Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit
SEWAGE INSTALLATION
SEPTIC

Establishment
TRUDY & WILLIAM K ADAMS
T8N R6E SEC 9
S 1/2 LOT 39IT
13939 SW 14 ST-ROCA

Permittee
TRUDY & WILLIAM K ADAMS
4300 W A ST
LINCOLN NE 68522

Permit # 02380246601

Issued 05/15/02
Expires 11/15/02
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002316

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

A

Permit Number: 023802466

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 13939 SW 14th St (no rural route) City Lincoln Roca NE, Zip 68430

Legal Description 5 1/2 (1/4) 9 (Section) 8N (Township) 6E (Range) _____ (Subdivision) _____ (Addition) 39 (Block) 8 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

☑ Check if system mail address is not the same as the owner's address

B. Owner

Name Trudy + William K Adams Signature Trudy Adams

Address 4300 West A St. City/State/Zip Lincoln, NE 68522

☐ Check if owner designed system Home Phone 438-1618 Work Phone _____

C. Contractor

Name Kirk Helmink Company Name Nebraska Dirt Works Inc

Address 26701 South 110th City/State/Zip Firth NE 68358

☐ Check if contractor designed system Work Phone 402-450-0100

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 5-15-02 Date frwd 5-15-02 **ACTION** ☒ Approved ☐ Disapproved Signature Ron Maynard
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/4/02 Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 5-16-02 Date frwd 5-16-02 **ACTION** ☒ Approved ☐ Disapproved Signature Larry Worrell

Installation Final Written Approval

By Doug Arnold

Date 1/27/03

Business Office Use Only
Date Rec'd 05/15/02
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 5611

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: 0238024466

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

9-8-6 W. Bennet Rd W. Kettstrick

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 13939 SW 14th Street (no rural route) City ROCA NE, Zip 68430

Owner Wm K + Trudy Adams Address 4300 W 'A' Street

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

Date of Tests 4/9 to 4/10 Weather: Precipitation None Temperature 50-60 70s

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	4/9	2:00	4/9	6:00	4/10	2:00	6"	4/10	5:30	30	2	15 mpi
2	"	"	2:02	"	6:02	"	2:02	"	"	5:32	"	1/2	60
3	"	"	2:04	"	6:04	"	2:04	"	"	5:34	"	1/2	60
4	"	"	2:06	"	6:06	"	2:06	"	"	5:36	"	2	15
5	"	"	2:07	"	6:09	"	2:07	"	"	5:37	"	1/4	120
6	"	"	2:10	"	6:00	"	2:10	"	"	5:40	"	3/4	40

Person Conducting Percolation Tests

Name: Trudy Adams
Phone: 402 438-1618
Address 4300 W 'A' St
Lincoln, NE 68522

Sum of Percolation Rates: > 20 mpi Jennifer
Average of Rates: _____
Rate Used for Calculation: ∴ 60 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Wymore silty clay loam soil. Construct drain field in area of passing perc rate. Install drainfield away from failing hole #5

