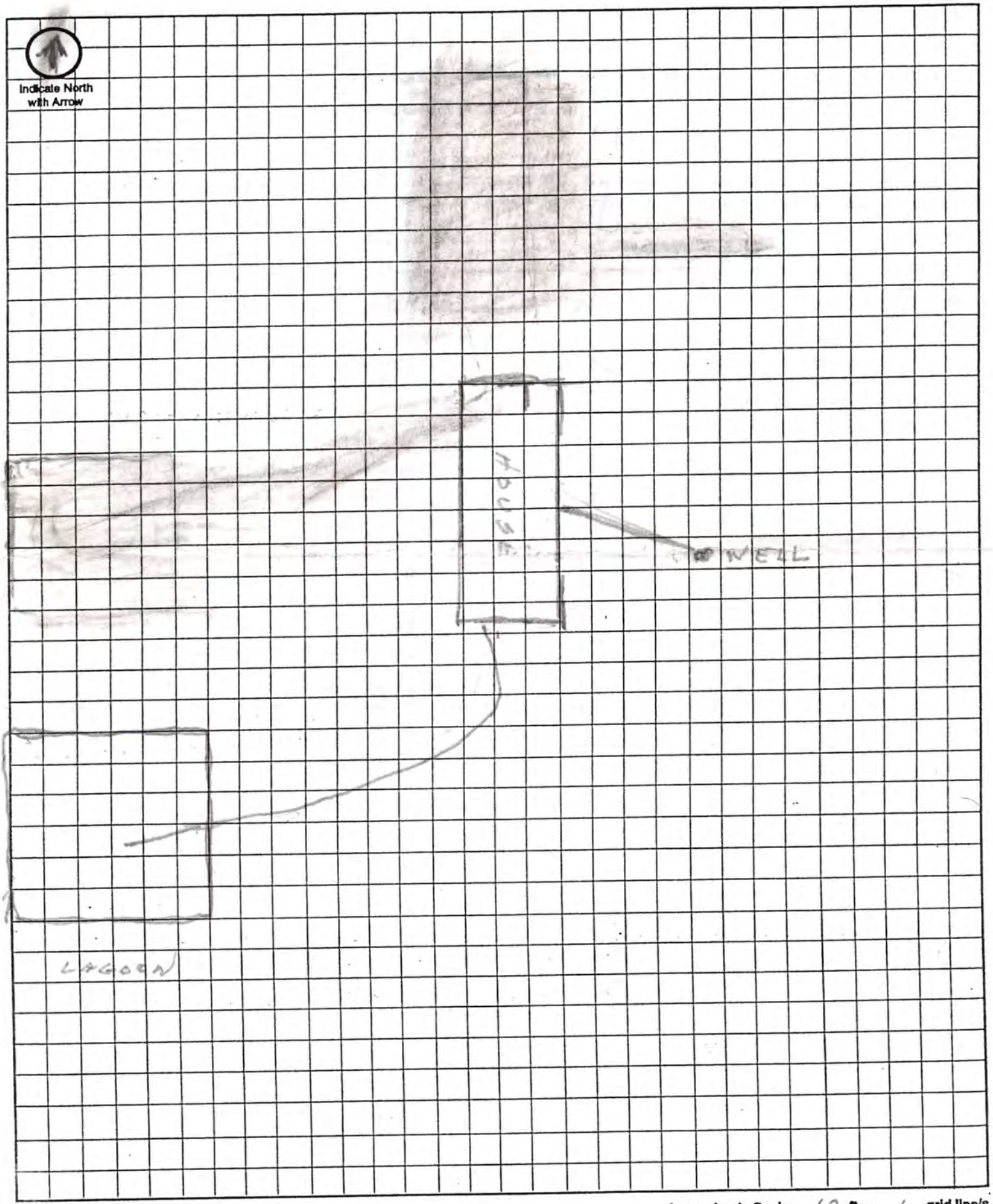
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

