Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

003270

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380275501

Issued 12/01/03
Expires 06/01/04
Revenue Code 3157

Establishment: FOWLER CUSTOM HOMES
T8N R7E SEC 8
SOUTH CREEK ESTS LOT 8
3901 NICHOLAS CT-ROCA

FEES: $200.00

Permittee: FOWLER CUSTOM HOMES
1233 INFINITY CT
LINCOLN NE 68512

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

DEC 4 2003

A

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

Permit Number: 03380275S

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 3901 Nicholas Court (no rural route) City Roca NE, Zip 68430

Legal Description 8 (1/4) 8N (1/4) 7E (Section, Township, Range) South Creek Estates (Subdivision) (Addition) 8 (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 _____ Signature _____

Address _____ City/State/Zip _____

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Fowler Custom Homes Company Name Fowler Custom Homes

Address 1233 Infantry Court City/State/Zip Lincoln Ne 68512

☐ Check if contractor designed system Work Phone 402-420-2950

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

Designer Name [signature] Firm Ernest Weil Work Phone 402-761-2281

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 11/26/03 Date frwd 12/12/03 ACTION ☐ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12/12/03 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature [signature]
3. **City or County Engineer** Date rec'd 12-12-03 Date frwd 12-12-03 ACTION ☒ Approved ☐ Disapproved Signature Jim Peugh

Must be above flood plain JP.

Installation Final Written Approval

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

Date DECEMBER 18, 2003

Was short 50' 12/17/03 J.C.H.

Business Office Use Only

Date Rec'd 12/01/03

Amt Paid 200.00

Rec'd By [signature] Cash/Check No. 1208

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

B

SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section _____
Township _____ Range _____
1/4 Section _____

Owner: Fowler Custom Homes
Address: 3901 Nicholaus Court

Property Dimensions: _____ acres

Soil Type: Silty Clay ____ Silty Clay Loam ____ Sandy Loam ____ Silty Loam ____ Clay Loam X Sandy Clay ____

Dates of Tests: 11-9-03 to 11-10-03. **Weather:** Precip. Ø Temp. 40's

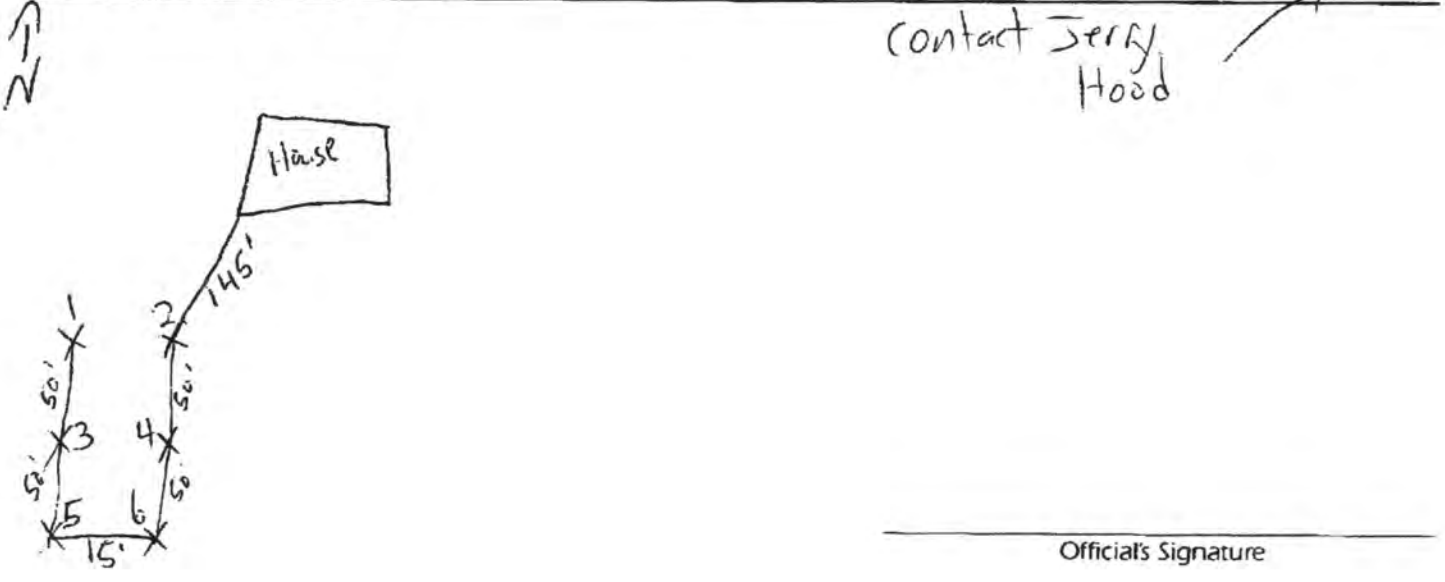
a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
		Pre-Saturation Period				Percolation Readings					Results	
		Start		End		Start			End			Water
	Hole	Date	Time	Date	Time	Date	Time	Water	Time	Water	Elapsed	Level
Hole	Depth	(Mo.	(Hr.	(Mo.	(Hr.	(Mo.	(Hr.	Level	(Hr.	Level	Time	Drop
No.	(in.)	Day)	Min.)	Day)	Min.)	Day)	Min.)	(in.)	Min.)	(in.)	(Min.)	(in.)
1	36	11-9	8:30am	11-9	12:30pm	11-10	7:15am	6	7:45am	5½	30	½
2	36	11-9	8:30am	11-9	12:30pm	11-10	7:20am	6	7:50am	5¼	30	¾
3	36	11-9	8:30am	11-9	12:30pm	11-10	7:25am	6	7:55am	5¼	30	¾
4	36	11-9	8:30am	11-9	12:30pm	11-10	7:30am	6	8:00am	5¼	30	¾
5	36	11-9	8:30am	11-9	12:30pm	11-10	7:35am	6	8:05am	5	30	1
6	36	11-9	8:30am	11-9	12:30pm	11-10	7:40am	6	8:10am	5	30	1

