# Lincoln-Lancaster County Health Department
## ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009069

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEALED LAGOON

Permit # 06380321501

Issued 07/03/06
Expires 07/03/07
Revenue Code 3157

Establishment: BRANDON & SHERI HARRIS
T8N R6E SEC 5 QTR SW
PARCEL B
11833 SW 29 ST-MARTELL

FEES: $275.00

Permittee: BRANDON & SHERI HARRIS
3741 FAULKNER DR
APT 312
LINCOLN NE 68516

TOTAL: $275.00

EPH COPY

Bruce D. Dart

Bruce D. Dart, Health Director

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

**A**

Permit Number: 06380321501

# Sewage Disposal System

## Request for Site Clearance and Permit

**Include Form B, Form C and Applicable Fees with this Application.**

☐ Septic System ☒ Lagoon (SEALED) ☐ 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)

~~Lot 20 IT NE¼ 5-8-6~~

Address 11833 SW 29th Street (no rural route) City Martell NE, Zip 68404

Legal Description: SW 29th & Saltillo Sec. 5, Township 8 North, Range 6 East of the 6th pm
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude W096°-45'-43.4" Latitude N40°-41'-40.3" Lancaster County, NE, Parcel B

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

### B. Owner

Name BRANDON & Sheri HARRIS Signature X Sheri L Harris

Address 3741 FAULKNER DR. #312 City/State/Zip LINCOLN, NE. 68516

☐ Check if owner designed system Home Phone 402 560 0609 Work Phone

### C. Contractor

Name GARY L. HOLLY Company Name HOLLY CONTRACTING CO.

Address 21860-567AV City/State/Zip FAIRBURY, NE, 68352

☒ Check if contractor designed system Work Phone 402-587-0120

### 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 X

☐ 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 7/3/06 Date frwd 7/3/06 ACTION ☒ Approved ☐ Disapproved Signature Jerold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 7-6-06 Date frwd 7-6-06 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 07/03/2006 Date frwd ACTION ☒ Approved ☐ Disapproved Signature

### Installation Final Written Approval

By Date 7/29/07

***Business Office Use Only***
Date Rec'd 7/3/06
Amt Paid 275.00
Rec'd By TH Cash/Check No. 1833

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

7886 2179

B

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

Permit Number:

FAX TO: 402 435-4951

# Sewage Disposal System
## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

### System Location (Indicate correct number and street)

X Address _____ City _____ NE, Zip _____
(no rural route)

Owner BRANDON HARRIS Address 3741 FAULKNER DR. #312, LINCOLN, NE. 68516

Soil Type (SCS): CLAYEY SILTY LOAM Percolation Rate: 54 min/inch

Date of Tests 01/10/07 to 01/12/07 Weather: Precipitation LT. SNOW MIST Temperature 10°-15°

### 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" | 01/11 | 1030 | 01/12 | 0715 | 01/12 | 0715 | 6" | 0112 | 1115 | 30 | .6 | 50 |
| 2 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | 0717 | ↓ | ↓ | 1117 | ↓ | .6 | 50 |
| 3 | | | | | | | 0718 | | | 1118 | | .6 | 50 |
| 4 | | | | | | | 0719 | | | 1119 | | .6 | 50 |
| 5 | | | | | | | 0721 | | | 1121 | | .6 | 50 |
| 6 | | | | | | | 0723 | | | 1123 | | .6 | 50 |
| 7 | | | | | | | 0725 | | | 1125 | | .5 | 60 |
| 8 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | 0727 | ↓ | ↓ | 1127 | ↓ | .5 | 60 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

### Person Conducting Percolation Tests

Name: GARY L. HOLLY
Phone: 402-587 0120
Address 71860-567 AV.
FAIRBURY, NE. 68352

Sum of Percolation Rates: 420
Average of Rates: 52.5
Rate Used for Calculation: 54 MIN/IN

