LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 97380156501

Issued 04/14/97
Expires 10/14/97
Revenue Code 18754

Establishment

EMERY BRANDT
T8N R6E SEC 16
LOT 50
15605 SW 14 STREET

FEES: $150.00

TOTAL $150.00

Permittee

EMERY BRANDT
RR0001
BOX 00035
HALLAM NE 68368

4375

Issued By M. Jane Ford
Health Director

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
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00 # 1039
4/10/97 ls

FILE NO. _____

DATE: APRIL 9, 1997

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. 8 N ; Range 6 E ; Section SE 16-8-6
   Block — : Lot 50 : Addition _____
   Street Address 15605 S.W. 14th STREET, ROCA, NE 68404
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe _____
3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐
4. Distance to public sewer: Rural ft.

x Emery L. Brandt
Signature of Applicant (Owner or Lessee)

x Charlene L. Brandt
Address R.F.D #1, BOX 35, HALLAM, NE 68368

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/10/97. Date Frwd. 4/10/97. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. 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. 4/10/97. Date Frwd. 4/10/97. ACTION: Approved ☒ Disapproved ☐ Signature: Dan Pillard

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5-6-97 by: P.D. pipe & tank only Need sketch + Drawing
Date: 5/14/97 by: L.C.H.
Date: 4/11/97 by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 4/11/97 By: Jerrold C Hood

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

RECEIVED APR 10 1997

FORM 23-43

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

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 15605 S.W. 14th Street (no rural route) City Roca NE, Zip 68404

Owner Emery L. Brandt Addresss 15605 S.W. 14th Street Roca NE, 68404

Soil Type (SCS): MAYBERRY CLAY LOAM (WITH SAND SUB) Percolation Rate: _____ min./inch

Date of Tests 3-27 to 3-28 Weather: Precipitation _____ Temperature _____

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	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	2	15 MIN/IN
2	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	1 7/8	16 MIN/IN
3	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	2 1/8	14 MIN/IN
4	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	2	15 MIN/IN
5	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	1 7/8	16 MIN/IN
6	25"	3-27	6:00	3-27	10:00	3-28	10:30	20"	3-28	11:00	30	2	15 MIN/IN

Person Conducting Percolation Tests

Name: Jay Placek

Phone: ~~[illegible]~~ 794-4773

Address 5405 W. Stagecoach rd. Hallam NE. 68368

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 15 MIN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

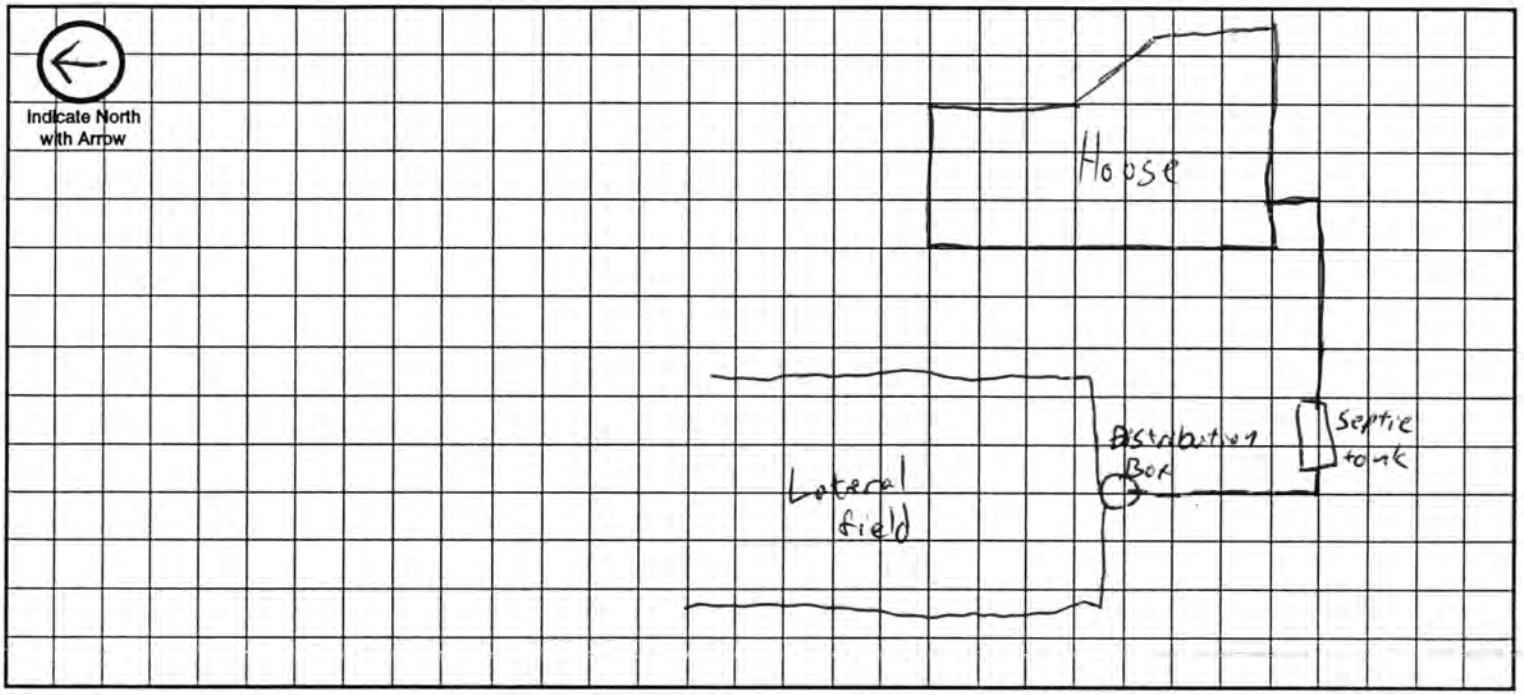
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) 15605 S.W. 14th street City Roca NE, Zip 68404