Sum of Water Level Drops (in.) [Column m]: 4¾
Average of Water Level Drops (in.) [Column m]: _____
Inches per Minute: 60

PERSON CONDUCTING TEST:
Name: Justyn Peterson
Address: 742 1st Street
Milford, NE 68405
Phone: (402)-761-4414
Signature: Justyn L. Peterson

Square Feet of Lateral per Bedroom: _____

SKETCH SHOWING HOLE LOCATION:



Official's Signature

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

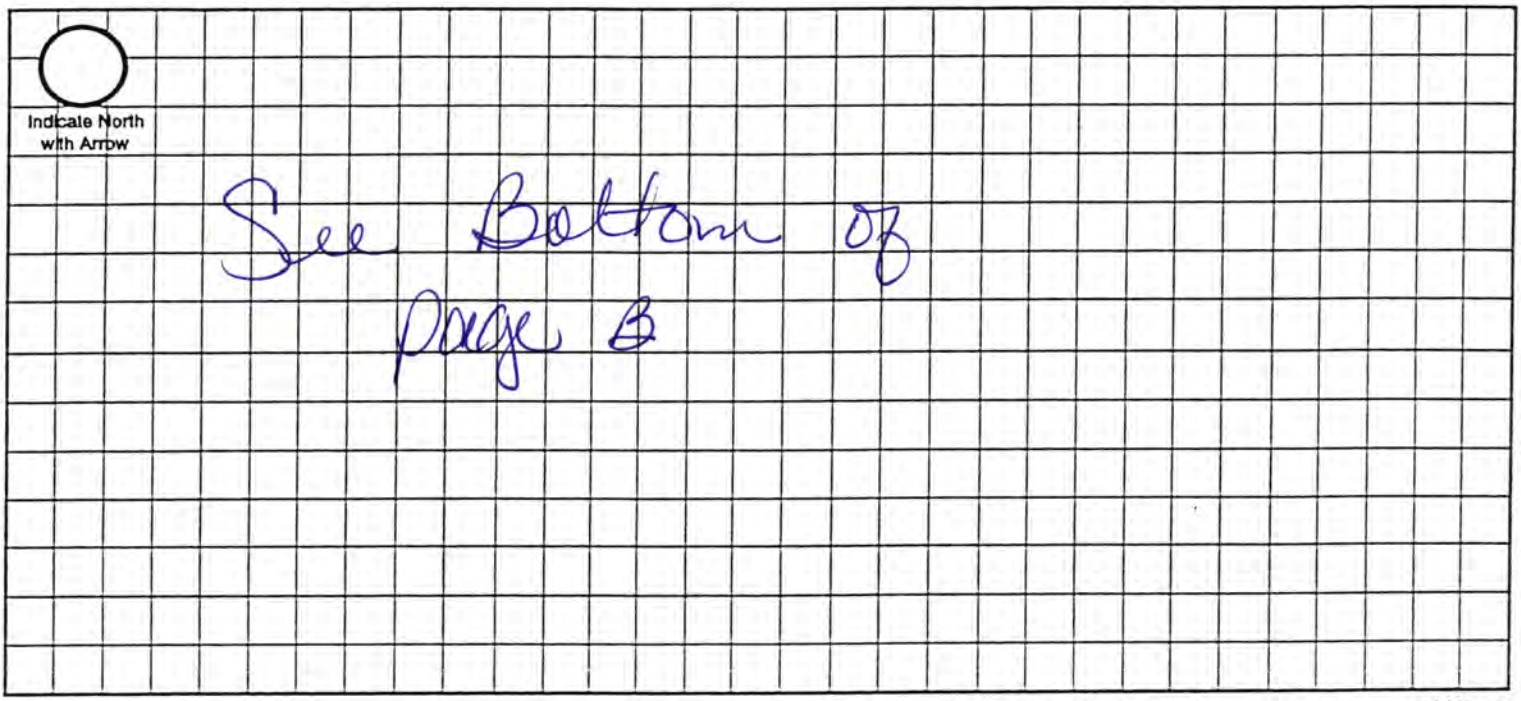
C

Permit Number: 033802755

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) 3901 Nicholas Court 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 60 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

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

Total Length of Laterals 350 ft. Number of Trenches _____ 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 Fowler Custom Homes Date 11/10

Installer _____ Date _____

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 12/17/03

System Location (indicate correct number and street)
Address 3401 Nicholaus Court (no rural route) City Roca NE, Zip 68430

A. Building Sewer
