LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET ENVIRONMENTAL HEALTH DIVISION (402) 441-8000

Lincoln, NE 68510-1514

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION

No. 96380141901

Issued 04/16/96

Expires 10/16/96

Revenue Code 18754

Establishment

RANDY NELSON
T8N R7E SEC 4
WHITE ROCK ESTATES BLK 2 LOT 2
5433 WHITE ROCK LANE

FEES: $150.00

TOTAL $150.00

Permittee

RANDY NELSON
5433 WHITE ROCK LN
LINCOLN NE 68516

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: $_____

FILE NO. 963801419

DATE: _____

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 7E ; Section 4 ;
   Block 2 : Lot 2 : Addition White Rock Estates
   Street Address 5433 White Rock Lane

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: _____ ft. ~~LAGOON~~

Randy N Dean
Signature of Applicant (Owner or Lessee)

5433 White Rock Lane
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/15/96. Date Frwd. 4/15/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Neal
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 4-15-96. Date Frwd. 4-15-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]
3. City or County Engineer: Date Rec'd. 4-15-96. Date Frwd. 4-15-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL RURAL WATER DISTRICT

Site Visits:
Date: 10-1-96 by: P.D.
Date: 8-22-00 by: P.D.
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-23-00 By: [signature]

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

B

FILE NO. 9638014901

PROPERTY WHERE SOIL TESTED: WhiteRock

Location: Township 8 ; Range 7 ; Section & ¼ Section 4 NW/4
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; WTC Clay Loam ☐ .
Dates of Tests: 8-20 to 8-21 96. Weather: Precip. 0 Temp. 80s.

OWNER: _____

Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	36	8/20	5:30	8/21	3:50	8/21	6:00	22 3/8	6:30	22 3/8	30	1/2	60
2			PM		PM		PM	20 7/8	PM	21 3/8		1/2	60
3								23		23 1/2		1/2	60
4								20 7/8		21 1/2		5/8	48
5								19 1/2		20		1/2	60
6								14 1/2		15		1/2	60

Brad Smith
Signature of Person Conducting Test

Address 17201 So. 72nd Hickman Phone 475-2462

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: _____

Approved Percolation Rate (a)
A. 5'8 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

54th + Saltillo

FILE NO. 96 380 1419

PROPERTY WHERE SOIL TESTED:

Location: Township 8 ; Range 7 ; Section & ¼ Section 4 .
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 4-1-96 to 4-2-96 . Weather: Precip. 0 Temp. 70 .

OWNER: Randy Nelson 466-1313 421-2108
Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
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2	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	5 3/4	30min	1/4"	
3	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	6"	30min	0	
4	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	5 1/2"	30min	1/2"	
5	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	6"	30min	0	
6	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:PM	5 7/8"	30min	1/8"	

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Signature of Person Conducting Test

Address 2700 Van Ave. Phone 464-0638

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: Doesn't pass for septic system
Soil Type (SCS): Wymore Silty Clay Loam
Date: April 15, 1996

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
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

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 96380 1419

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed [redacted] sq.ft.

968

Carrol C. Hood
Signature of Reviewing Official

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

D

Permit Number: 96 3801419

Sewage Disposal System

As Built Plans & Specifications

Date 8-23-00

System Location (Indicate correct number and street)

Address 5433 White Rock Cove (no rural route) City Lincoln NE, Zip 68516

A. Building Sewer

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

B. Septic Tank

1. Material: Concrete
   Number of compartments: One
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade _____ 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 _____ ft.
   Stream _____ ft.
   Pressure line > 30 ft.
   Property line > 50 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 5-10 ft.