Signature of Reviewing Official Ron Magnuson Date 4-11-02

441-8030

FORM 22-101 10-96

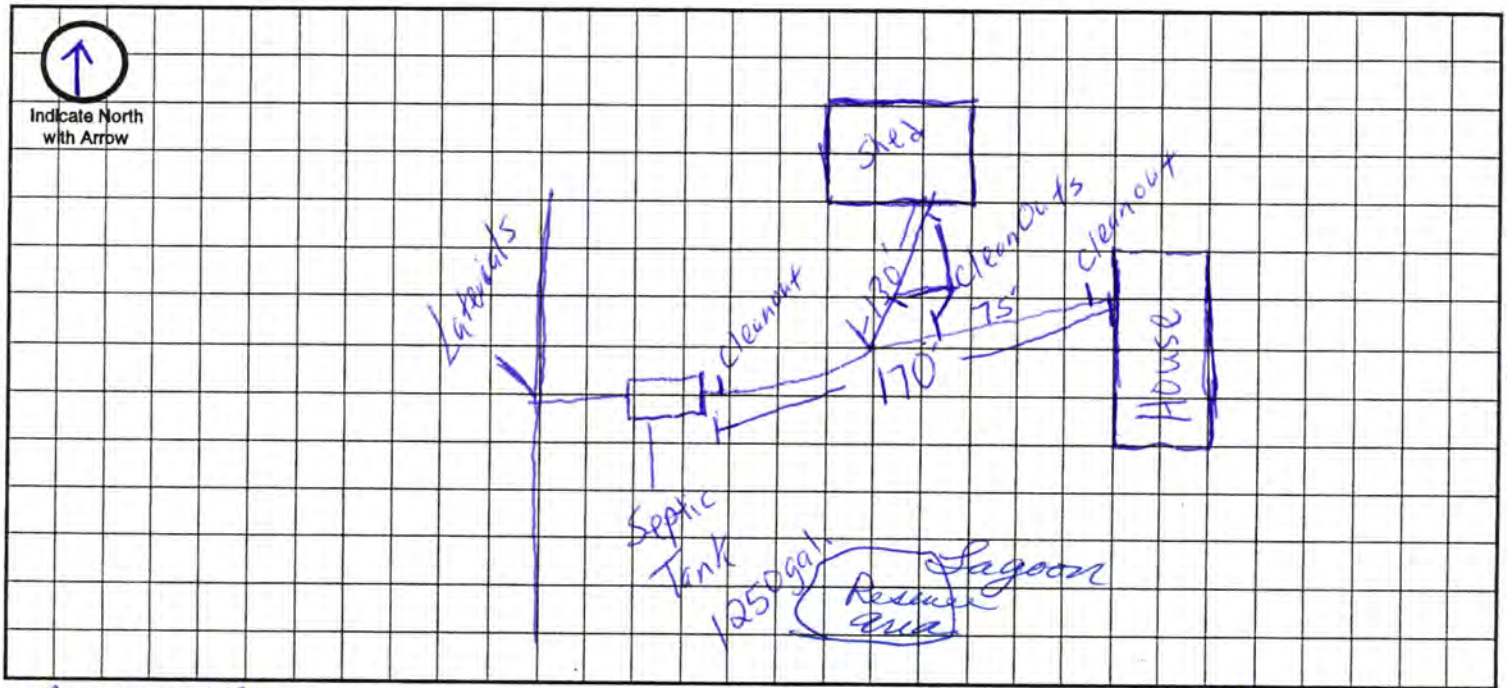
Lincoln-Lancaster County Health Department
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C

Permit Number: 023802466

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.



Locate Reserve area also

Approximate Scale: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 13939 SW 14th ST City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: Wymore Land Slope: _____ %

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

Total Square Feet of Field Required: 1050 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1250 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 5