1. Material: 4" PVC Pipe 160 SDR26
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 48 in.
3. Distance between dwelling and septic tank: 66 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 200 ft.
   stream 150 ft.
   pressure line 70 ft.
   property line 400 ft.

B. Septic Tank
1. Material: Plastic
   Number of compartments: 1
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 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 300 ft.
   Stream 200 ft.
   Pressure line 70 ft.
   Property line 300 ft.

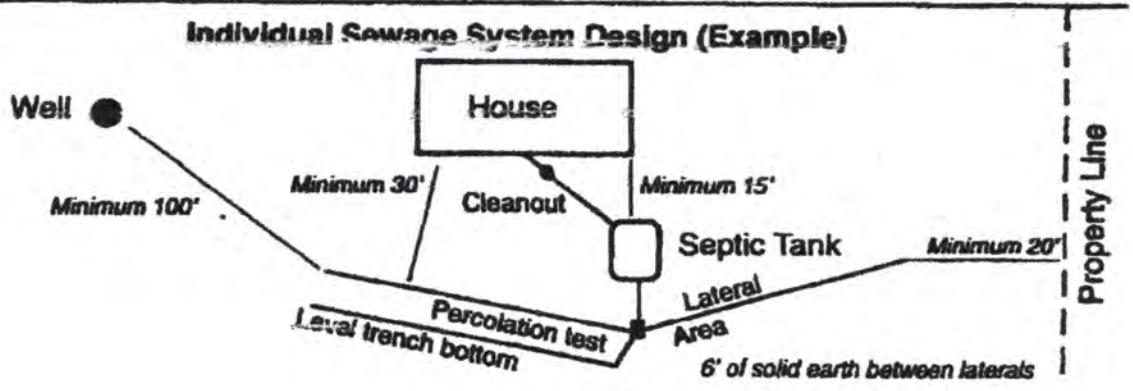
C. Distribution Box
1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8 ft.

D. Absorption Field
(Provide as-built drawings on back of this form)
1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 35"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 101.28 ft. 101.28 ft.
   101.28 ft. 50.64 ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 1 in/100 ft.
   Average depth 36 in
4. Filter material: Native Clay
   Depth of material NA in.
5. Distances to: Well or suction line 100 ft.
   Stream 75 ft.
   Pressure line 80 ft.
   Property line 50 ft.