D. Absorption Field

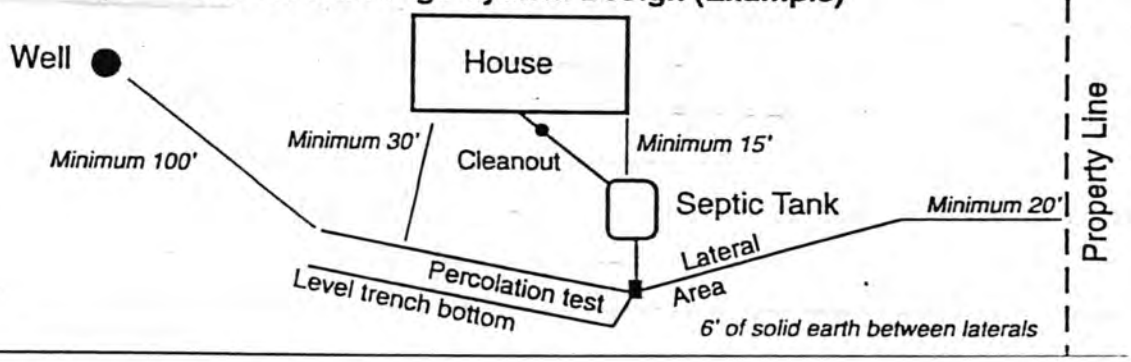
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 67 ft. 59 ft.
   50 ft. 67 ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 4 in/100 ft.
   Average depth 24 in
4. Filter material: Rock
   Depth of material 8-12 in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line > 50 ft.
   Property line 20 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: 8-25-00
5433 White Rock Lane

FILE NO. _____

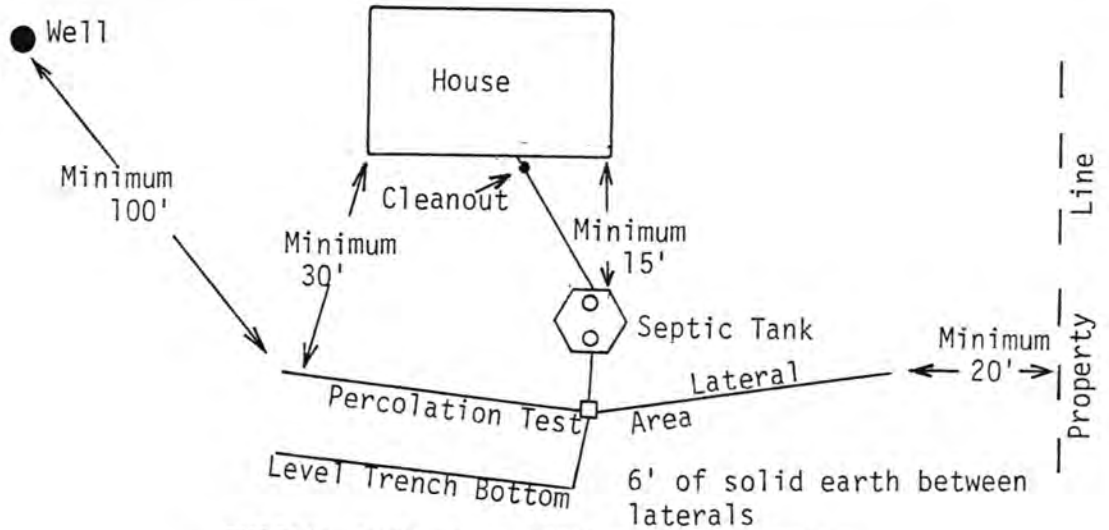
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4" in.
2. Distance above basement floor [redacted] in., or below basement floor 24" in.
3. Distance between dwelling and septic tank 75 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line [redacted] 60 ft.;
Stream _____ ft.; Pressure Line 30' ft.; Property Line 100+ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments 1 .
2. Capacity 1250 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre cast)
4. Manholes: Over Inlet; diam. 8" in.
Over Outlet; diam. 8" in.
Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 24" in.
8. Distances to:
Well or Suction Line 65 ft.;
Stream — ft.; Pressure Line 60 ft.; Property Line 100+ ft.