Installer _____ Date 5/15/02

FORM 23-102 10-96

2/9 Pre Start 1:55 End 6:00

Fill to 12" Nail

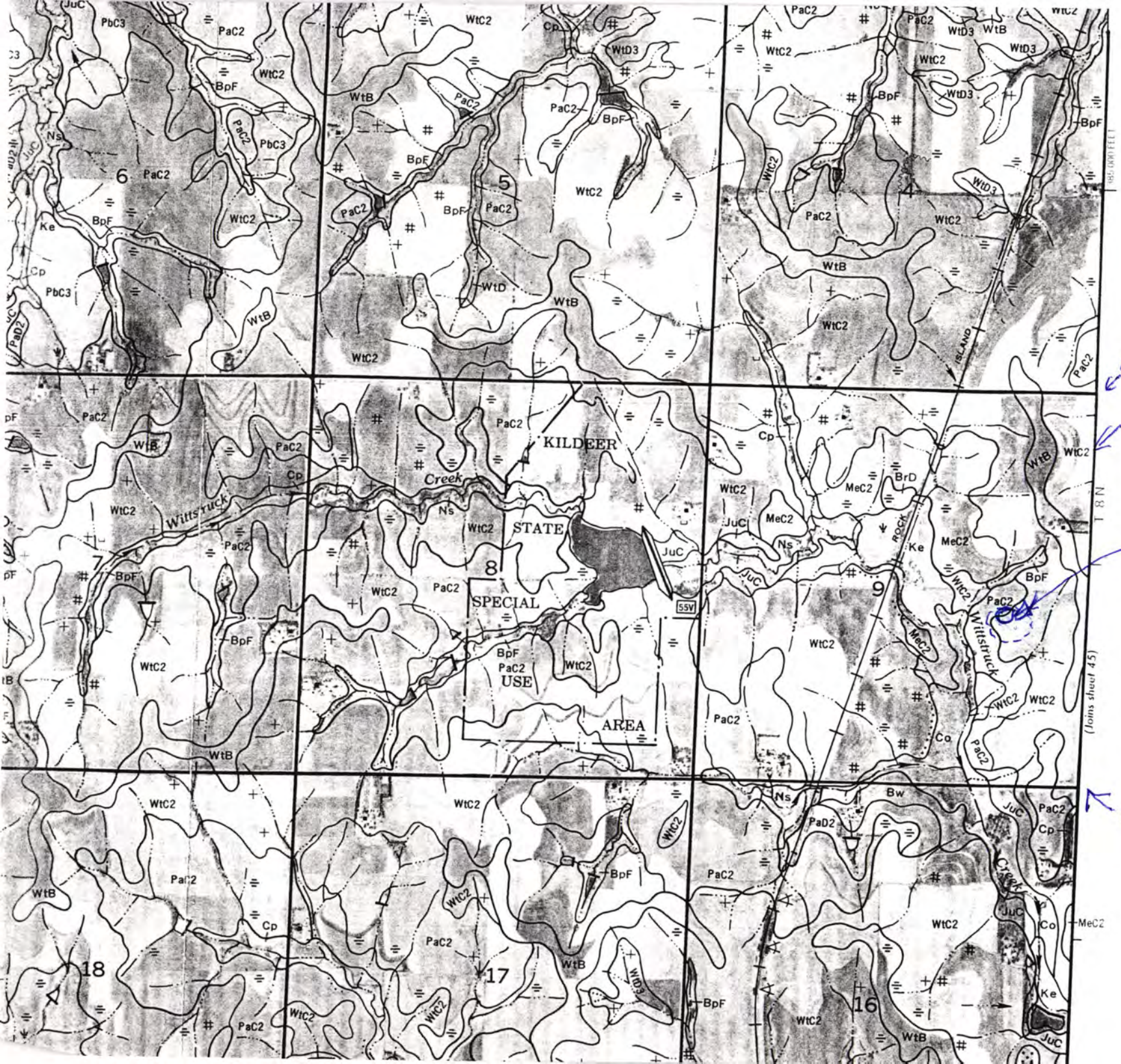
	30L	60L	90L	120L	150L	180L	210L	240L
1	Down 1½	1½	3	3¾	3¾	4½	1	2
2	1"	1½	2½	3	2¾	3½	3½	4
3	4"	5½	6½	7½	Added 7¾	4	5½	6½
4	3¾	5	6	Added 7¼	½	2¾	4½	5½
5	5¾	Added 10	2½	4¼	4½	Added 7	1	3½
1	2"	4½	6¼	Added 7	12	¾	1¼	2½