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: MAYBERRY CLAY LOAM (WITH SAND SPOTS. Land Slope: _____ %

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

Total Square Feet of Field Required: 380 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 95 ft. Number of Trenches _____ Trench Width 48"

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

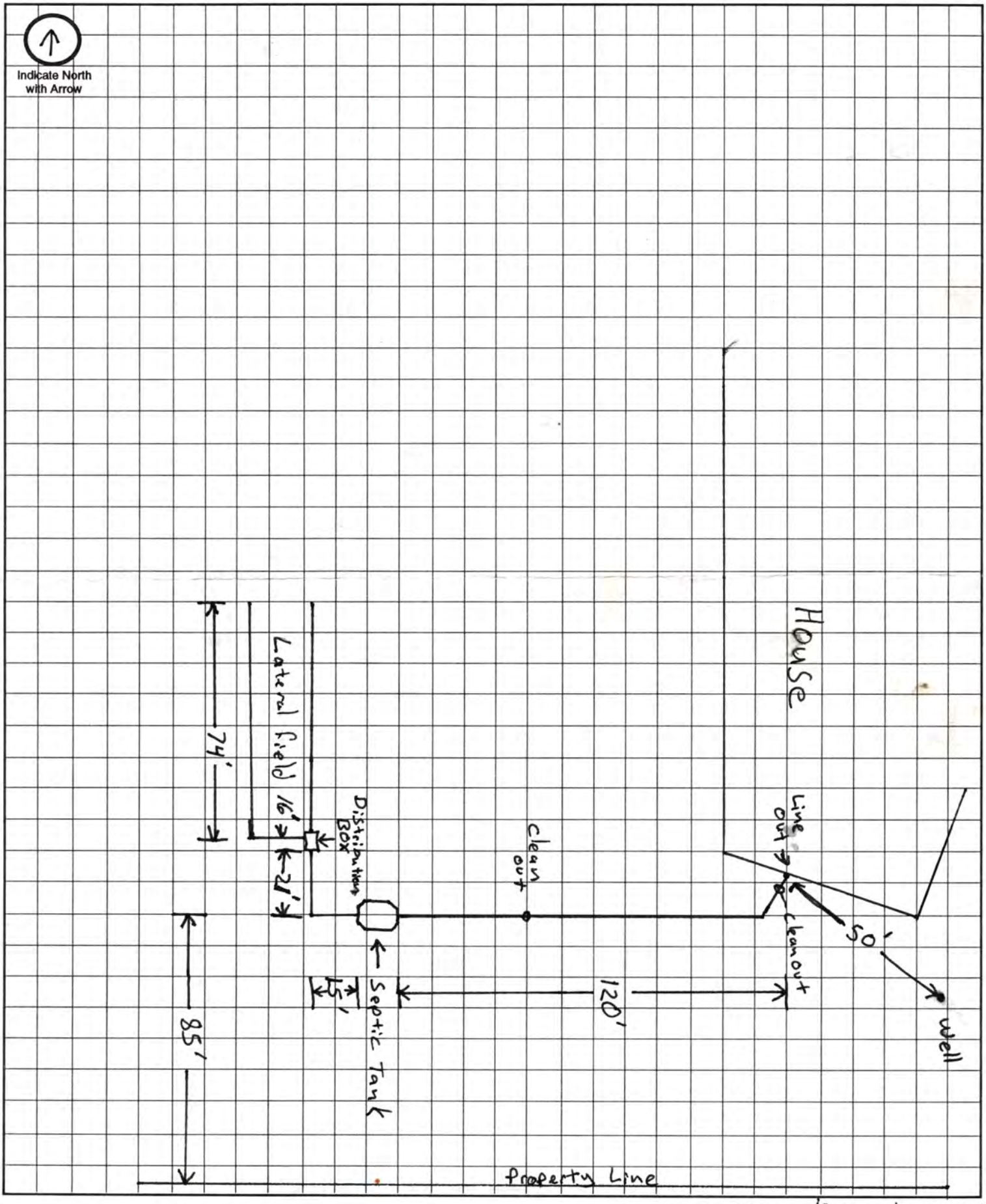
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Brandt Homes by Allen Brandt Date 4-8-97