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

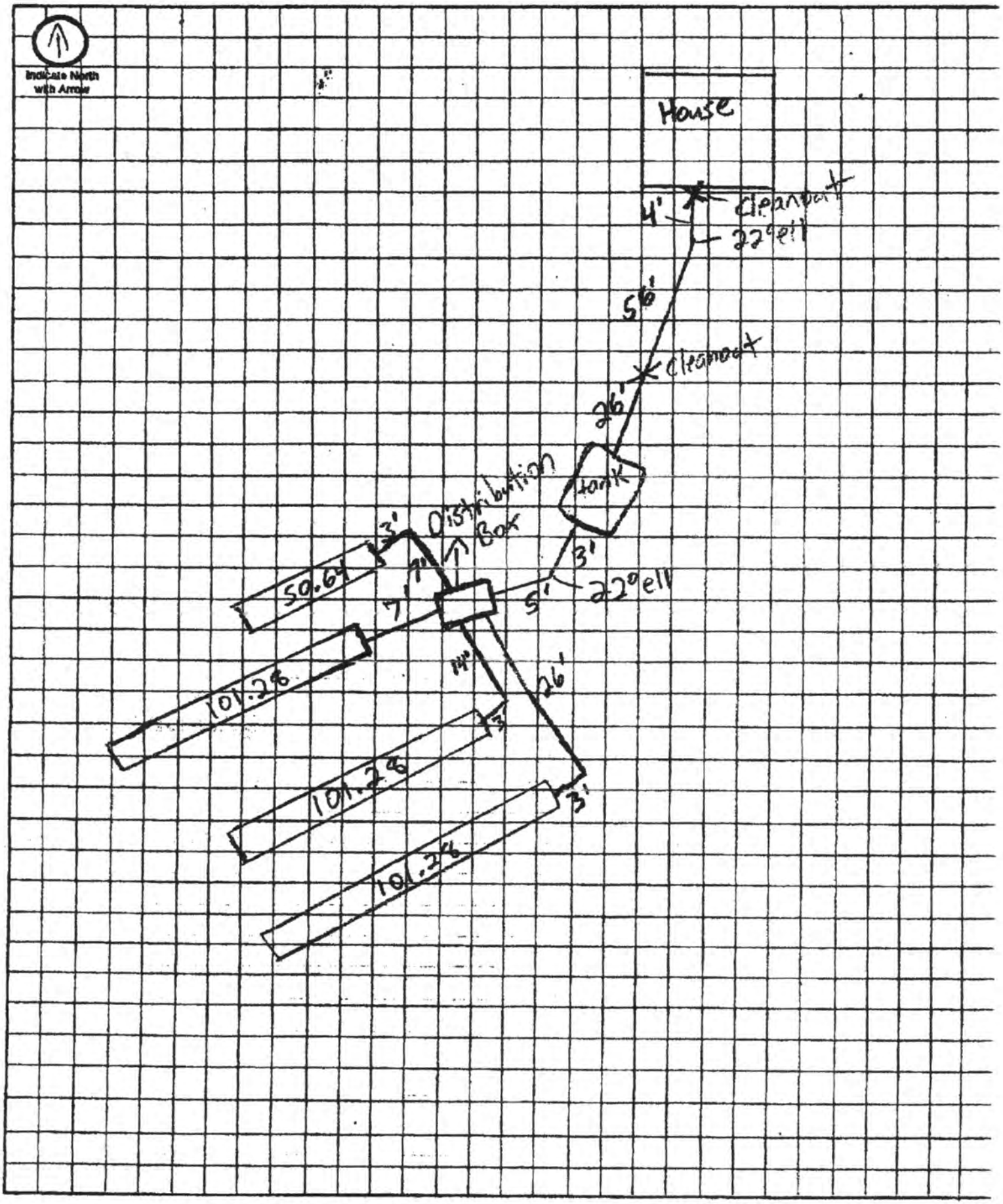
Indicate North with Arrow

Individual Sewage System Design (Example)



RM 23-103 10-96

As Built Drawing



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