C. DISTRICTION BOX:
1. Material Concrete ; Number - available outlets 5 .
2. Factory Built: Yes ☑ No ☐
(Company Precast)
3. Distance from Septic Tank 6 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 18" or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☑ ; other _____.
2. Lateral Lines:
Number 4 ; Length of each line 67½, 58½, 49½, 66½, _____ ft.;
Total length of laterals [redacted] 242 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 4 ft.;
Slope 2 in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line 100+ ft.;
Stream - ft.; Pressure Line 80+ ft.; Property Line 30 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

JUL 0 6 2005

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 5433 White Rock Lane Roca, NE 68430

Parcel ID 15-04-102-002-000 (i.e. 99-99-999-999-999)

Twp 8N Range 7E Section 4 1/4 NW 1/4 Block 2 Lot 2 Addition Whiterock Estates

Directions to Property 27th St. South From Lincoln to Saltillo Road East to 54th St So. to Whiterock East

Location of Well Rural Water Tap Location: Inside ☐ Outside ☐

Location of Sewage System See Back Year Installed 96

Site Hazards (dogs, etc.)

	NAME	ADDRESS	PHONE
Present Owner:	Randy & Nancy Nelson	5433 Whiterock Ln Roca, NE 68430	421-2108
Tenant/Buyer:	Scott & Lori Meyer	8041 Trendwood Dr Lincoln, NE 68506	483-4154
Return to:	Kim Marie Schrader-Eberspacher	Home RE 4501 S. 86th Lincoln, NE	430-9019 / 436-3199 (Fax)

Signature of Applicant Scott A. Meyer Address 8041 Trendwood Dr Lincoln, NE 68506 Date 6/29/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 07/07/05 Amount 200.00 Check No. 5799 Initials JS

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 7/11/05

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

WATER SYSTEM: Approved ☐ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

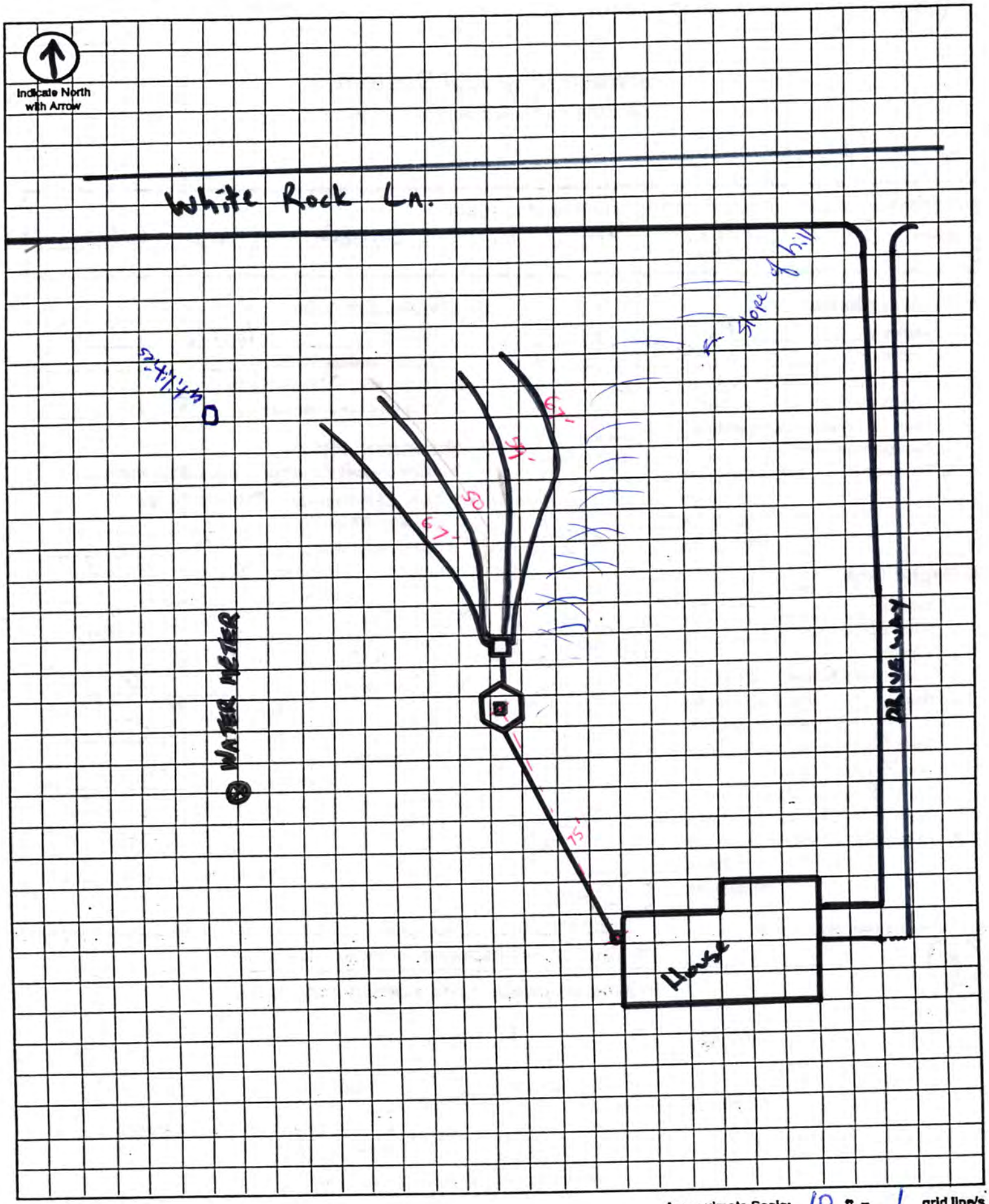
Approved by Jerrold C. Hood R.E.H.S. Date 7/11/05