DO NOT WRITE BELOW THIS LINE

### Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 22-101 10-95

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

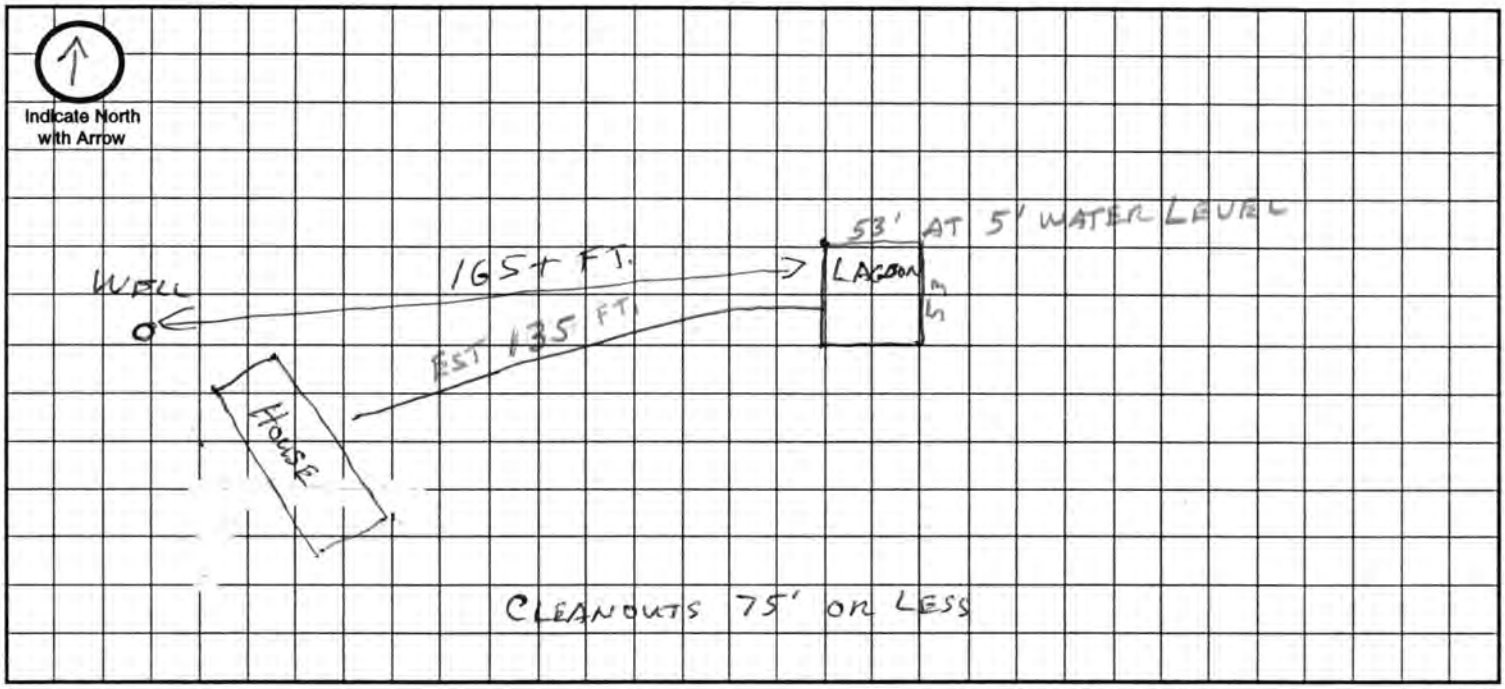
**C**

Permit Number: 063803215

# Sewage Disposal System

## Preliminary Plan Specifications SEALED LAGOON

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 NO. SCALE

## A. System Location (Indicate correct number and street)

Address (no rural route) X 11833 SW 29th Street City Martell NE, Zip 68404

## B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☒ Other SEALED LAGOON

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

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

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

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 _____ Date _____

Installer Gary T. Holly Date 062906

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:

# Sewage Disposal System
## As Built Plans & Specifications

Date 1-25-07

**System Location (Indicate correct number and street)**
Address 11833 SW 29 (no rural route) City Mulfell NE, Zip 68404

### A. Building Sewer
1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 8 in.
3. Distance between dwelling and septic tank: 150 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100+ ft.
   stream N/A ft.
   pressure line 100+ ft.
   property line 20+ ft.

### B. Septic Tank
1. Material: Concrete
   Number of compartments: 3
2. Capacity: 2000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 2" in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line 100+ ft.
   Stream N/A ft.
   Pressure line 100+ ft.
   Property line 20+ ft.

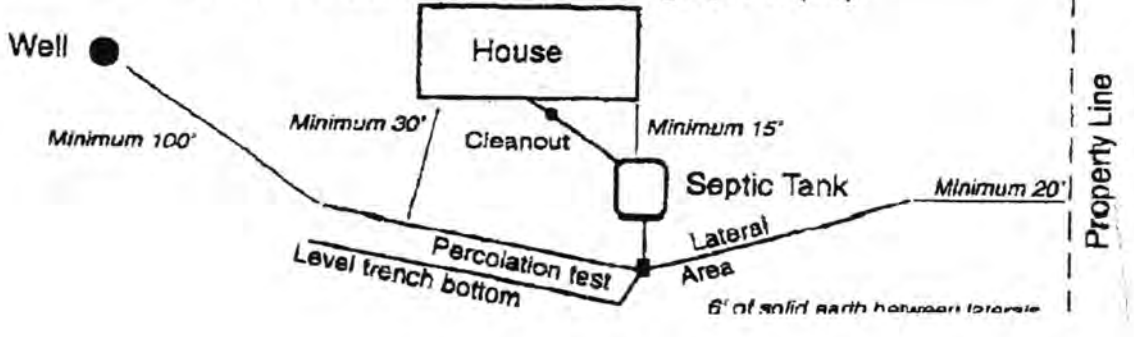
### C. Distribution Box
1. Material: PVC Drop Box Style
   Number available outlets: 2
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 45' ft.