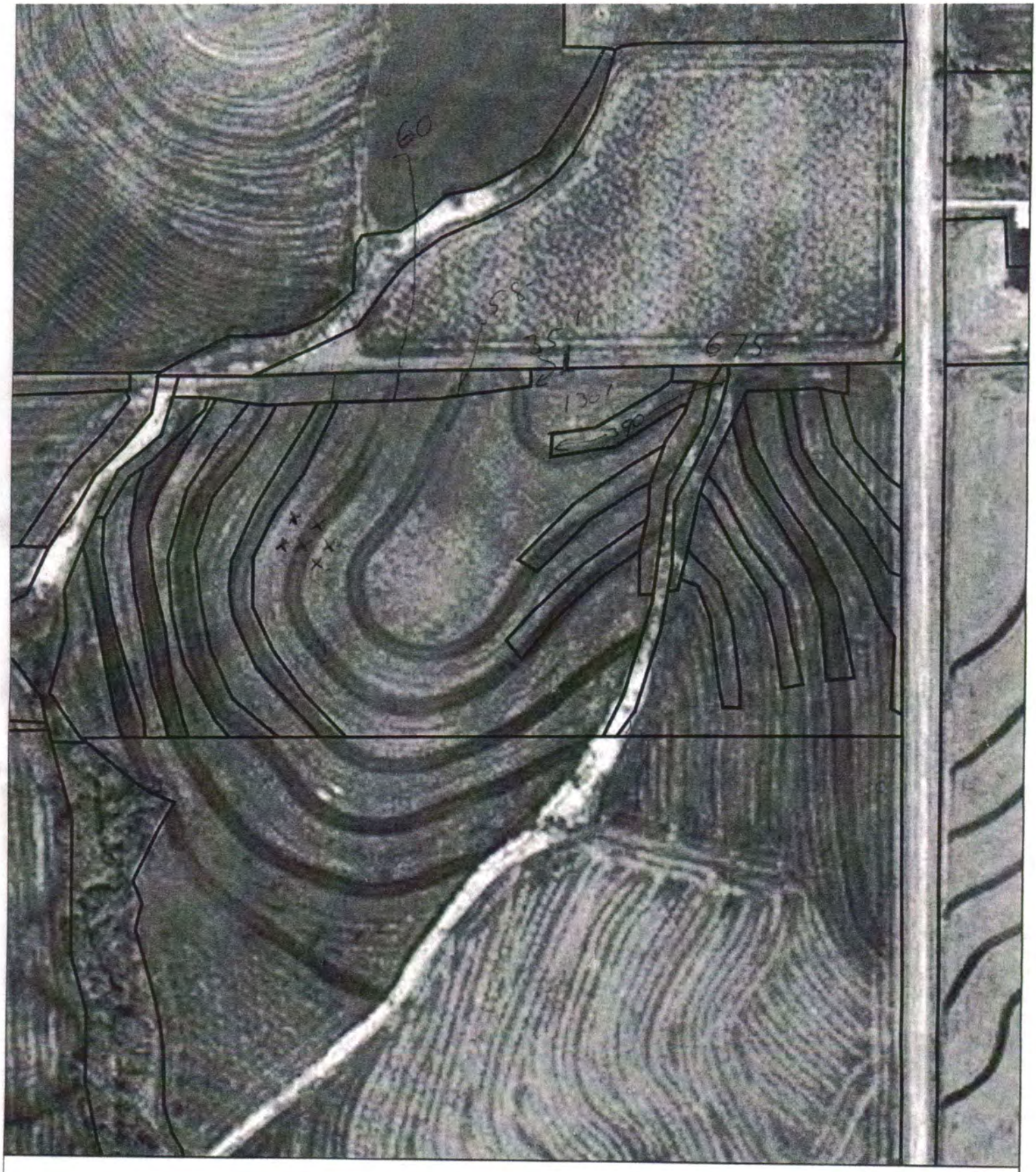
Refilled all Holes & Came Back in 24 Hr.

Added ing level to 12" in.

4/10 6" Start 2:00 End 5:30

	30L	60L	90L	120L	150L	180L	210L	240L
1	0	0	½	½	1	2	2	
2	0	0	¼	¼	½	½	½	
3	2	dry	0	1¼	2	Dry	½	
4	1	dry	½	1½	dry	½	2	
5	½	½	2	3	3¼	Dry	¼	
6	½	½	½	½	½	¾	¾	


KILDEER
STATE
SPECIAL
USE
AREA
Wittstruck
Creek
ISLAND
ROCK
(Joins sheet 45)
T 8 N
W. Bennett Rd
SW. 14th
Area of "pave" testi
W. Wittstruck Rd.



121 0 121 242 Feet

1:2902

USDA NRCS 4/1/2002

N

EXHIBIT "A"

A tract of land located in Lot 28 and 8 of Irregular Tracts in the South One-Half of Section 9, Township 8 North, Range 6 East of the 6th P.M., Lancaster County, Nebraska, and more fully described by metes and bounds as follows:

Beginning at the Northeast corner of Lot 28 Irregular Tract, said point being on the West County Road Right-of-Way line; thence South 00 degrees 34 minutes 28 seconds West, (an assumed bearing), on the East line of said Lot 28, a distance of 694.94 feet; thence South 89 degrees 23 minutes 00 seconds West, a distance of 2,803.11 feet to a point on the Westerly line of Lot 8 Irregular Tract; thence North 17 degrees 36 minutes 49 seconds East, on said line a distance of 731.50 feet; thence North 89 degrees 23 minutes 00 seconds East, on the North line of Lots 8 and 28 Irregular Tracts, a distance of 2,588.72 to the point of beginning.