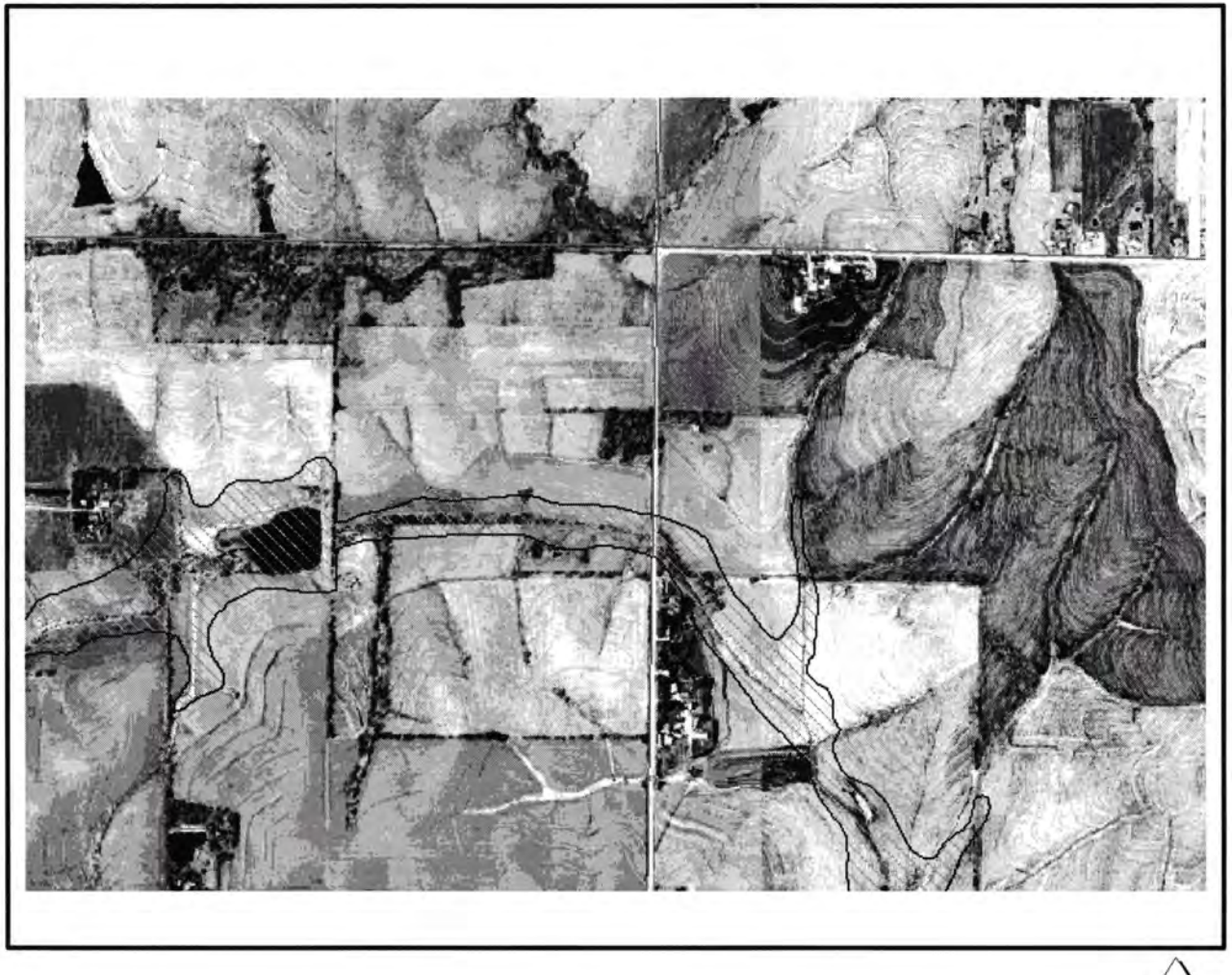
As Built Drawing



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

ESRI ArcExplorer 2.0

13445 S.W. 72nd Street



streets