Installer Dougs Backhoe Service Date 4-8-97

As Built Drawing



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

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

Emery + Charlene Brandt
Box 111
Sprague Ne 68438
(402-794-4500)

Date 6-26-97

System Location (Indicate correct number and street)
Address 15605 SW 14th (no rural route) City Roca NE, Zip 68430

A. Building Sewer

1. Material: Plastic PVC SCH 40
   Diameter: 4" ____ in.
2. Distance above basement floor: ____ ____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 120' in.
4. Number of clean-outs: Two
5. Distances to: well or suction line 50 ft.
   stream ____ ft.
   pressure line ____ ft.
   property line 85 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: Three
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☐ above ☒ below grade 6 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 3½' in.
8. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 85 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 3.5' ft.

D. Absorption Field

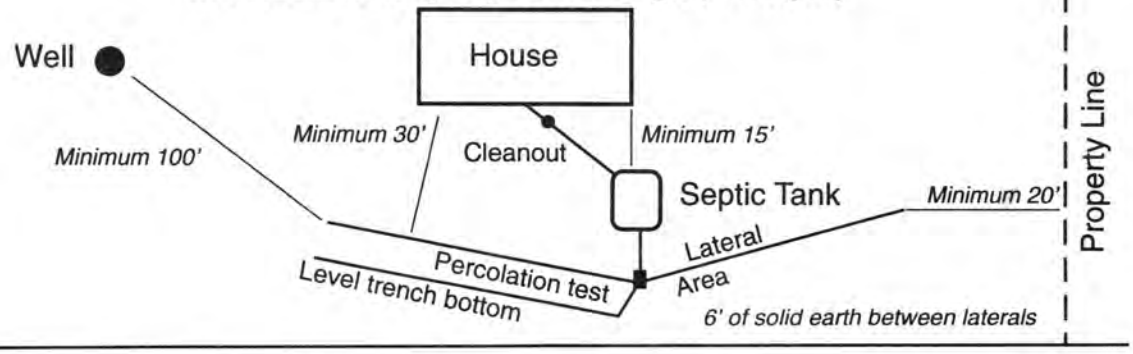
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 20"
   or perforated pipe: ____
   Material: ☐ fiberglass ☐ plastic ☒ concrete
   ☐ other ____
2. Lateral lines: Number two
   Length of each line: 74 ft. 74 ft.
   ____ ft. ____ ft., ____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 5 in/100 ft.
   Average depth 48 in
4. Filter material: gravel
   Depth of material 22 in.
5. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

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

Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96