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

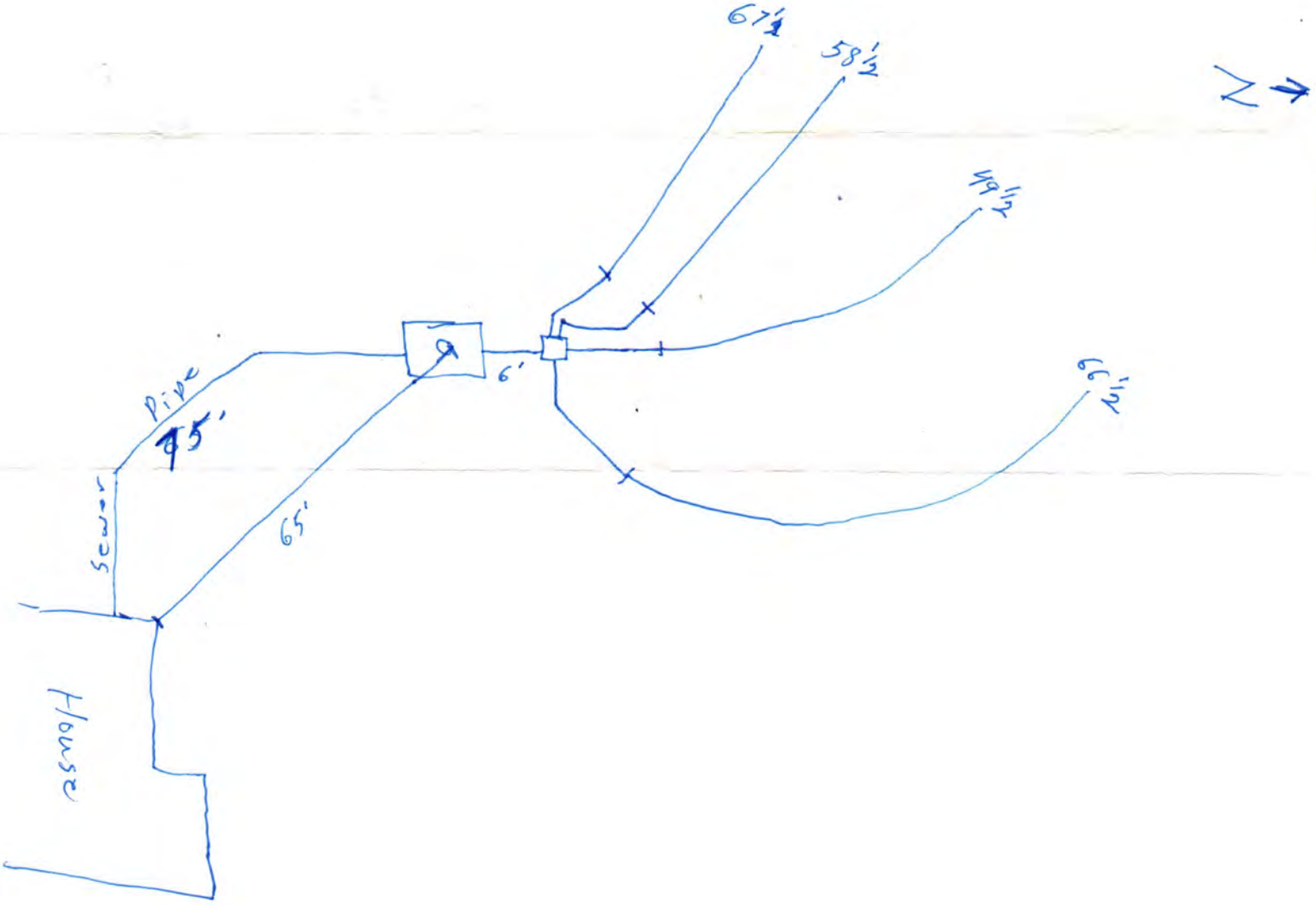
As Built Drawing



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

AS BUILT DRAWING OF SYSTEM

DATE _____ INSTALLER Norman Plbg.



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET ENVIRONMENTAL HEALTH DIVISION (402) 441-8000

Lincoln, NE 68510-1514

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION

No. 96380141901

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Expires 10/16/96

Revenue Code 18754

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T8N R7E SEC 4
WHITE ROCK ESTATES BLK 2 LOT 2
5433 WHITE ROCK LANE

FEES: $150.00

TOTAL $150.00

Permittee

RANDY NELSON
5433 WHITE ROCK LN
LINCOLN NE 68516

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
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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: $_____

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DATE: _____

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2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: _____ ft. ~~LAGOON~~

Randy N Dean
Signature of Applicant (Owner or Lessee)

5433 White Rock Lane
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/15/96. Date Frwd. 4/15/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Neal
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 4-15-96. Date Frwd. 4-15-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]
3. City or County Engineer: Date Rec'd. 4-15-96. Date Frwd. 4-15-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL RURAL WATER DISTRICT

Site Visits:
Date: 10-1-96 by: P.D.
Date: 8-22-00 by: P.D.
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
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INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-23-00 By: [signature]

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

B

FILE NO. 9638014901

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Location: Township 8 ; Range 7 ; Section & ¼ Section 4 NW/4
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OWNER: _____

Address: _____

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5								19 1/2		20		1/2	60
6								14 1/2		15		1/2	60

Brad Smith
Signature of Person Conducting Test

Address 17201 So. 72nd Hickman Phone 475-2462

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: _____

Approved Percolation Rate (a)
A. 5'8 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM 20105-0477
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(Annex to Application)
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LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

54th + Saltillo

FILE NO. 96 380 1419

PROPERTY WHERE SOIL TESTED:

Location: Township 8 ; Range 7 ; Section & ¼ Section 4 .
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: 4-1-96 to 4-2-96 . Weather: Precip. 0 Temp. 70 .

