Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008659

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 06380315501

Issued 02/22/06
Expires 02/22/07
Revenue Code 3157

Establishment: JOSEPH KLEIN
T8N R6E SEC 25
HIGH PRAIRIE ESTS BLK 1 LOT 3
NA-SPRAGUE

FEES: $275.00

Permittee: JOSEPH KLEIN
7421 S 19 ST
LINCOLN NE 68512

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: 06380315501

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 Not yet available 18000 HIGH PRAIRIE City _____ NE, Zip _____
(no rural route)

Legal Description SW 25 8N 6E High Prairie Estates 1 3
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 Joseph Klein Signature Joseph M Klein

Address 7421 S. 19th St City/State/Zip Lincoln, NE 68512

☐ Check if owner designed system Home Phone (402) 420-0237 Work Phone (402) 525-7823

C. Contractor

Name Mike Manzitto Company Name Michael Builders Corp

Address 6621 NW 6th St City/State/Zip Lincoln, NE 68521

☐ Check if contractor designed system Work Phone 402-499-6161

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

Designer Name Lloyd Jakoubek Firm Raymond Contracting Inc Work Phone 402-890-6009

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 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 2/22/06 Date frwd 2/23/06 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Flood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2-23-06 Date frwd 2-23-06 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 2-23-06 Date frwd 2-23-06 ACTION ☒ Approved ☐ Disapproved Signature

Line, tank, lateral 4/12/06 DF

Installation Final Written Approval

By Doug Amack

Date 5/1/06

Business Office Use Only
Date Rec'd 02/22/06
Amt Paid 275.00
Rec'd By S Cash/Check No. 6068

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Kim Reave Line Fd

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B

Permit Number: 06380315501

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Joe & Jamie Klein

18000 High Prairie

System Location (Indicate correct number and street)

Address Highway 77 and Hickman Rd (no rural route) City Lot 3, High Prairie Estates NE. Zip Lancaster County, NE

Owner ~~Brian Tanner, Jr.~~ Address 325 Sprague Rd, Raco, NE 68430

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

Date of Tests 12/13/04 to 12/14/04 Weather: Precipitation ⊖ Temperature 36°

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	30	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	1/4	24
2	27	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	1/2	60
3	29	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	1/2	60
4	30	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	5/8	48
5	27	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	1/2	60
6	28	12/13	12 AM	12/14	12 AM	12/14	330	6	12/14	4 PM	30	5/8	48

Person Conducting Percolation Tests

Name: STAN KROESE

Phone: 560 1208

Address 7801 LEIGHTON
LINCOLN NE 68507

Sum of Percolation Rates: 300

Average of Rates: 50

Rate Used for Calculation: 55

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Loyd - Michael Builders
6621 N.W. 16th Lincoln 68521

Signature of Reviewing Official _____ Date _____

Bid From Loyd $ 7840.00

Lincoln-Lancaster County Health Department
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C

Permit Number: 06380315501

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) Not yet available City _____ NE, Zip _____

SW¼ 25-8-6 Block 1, Lot 3

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other 1500 gallon

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

Percolation Rate 55 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other 4' wide 350' Long

Total Square Feet of Field Required: 1400 sq. ft.

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: Q4 Standard

Capacity of Septic Tank 1500 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed 3

Total Length of Laterals 350 ft. Number of Trenches 3 Trench Width 4'

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 2/12/06

Installer _____ Date 2-9-06

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 4/12/06

Klein

System Location (Indicate correct number and street)

Address 18000 High Prairie Pl (no rural route) City Yola NE, Zip 68430

High Prairie Estates Block 1, lot 3

A. Building Sewer

1. Material: class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 20" in.
3. Distance between dwelling and septic tank: 88' ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: concrete
   Number of compartments: one
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade AT Grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 16" in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: Plastic - 3 Boxes
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 26' + 12' + 12' ft.

D. Absorption Field

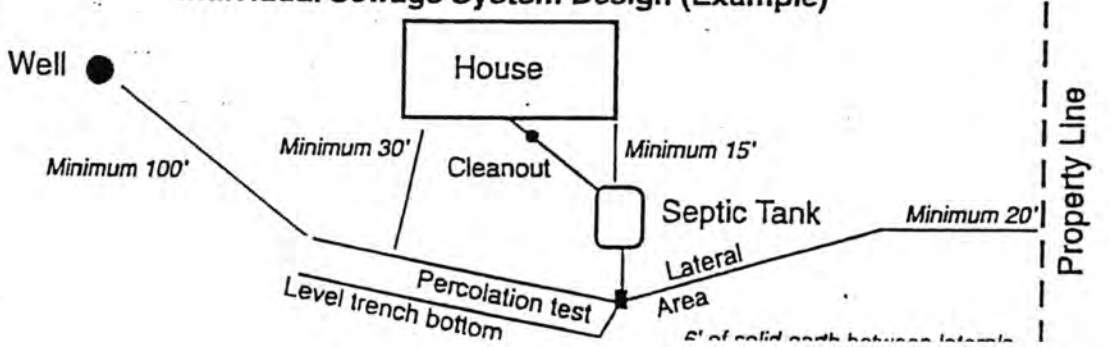
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: Quick 4'
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 148 ft. 148 ft.
   59 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope FLAT in/100 ft.
   Average depth 30" in
4. Filter material: Dirt
   Depth of material 30 in.
5. Distances to: Well or suction line 100 ft.
   Stream 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

18000 High Prairie

