Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 01380238201

Issued 10/12/01
Expires 04/12/02
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Establishment

B & K ENTERPRISES INC
T8N R7E SEC 8
SOUTH CREEK ESTS LOT 4
4320 SPENCER LN-ROCA

Permittee

B & K ENTERPRISES INC
6210 S 57 ST
APT B
LINCOLN NE 68516

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

000173

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

A

Permit Number:

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 4320 SPENCER LANE (no rural route) City ROCA NE, Zip 68430

Legal Description 8 (1/4) 8N (1/4) 7E (Section, Township, Range) South Creek Estates (Subdivision) 4 (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 B+K Enterprises Inc Signature John Hauck

Address 6210 So 57th City/State/Zip Lincoln ne 68516

☐ Check if owner designed system Home Phone 420-2950 Work Phone 480-8915

C. Contractor

Name _____ Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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 10/12/01 Date frwd 10/12/01 **ACTION** ☒ Approved ☐ Disapproved Signature Gerald C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10/11/01 Date frwd 10/11/01 **ACTION** ☒ Approved ☐ Disapproved Signature Mike Dekalb by jm
3. **City or County Engineer** Date rec'd 12/10/01 Date frwd 12/10/01 **ACTION** ☒ Approved ☐ Disapproved Signature

10/16/01 L.C.H.

Installation Final Written Approval

By _____

Date _____

Business Office Use Only

Date Rec'd 10/12/01
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 1809

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

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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 4320 Spencer Ln. (no rural route) City Roca NE, Zip 68430

Owner B & K Enterprises Inc Addresss 6210 S. 57th

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

Date of Tests 4-26-01 to 4-27-01 Weather: Precipitation _____ Temperature 85°

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	4-26	5:30 pm	4-27	6:00 am	4-27	8:30	14 3/4	4-27	3:50	30	2 1/4	13 MIN/IN
2								16 3/4				1	30 MIN/IN
3								11				0	
4								15 3/4				3/4	40 MIN/IN
5								14				1 1/2	20 MIN/IN
6								19 1/2				1/2	60 MIN/IN
7								16				1 1/4	24 MIN/IN
8								15				3/4	40 MIN/IN

Person Conducting Percolation Tests

Name: Mundhenke Trenching

Phone: (402) 641-4756

Address 7183 Van Dorn Rd
Milford NE 68405

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

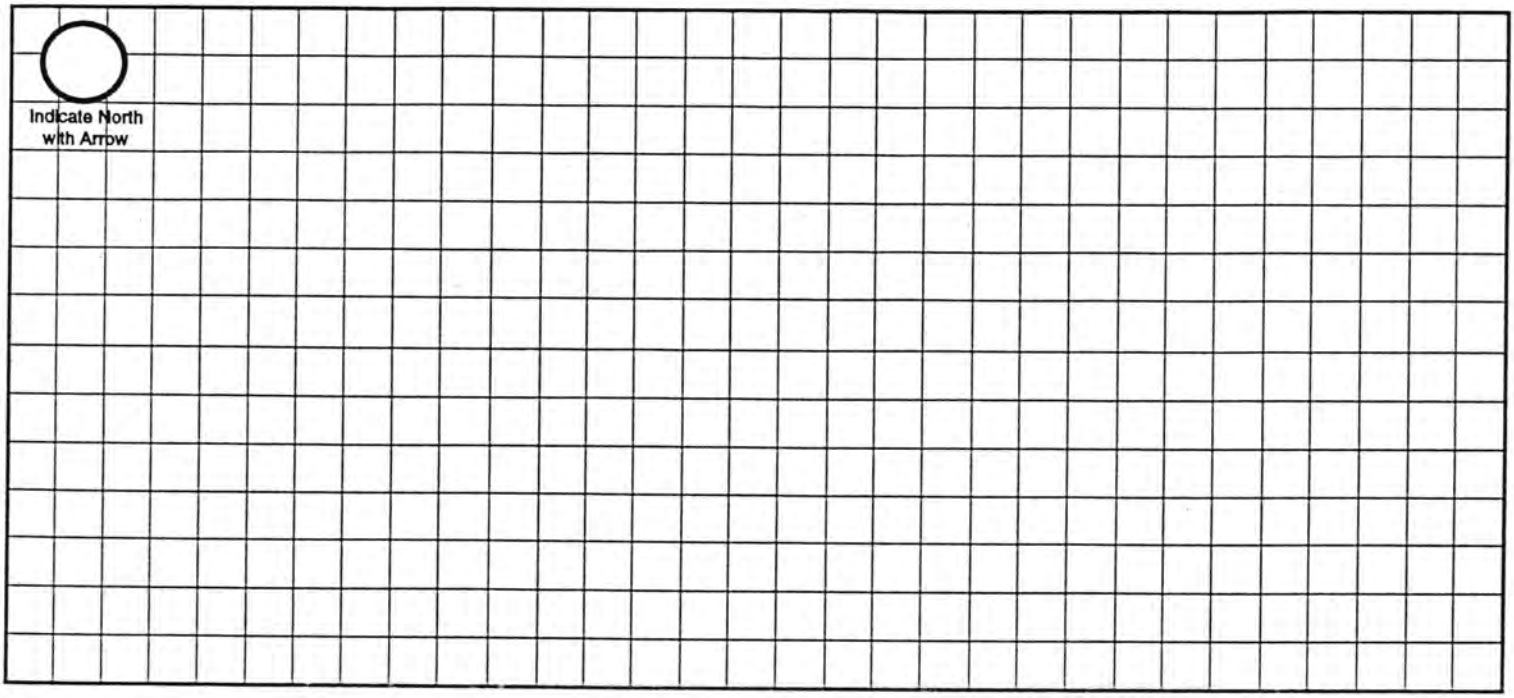
Lincoln-Lancaster County Health Department
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C