OWNER: Randy Nelson 466-1313 421-2108
Address: _____

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3	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	6"	30min	0	
4	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	5 1/2"	30min	1/2"	
5	36"	4-1	7:00 PM	4-2	7:30 PM	4-2	7:30 PM	6"	8:00 PM	6"	30min	0	
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Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Signature of Person Conducting Test

Address 2700 Van Ave. Phone 464-0638

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: Doesn't pass for septic system
Soil Type (SCS): Wymore Silty Clay Loam
Date: April 15, 1996

Jerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
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

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 96380 1419

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed [redacted] sq.ft.

968

Carrol C. Hood
Signature of Reviewing Official

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

D

Permit Number: 96 3801419

Sewage Disposal System

As Built Plans & Specifications

Date 8-23-00

System Location (Indicate correct number and street)

Address 5433 White Rock Cove (no rural route) City Lincoln NE, Zip 68516

A. Building Sewer

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

B. Septic Tank

1. Material: Concrete
   Number of compartments: One
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade _____ 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 _____ ft.
   Stream _____ ft.
   Pressure line > 30 ft.
   Property line > 50 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 5-10 ft.

D. Absorption Field

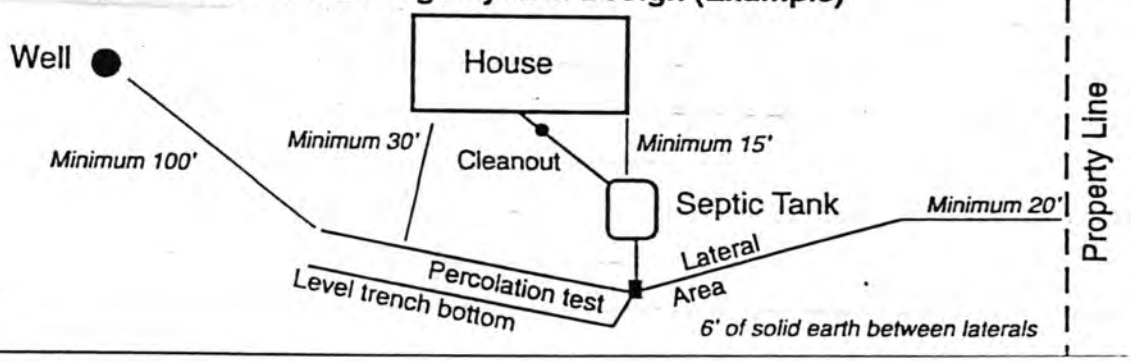
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 67 ft. 59 ft.
   50 ft. 67 ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 4 in/100 ft.
   Average depth 24 in
4. Filter material: Rock
   Depth of material 8-12 in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line > 50 ft.
   Property line 20 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: 8-25-00
5433 White Rock Lane

