Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008319

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380311201

Issued 10/12/05
Expires 10/12/06
Revenue Code 3157

Establishment: KEN & LORI BELL
T8N R6E SEC 17
COUNTRY ESTATES LOT 10
2901 RUHLMAN CIR-MARTELL

FEES: $275.00

Permittee: KEN & LORI BELL
842 IVY AVE
CRETE NE 68333

TOTAL: $275.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 05380311201

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 2901 RUHLMAN CR. (no rural route) City MARTELL NE, Zip NE 68404

Legal Description: 1/4 1/4 Section 17 Township 8N Range R6E Subdivision Country Estates Addition Block 10 Lot

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name KEN + LORI BELL Signature Ken Bell

Address 942 IVY AVE City/State/Zip Crete NE 68333

☐ Check if owner designed system Home Phone 926-4528 Work Phone 429-8078

C. Contractor

Name BRAD SOUTHWICK Company Name Southwick Sewer + Drain

Address 17201 S 72 City/State/Zip HICKMAN NE 68372

☒ Check if contractor designed system Work Phone 792-2462

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 10/12/05 Date frwd 10/12/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold E. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 10-12-05 Date frwd 10-12-05 ACTION ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

Line, tank, lateral, field notes

By Doug Amen

Date 11/23/05

Business Office Use Only
Date Rec'd 10/12/05
Amt Paid 275.00
Rec'd By CW Cash/Check No. 4792

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: 05380312

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2901 Wuhlman CR. (no rural route) City MARTELL NE, Zip 68404

Owner KEN + LORI BELL Addresss 642 IVY AVE CRETE NE 68333

Soil Type (SCS): SHC Percolation Rate: 40 min./inch

Date of Tests 10/10 to 10/11 Weather: Precipitation — Temperature 60s

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	10/10	9:00	10/11	8:30	10/11	1:15	28½	10/11	1:45	30	1	30
2			A	8	Am		P	29		P		1⅞	17
3								31¼				2	15
4	↓							28¼				1¼	20
5	36							31				1⅛	24
6	36	↓	↓	↓	↓			24⅞				¾	40

Person Conducting Percolation Tests

Name: Brad Southwick

Phone: 430-7606

Address 17201 S. 72
Hickman, NE 68372

Sum of Percolation Rates: 146

Average of Rates: 25

Rate Used for Calculation: 40

> 20 min differential

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official: Gerrold C. Hood Date: October 12, 2005

FORM 23-101 10-96

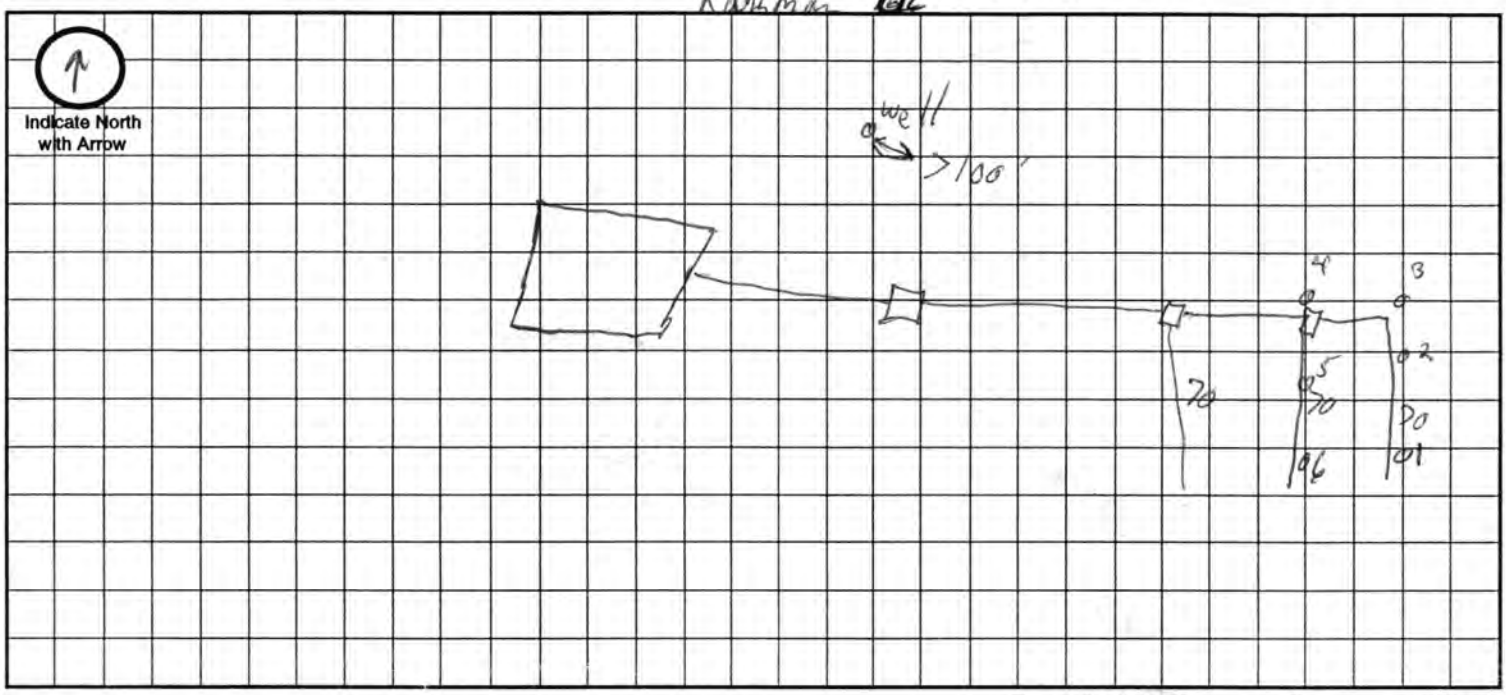
Lincoln-Lancaster County Health Department
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C