### D. Absorption Field
*(Provide as-built drawings on back of this form)*
1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 3'
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☒ other Infiltrator
2. Lateral lines: Number 5
   Length of each line: 100 ft. 100 ft.
   100 ft. 100 ft., 32 ft.
3. Trench dimensions: Width 3 ft.
   Slope 2010 in/100 ft.
   Average depth 24 in
4. Filter material: Dirt
   Depth of material N/A in.
5. Distances to: Well or suction line 100+ ft.
   Stream N/A ft.
   Pressure line 100+ ft.
   Property line ____ ft.

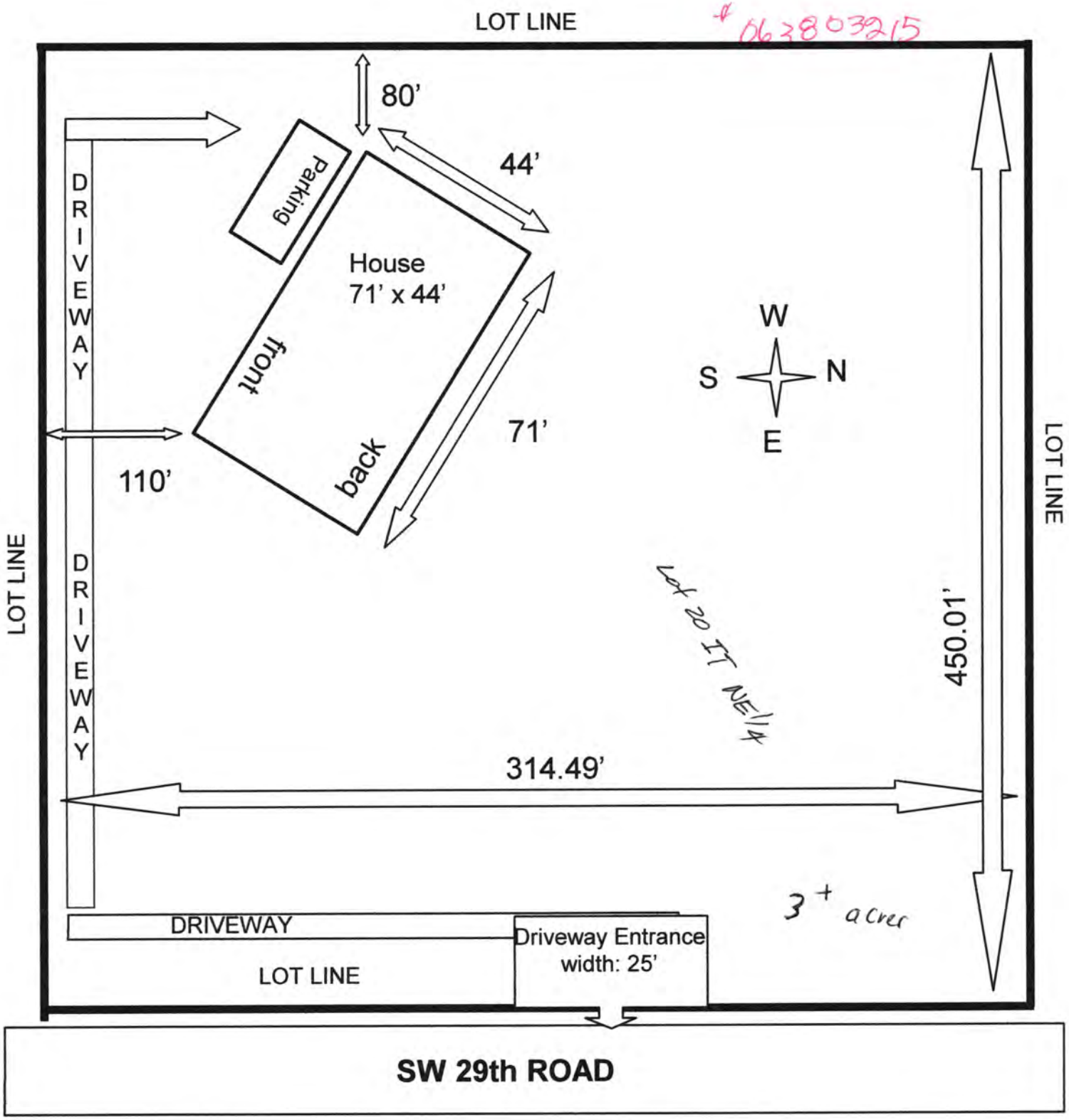
Indicate North with Arrow

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

**Individual Sewage System Design (Example)**




FORM 23-103 10-98

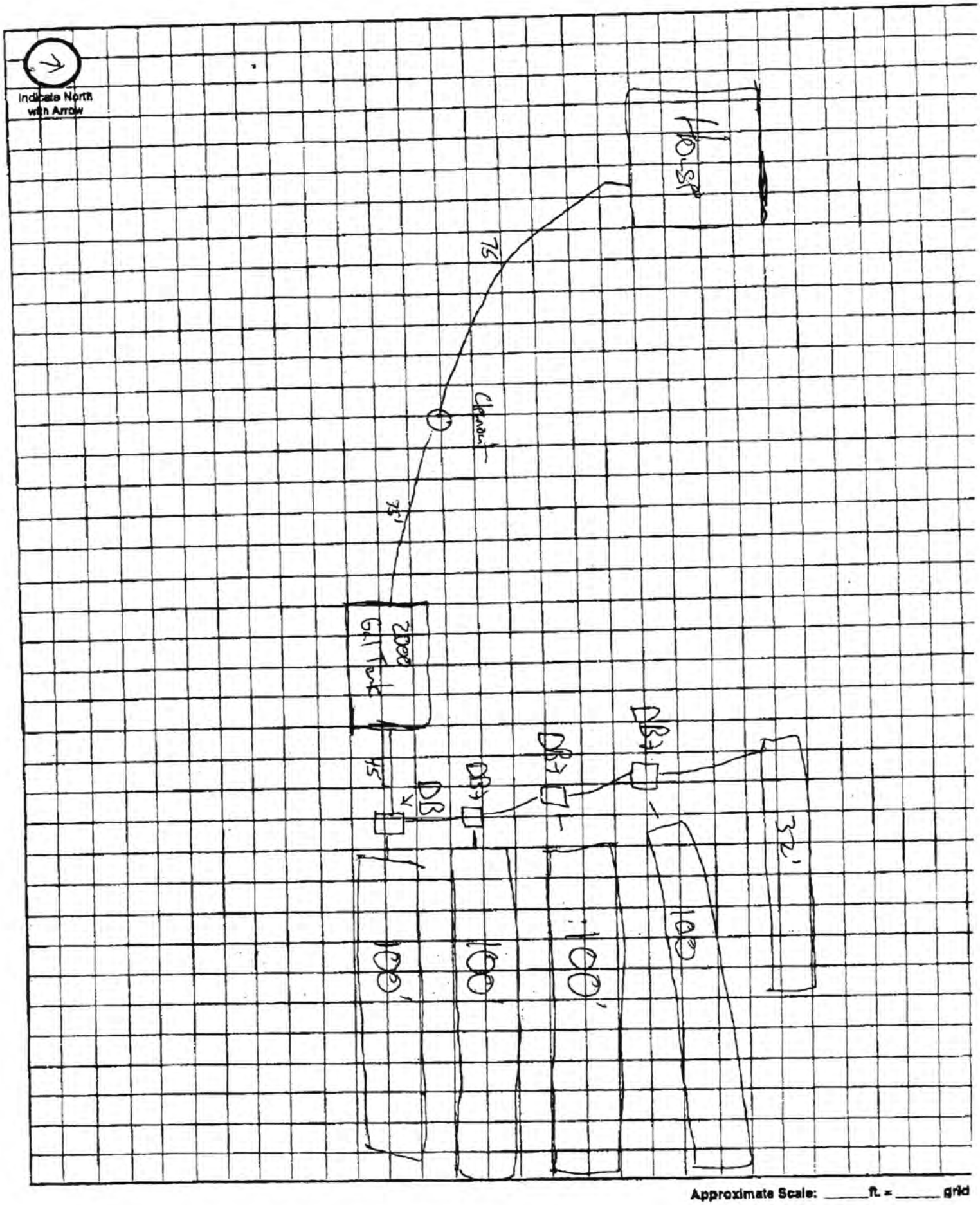



Legal Description: SW 29th & Saltillo-Section 5, Township 8 North, Range 6 East of the 6th pm, Lancaster County, NE, Parcel B

Required Setbacks: Sides of House, min. 25'; Front of House, min. 25', Back of House to lot line, min. 50'

**Owners: Brandon & Sheri Harris**

# As Built Drawing




Approximate Scale: _____ ft. = _____ grid