LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380188501

Issued 11/04/98
Expires 05/04/99
Revenue Code 3157

FEES: $150.00

PAID

Establishment
LEE GROSSMAN
T8N R7E SEC 8
QUARRY LOT 3
5101 QUARRY LEDGE RD-ROCA

TOTAL $150.00

Permittee
LEE GROSSMAN
2740 WOODSDALE BLVD
LINCOLN NE 68502-5046

Issued By Health Director
Lincoln-Lancaster County Health Department

008262

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

SEP 1 8 1998

A

Permit Number: 1

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

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 5101 QUARRY LEDGE ROAD (no rural route) City ROCA NE, Zip

Legal Description 8 TBN 7E QUARRY 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 LEE GROSSMAN Signature Lee Grossman

Address 2740 WOODSDALE BLVD City/State/Zip LINCOLN NE 68502

☐ Check if owner designed system Home Phone 402-421-2507 Work Phone 402 420 6060

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 5 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 8/20/98 Date frwd 8/21/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Rood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd Date frwd ACTION ☒ Approved ☐ Disapproved Signature Michael Dekalb Mgr
3. **City or County Engineer** Date rec'd 10/01/98 Date frwd ACTION ☒ Approved ☐ Disapproved Signature

7/16/99 Need fence & signs, etc. J.C.H.

Installation Final Written Approval

By Jerrold C. Rood R.E.H.S.

Date JULY 27, 1999

Business Office Use Only

Date Rec'd 8/21/98

Amt Paid 150.00

Rec'd By CW Cash/Check No. 1368

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

LOT 3 THE QUARRY

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

Owner LEE GOSSMAN Addresss 2740 WOODSDALE, LINCOLN 68502

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: _____ min./inch

Date of Tests 6/21/98 to 6/22/98 Weather: Precipitation 3 inch Temperature 80

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	32	6/21	9:00	6/22	10:00	6/22	10:30	6	6/22	11:00	30	5/8	48 MIN/IN
2	"	"	"	"	"	"	"	"	"	"	"	3/4	40 MIN/IN
3	"	"	"	"	"	"	"	"	"	"	"	5/8	48 MIN/IN
4	"	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN
5	"	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN
6	"	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN

Sum of Percolation Rates: 53

Average of Rates: _____

Rate Used for Calculation: _____

Person Conducting Percolation Tests

Name: J GAGNER

Phone: _____

Address _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date AUGUST 21, 1998