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) _____ City _____ NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

Total Square Feet of Field Required: 1050 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 300 ft. Number of Trenches _____ Trench Width 3.5

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 ☐	30 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Barry Fowler Date 10-11-01

Installer Julie Mundhenke for Mundhenke Trenching Date 10-11-01

FORM 23-102 10-96

LEGAL DESCRIPTION

A survey of part of lot 13 I T located in the Southwest Quarter of Section 8 Township 8 North Range 7 East of the Sixth P M and all of lot 34 I T located in the Southeast Quarter of Section 7 Township 8 North Range 7 East of the Sixth P M Lancaster County Nebraska More particularly described by metes and bounds as follows

Commencing at the Center of Section 8 Township 8 North Range 7 East of Sixth P M Lancaster County Nebraska Thence South 00-07-29 East (an assumed bearing) on the East line of the Southwest Quarter of said Section 8 a distance of 968 89 Thence South 89-44-02 West on the South line of Lot 13 I T a distance of 50 00 feet to the **POINT OF BEGINNING**; Thence continuing on the said bearing South 89-44-02 West on the South line of Lot 13 I T a distance of 1604 55 feet Thence South 89-52-43 West on said South line a distance of 80 76 feet Thence North 00-07-28 West a distance of 23 65 feet Thence North 89-47-57 West of the South line of lot 13 I T located in Section 8, and the South line of lot 34 I T located in Section 7 a distance of 1015 19 feet to a point on the Easterly Right of Way of the Chicago Burlington, and Quince Railroad. Thence North18-36-49 West on said Right of Way a distance of 960.00 feet to a point on the said Easterly Right of Way and the North line of Lot 34 I T. Thence North 89-15-49 East on the said North line of lot 34 I T a distance of 1133.32 feet to the Northwest corner of the Southwest Quarter of Section 8; Thence North 88-53-23 East on the North line of said Southwest Quarter a distance of 1378.08 feet to a point on said North line, Thence South 75-59-22 East a distance of 345 02 feet to a point 90 feet South of the North line of the Southwest Quarter. Thence North 88-53-23 East and parallel to the North line of said Southwest Quarter a distance of 401.91 feet Thence South 71-08-56 East a distance of 506 86 feet; Thence South 00-07-29 East a distance of 729 08 feet to the **POINT OF BEGINNING**, and containing a calculated area of 3,297,076 46 square feet or 75 690 acres more or less

