LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
LAGOON

No. 98380186601

Issued 10/12/98
Expires 04/12/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment
PRIDE HOMES
T8N R6E SEC 4 QTR S
LOT 29IT
1600 W BENNET RD--MARTELL

Permittee
PRIDE HOMES
1544 S 1 ST
LINCOLN NE 68502-1903

Issued By Health Director
Lincoln-Lancaster County Health Department

008185

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

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

A

Permit Number: 98380186

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 1600 W Bennet Rd. (no rural route) City ~~Lincoln~~ Marshall NE, Zip 68404

Legal Description SEE ATTACHED SE 1/4 SW 1/4 Section 8 Township N Range 6 E Subdivision Addition PART29E.T. 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 Pride Homes Signature Greg L Shimmit

Address 1544 So 1st City/State/Zip Lincoln, Ne 68506

☐ Check if owner designed system Home Phone 434-3220 Work Phone 430-6487

C. Contractor

Name Pride Homes Company Name Pride Homes by Greg Shimmit

Address 1544 So 1st City/State/Zip Lincoln Ne 68508

☐ Check if contractor designed system Work Phone 430-6487

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

Designer Name Clint Presnell Firm Wellmann Plumbing Work Phone 430-6817

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 10/12/98 Date frwd 10/12/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12-9-98 Date frwd 12-9-98 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 10/12/98 Date frwd 10/12/98 ACTION ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By _____

Date _____

Business Office Use Only

Date Rec'd 10-12-98
Amt Paid 150.00
Rec'd By TW Cash/Check No. 11986

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: 98380186

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1600 W. Bennet Rd (no rural route) City Martell NE, Zip 68404

Owner Pride Homes Addresss 1544 So 1st

Soil Type (SCS): Clay with Rocks Percolation Rate: 0 min./inch

Date of Tests 9-9-98 to 9-10-98 Weather: Precipitation Dry Temperature 70°-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	36	9-9	9am	9-10	9am	9-10	9am	6	9-10	1pm	30	1/8	240
2	"	"	"	9-10	"	"	"	"	"	"	30	0	[illegible]
3	"	"	"	"	"	"	"	"	"	"	30	1/8	240
4	"	"	"	"	"	"	"	"	"	"	30	1/8	240
5	"	"	"	"	"	"	"	"	"	"	30	0	0
6	"	"	"	"	"	"	"	"	"	"	30	1/8	240

Sum of Percolation Rates: 960

Average of Rates: 160

Rate Used for Calculation: 0

Person Conducting Percolation Tests

Name: Clint Presnell

Phone: 434-2400

Address 3130 S. 6th Lincoln Ne Wellmann Plumbing

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

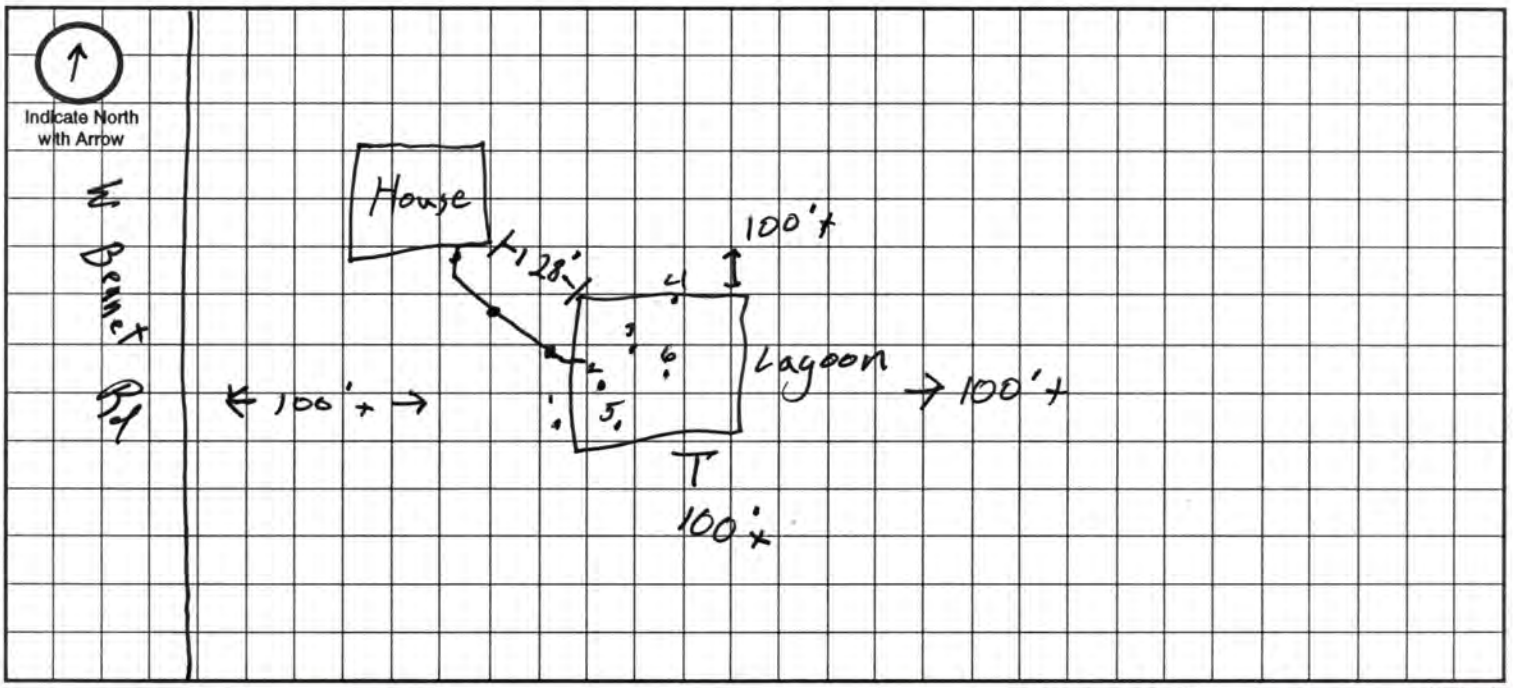
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 98380186