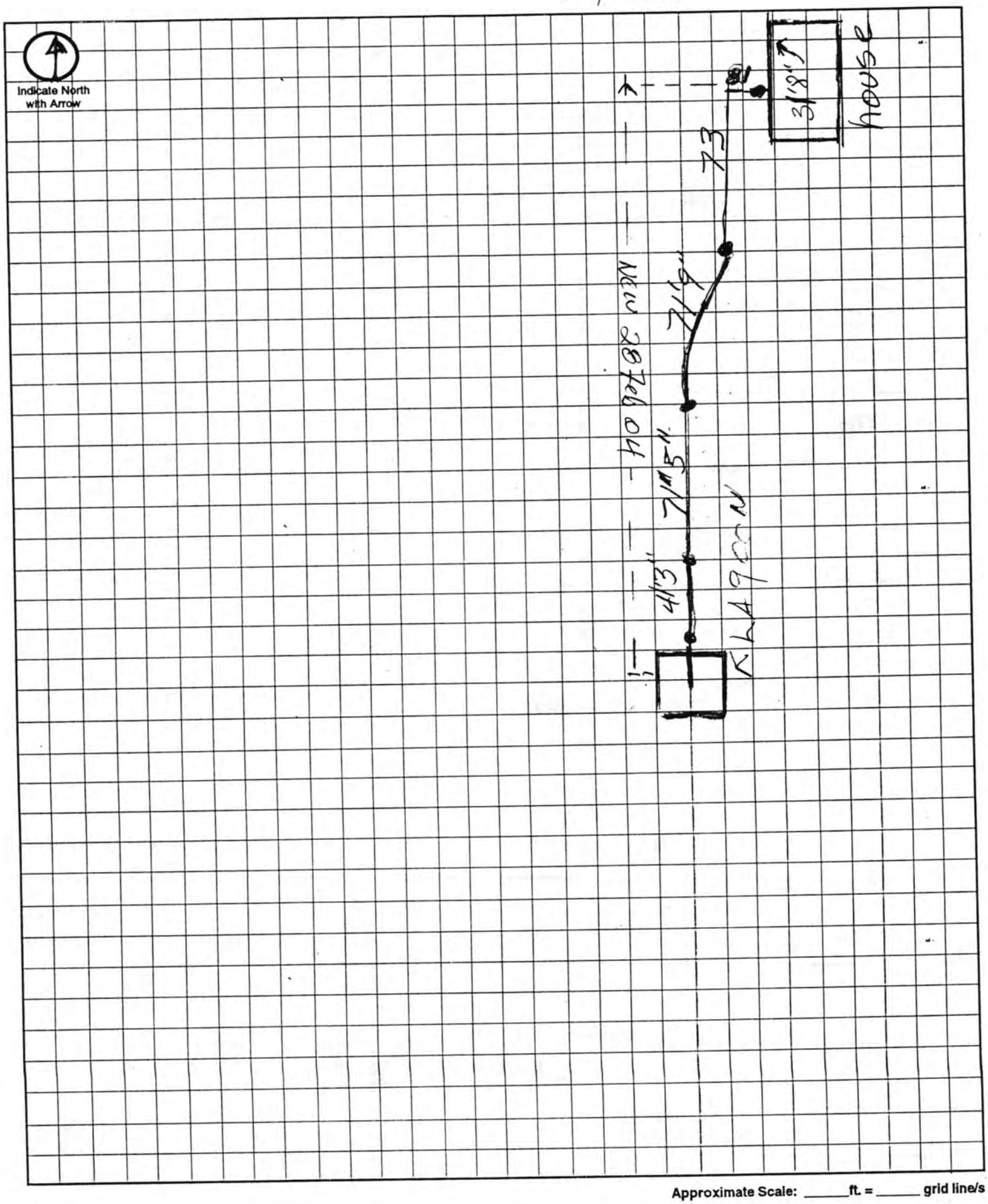
flood1

N

Thursday, Feb 12 2004

As Built Drawing

Repair SW 112th t Pioneer



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