FORM 23-101 10-96

LOT 3 THE QUARRY

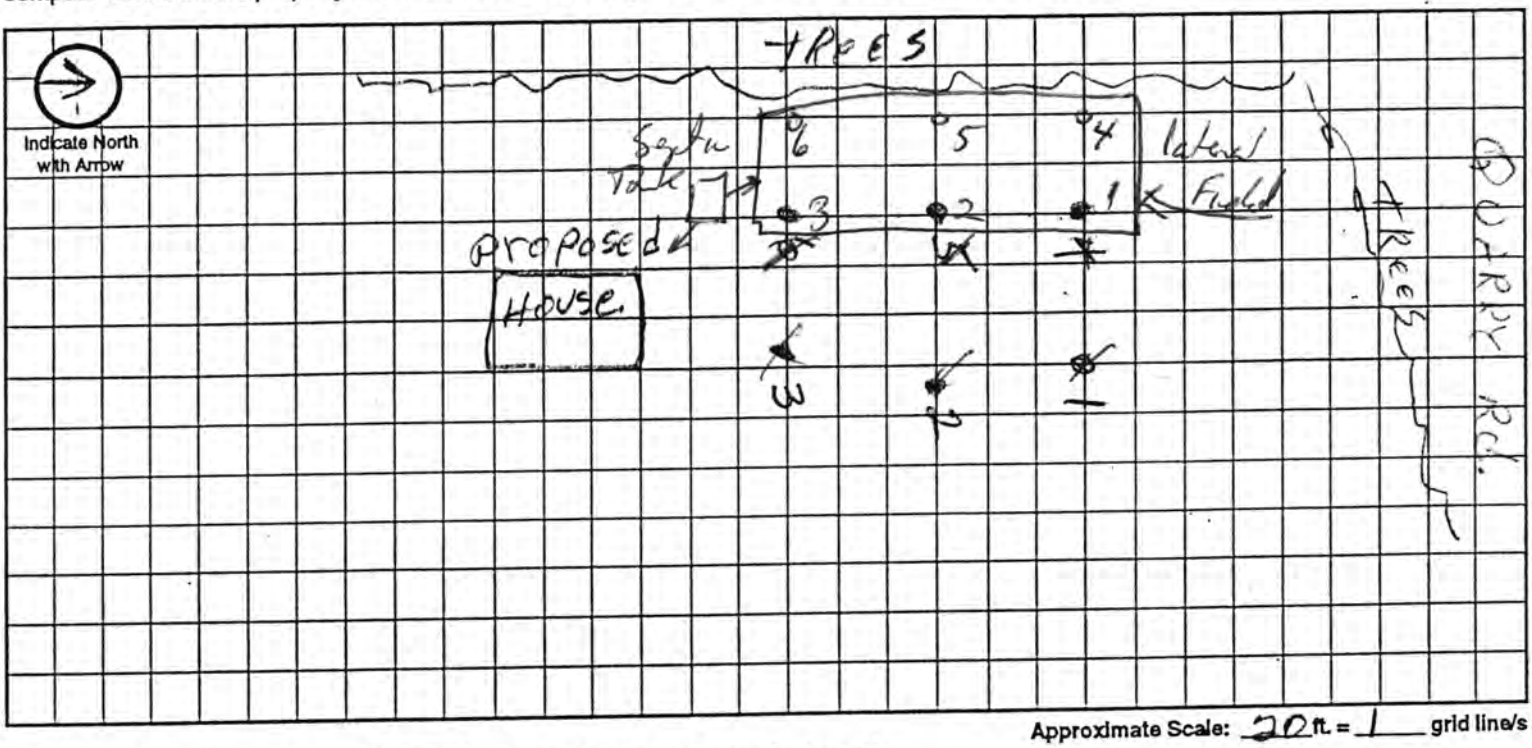
C

Lincoln-Lancaster County Health Department
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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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) _____ City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 53 (min. per inch) Soil Type: WTC 2 Land Slope: 2 %

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

Total Square Feet of Field Required: 1563 sq. ft. ?

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: In filtrator

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

Total Length of Laterals 991 ft. Number of Trenches 4 Trench Width 4'

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

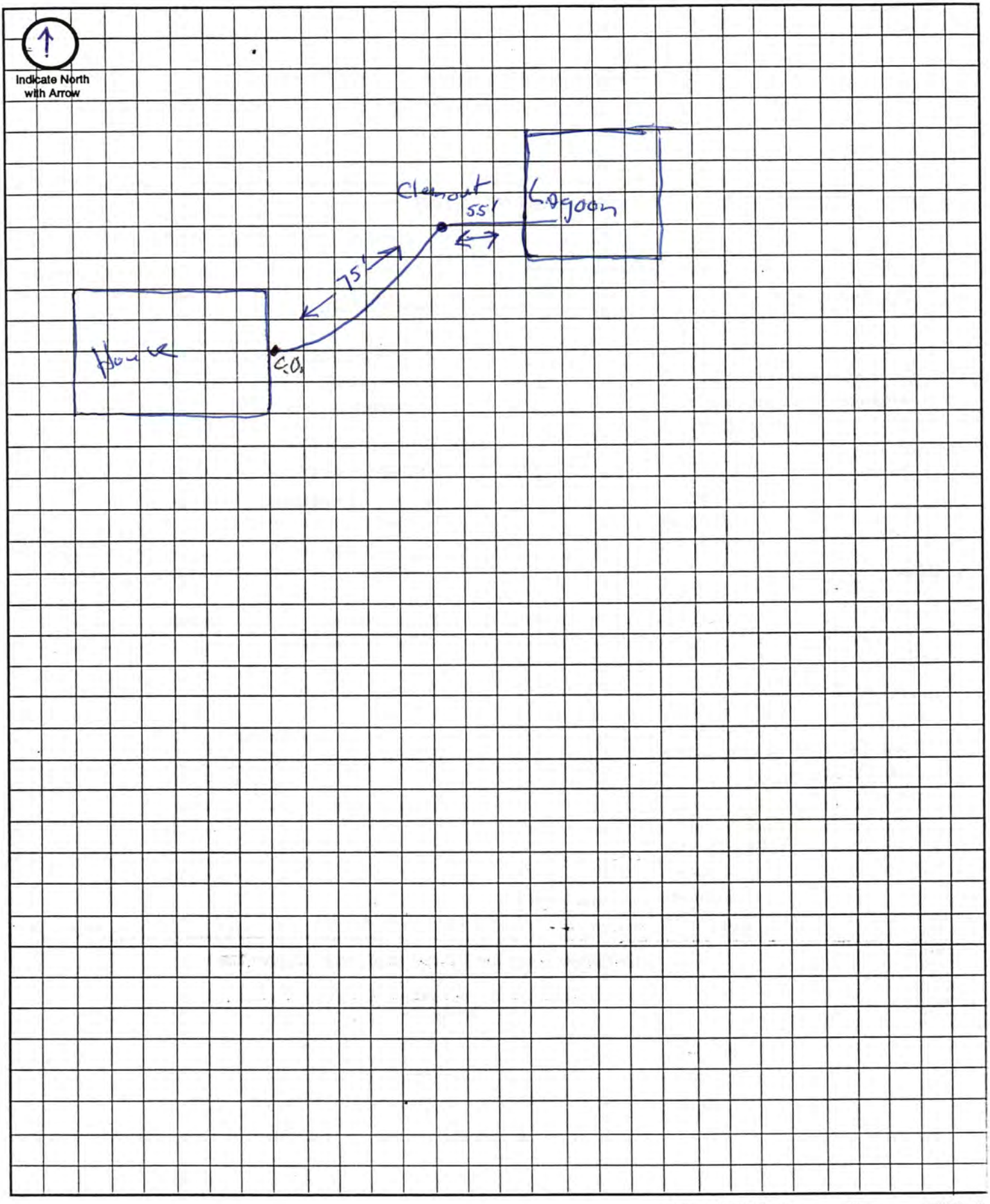
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☐	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐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

E. Required Signatures

Home Building Contractor Timothy J Moran Date 8-12-98

Installer Brad Smith Date 8-12-98

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line/s