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) 1600 W. Bennet Rd City Martell NE, Zip 68404

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☑ Other Lagoon

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

Percolation Rate 0 (min. per inch) Soil Type: Clay + Rocks Land Slope: 2 %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Other Lagoon

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 [signature] Date 10-12-98

Installer [signature] / Wellmann Plumbing Date 10-9-98

FORM 23-102 10-96

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

D

Permit Number: 98380186G

Sewage Disposal System

As Built Plans & Specifications

Date 10-14-98

Lagoon

System Location (Indicate correct number and street)

Address 1600 W Bennet Rd. (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: Schedule 40
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 0 in.
3. Distance between dwelling and septic tank: 150 ft.
4. Number of clean-outs: 2
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

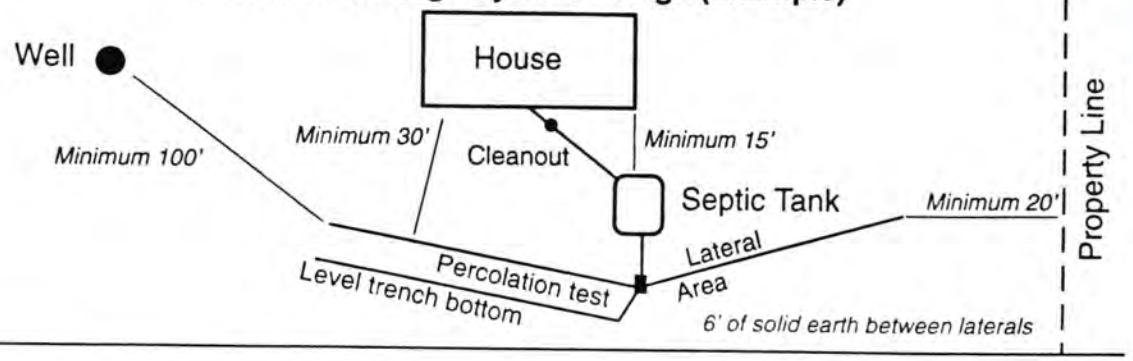
(Provide as-built drawings on back of this form)

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

PARCEL "C"

Part of Lot 29 of Irregular Tracts, located in the E½ of the SE¼ of Section 4, T8N, R6E of the 6th P.M., Lancaster County, Nebraska, described as follows:

Commencing at the NE Corner of said SE¼; thence S00°00'00"W (Assumed Bearing) on the east line of said SE¼, 1713.49 feet; thence S89°23'50"W parallel to the north line of said SE¼, 50.00 feet to the point of beginning; thence S00°00'00"W on a line 50.0 feet west of and parallel to the east line of said SE¼ and on the east line of said Lot 29, 931.65 feet to the south line of said SE¼; thence S89°09'26"W on the south line of said SE¼, 1264.43 feet to the SW Corner of said E½SE¼; thence N00°00'21"E on the west line of said E½SE¼ and also being the west line of said Lot 29, 936.95 feet; thence N89°23'50"E on a line parallel to the north line of said SE¼, 1264.27 feet to the point of beginning. Containing 27.11 acres more or less.