Permit Number: 05380312

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) 2901 Rullman Rd City Martell NE, Zip 68404

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other (Fralo mfg)

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

Percolation Rate 40 (min. per inch) Soil Type: SHC Land Slope: 6% %

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

Total Square Feet of Field Required: 825 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 210 ft. Number of Trenches 3 Trench Width 4' (3' Infiltration)

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

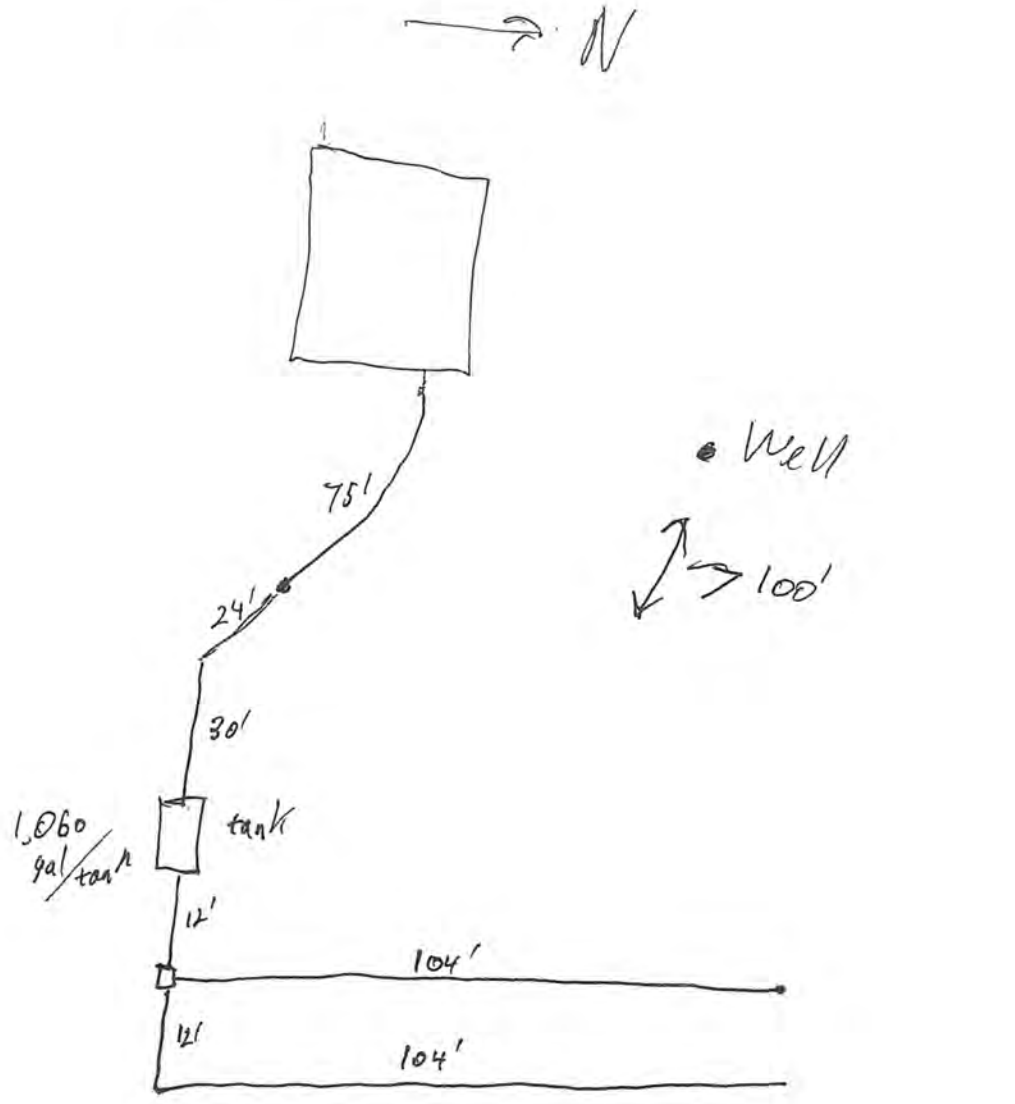
Home Building Contractor _____ Date _____

Installer _____ Date 10/12/05

FORM 23-102 10-96

Field Notes

290' Run 21 mins



Field Note

2901 Rankin