FILE NO. _____

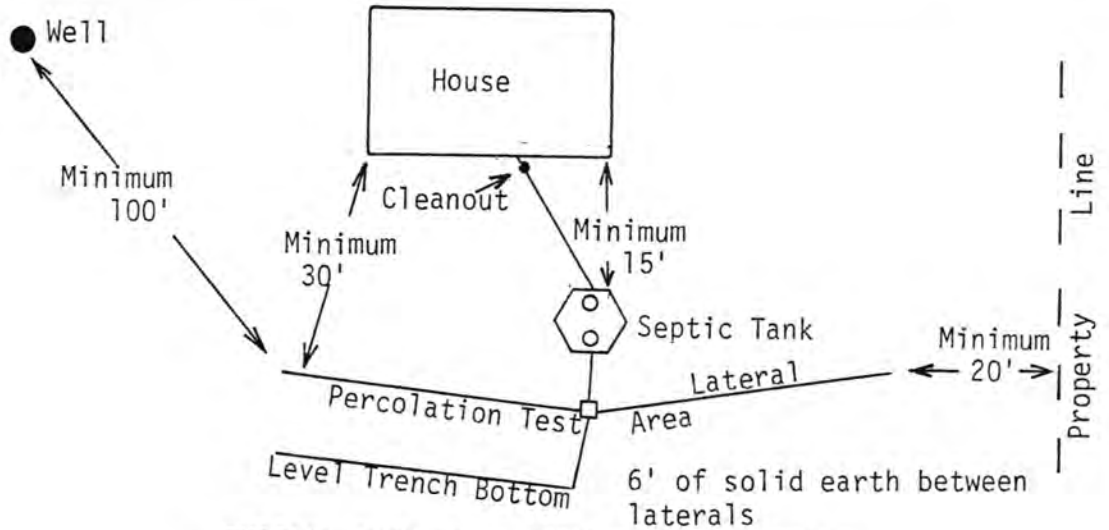
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4" in.
2. Distance above basement floor [redacted] in., or below basement floor 24" in.
3. Distance between dwelling and septic tank 75 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line [redacted] 60 ft.;
Stream _____ ft.; Pressure Line 30' ft.; Property Line 100+ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments 1 .
2. Capacity 1250 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre cast)
4. Manholes: Over Inlet; diam. 8" in.
Over Outlet; diam. 8" in.
Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☑ ; or Tee ☐
6. Outlet: Baffle ☑ ; or Tee ☐
7. Depth of top of tank below finished grade 24" in.
8. Distances to:
Well or Suction Line 65 ft.;
Stream — ft.; Pressure Line 60 ft.; Property Line 100+ ft.

C. DISTRICTION BOX:
1. Material Concrete ; Number - available outlets 5 .
2. Factory Built: Yes ☑ No ☐
(Company Precast)
3. Distance from Septic Tank 6 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 18" or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☑ ; other _____.
2. Lateral Lines:
Number 4 ; Length of each line 67½, 58½, 49½, 66½, _____ ft.;
Total length of laterals [redacted] 242 ft.;
Distance between lateral lines 10 ft.
3. Trench dimensions: Width 4 ft.;
Slope 2 in/100 ft.; Average Depth 36 in.
4. Filter Material: Gravel
Depth of Material 24 in.
5. Distances to:
Well or Suction Line 100+ ft.;
Stream - ft.; Pressure Line 80+ ft.; Property Line 30 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

JUL 0 6 2005

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☒ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 5433 White Rock Lane Roca, NE 68430

Parcel ID 15-04-102-002-000 (i.e. 99-99-999-999-999)

Twp 8N Range 7E Section 4 1/4 NW 1/4 Block 2 Lot 2 Addition Whiterock Estates

Directions to Property 27th St. South From Lincoln to Saltillo Road East to 54th St So. to Whiterock East

Location of Well Rural Water Tap Location: Inside ☐ Outside ☐

Location of Sewage System See Back Year Installed 96

Site Hazards (dogs, etc.)

	NAME	ADDRESS	PHONE
Present Owner:	Randy & Nancy Nelson	5433 Whiterock Ln Roca, NE 68430	421-2108
Tenant/Buyer:	Scott & Lori Meyer	8041 Trendwood Dr Lincoln, NE 68506	483-4154
Return to:	Kim Marie Schrader-Eberspacher	Home RE 4501 S. 86th Lincoln, NE	430-9019 / 436-3199 (Fax)

Signature of Applicant Scott A. Meyer Address 8041 Trendwood Dr Lincoln, NE 68506 Date 6/29/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 07/07/05 Amount 200.00 Check No. 5799 Initials JS

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 7/11/05

RURAL WATER

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☐ ___/ml	☐ ___/ml
Nitrate	☐ ___ppm	☐ ___ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: IF THE SEPTIC TANK HAS NOT BEEN PUMPED IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT