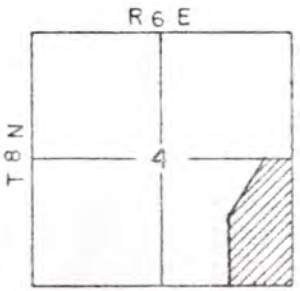
SURVEYOR'S CERTIFICATE

I, Leslie J. Siedschlag, a Registered Land Surveyor in the State of Nebraska, hereby certify that this survey was made under my direct supervision on APRIL 15, 1997 and that all dimensions shown are in feet and decimals of a foot and are correct to the best of my knowledge and belief.

NEBRASKA REGISTERED LS-469 LAND SURVEYOR LESLIE J. SIEDSCHLAG

Leslie J. Siedschlag

Leslie J. Siedschlag, Nebraska L.S. No. 469

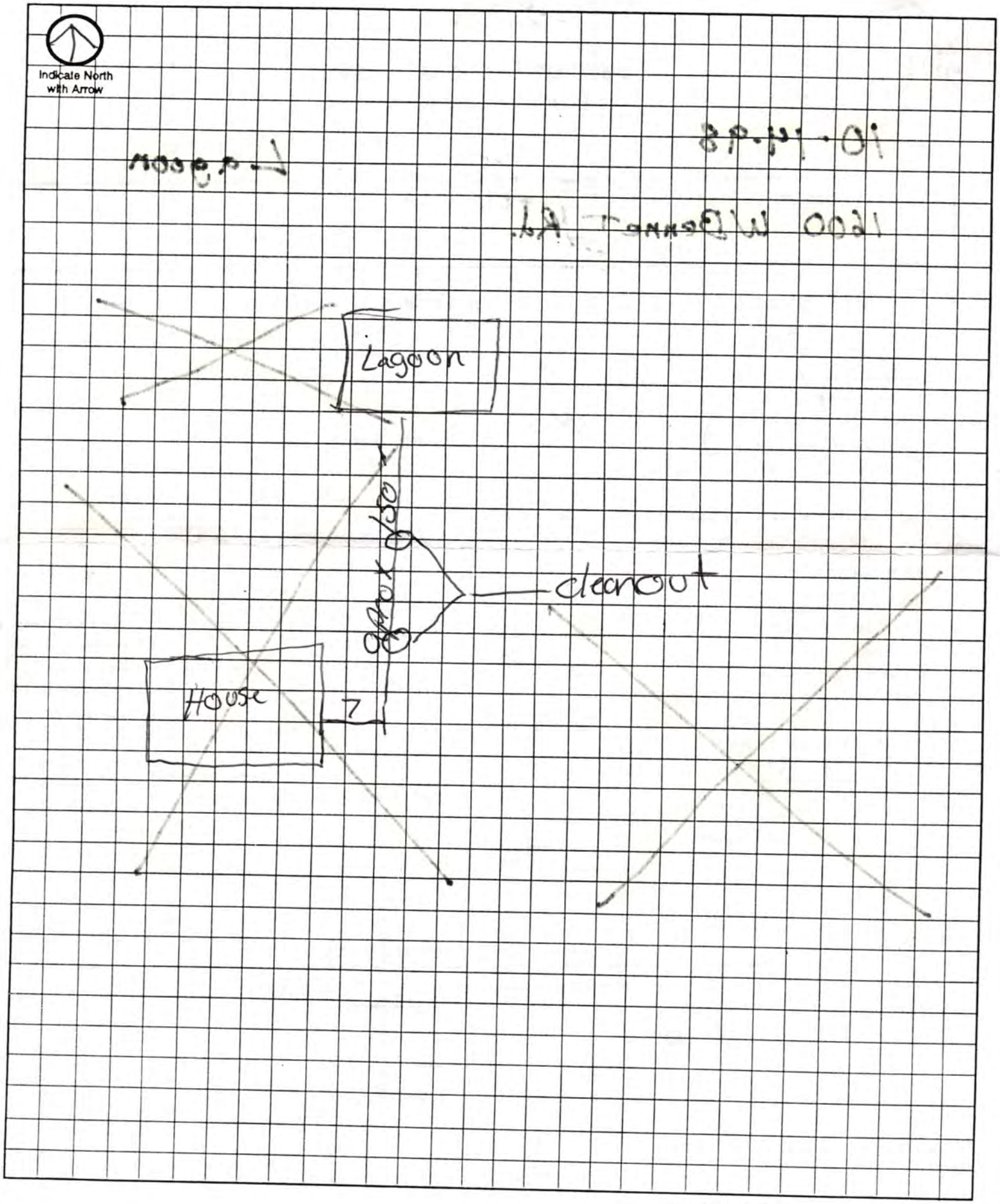


SITUATION SKETCH

DRAWN BY: Dick DATE: 4-24-97

SHEET 1 OF 1

As Built Drawing



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