WATER SYSTEM: Approved ☐ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

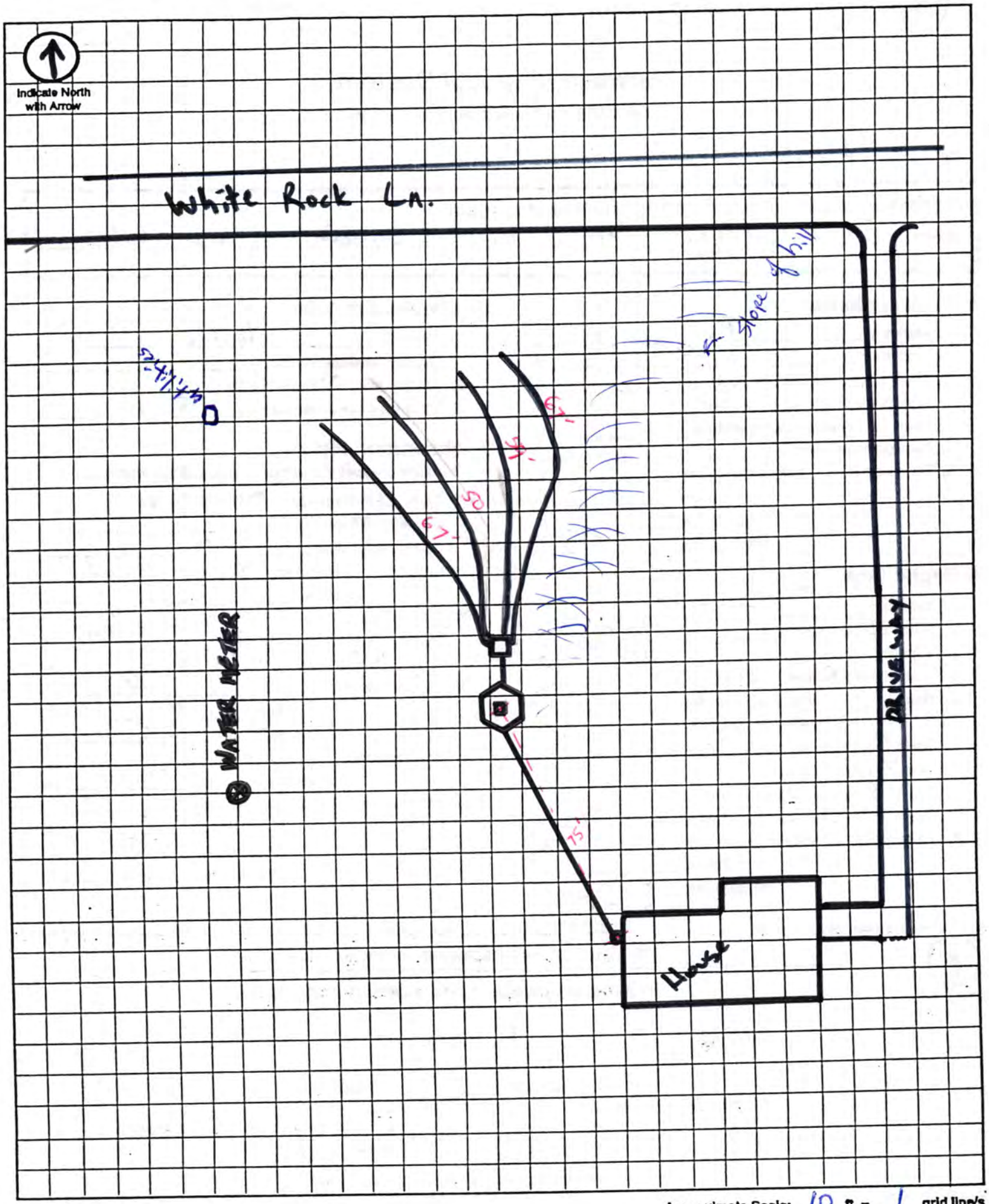
Approved by Jerrold C. Hood R.E.H.S. Date 7/11/05

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

As Built Drawing



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

AS BUILT DRAWING OF SYSTEM

DATE _____ INSTALLER Norman Plbg.

