Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 02380256101

Issued 10/16/02
Expires 04/16/03
Revenue Code 3157

Establishment
DAVID FAIRBANKS
T8N R7E SEC 17 QTR SE
LOT 103
15901 S 54 ST-ROCA

FEES: $200.00

TOTAL: $200.00

Permittee
DAVID FAIRBANKS
BOX 88
ROCA NE 68430

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

003037

OCT 1 6 2002

A

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

Permit Number: 02380256

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 15901 S 54th (no rural route) City Roca NE, Zip NE

Legal Description LOT 103 SE¼ 17 - 8N - 7E Parcel # 15-17-400-010-000
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 DAVID Fairbanks Signature David Fairbanks

Address P.O. Box 88 City/State/Zip Roca, NE 68430

☑ Check if owner designed system Home Phone 402-499-9752 Work Phone 402-499-9752

C. Contractor

Name DAVID Fairbanks Company Name Homestead Log Homes, LLC

Address 1740 Windham Dr City/State/Zip Estes Park, CO 80517

☑ Check if contractor designed system Work Phone 402-499-9752

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 4 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day 600 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 10/16/02 Date frwd 10/23/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10-9-02 Date frwd 10-9-02 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 10-23-02 Date frwd 10-23-02 ACTION ☒ Approved ☐ Disapproved Signature _____

1/10/03 Need drawing of lift.

Installation Final Written Approval

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

Date MAY 12, 2004

Business Office Use Only

Date Rec'd 10/16/02

Amt Paid 200.00

Rec'd By _____ ~~Cash~~/Check No. 1077

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

OCT 1 6 2002

B

Permit Number: 023802561

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

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 15901 S 54th (no rural route) City Roca NE, Zip 68430

Owner DAVID Fairbanks Address P.O. Box 88 Roca, NE 68430

Soil Type (SCS): clay / clay loam Percolation Rate: 53.5 min./inch

Date of Tests 10/5/02 to 10/6/02 Weather: Precipitation 1/2" Temperature 60's/50's

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 PM		End PM		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	37	10/5	1:05	10/5	7:10	10/6	12:50	6"	10/6	4:50	240	3 3/4	64
2	37	10/5	1:08	10/5	7:11	10/6	12:52	7"	10/6	4:52	240	5	48
3	36	10/5	1:11	10/5	7:12	10/6	15:54	6"	10/6	4:53	240	3 3/4	64
4	37	10/5	1:13	10/5	7:14	10/6	12:56	8 1/2"	10/6	4:54	240	4	60
5	37	10/5	1:15	10/5	7:16	10/6	12:59	8 1/2	10/6	4:55	240	3 1/2	48
6	36 1/2	10/5	1:18	10/5	7:17	10/6	12:61	7"	10/6	4:56	240	4	60
7	36	10/5	1:20	10/5	7:18	10/6	12:63	6 1/2	10/6	4:58	240	4	60
8	35	10/5	1:22	10/5	7:19	10/6	12:64	6	10/6	4:59	240	3 1/2	48
9	36	10/5	1:24	10/5	7:20	10/6	12:65	6	10/6	5:00	240	8	30

Sum of Percolation Rates: 482

Average of Rates: 53.5

Rate Used for Calculation:

Person Conducting Percolation Tests

Name: DAVID Fairbanks

Phone: 402-499-9752

Address P.O. Box 88
Roca, NE 68430

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

OCT 1 6 2002

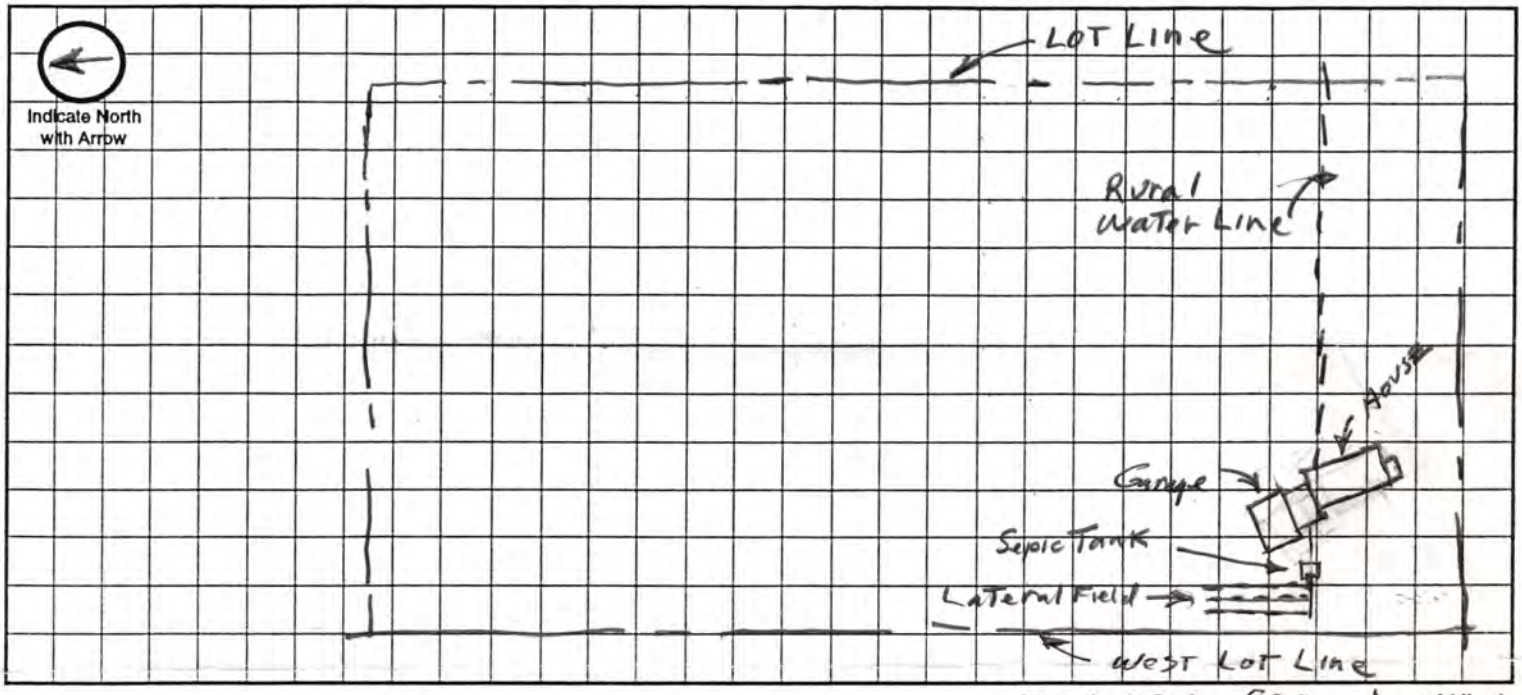
C

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Permit Number: 023802561

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: 50 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 15901 S 54th 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 54 (min. per inch) Soil Type: Clay loam Land Slope: _____ %

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

Total Square Feet of Field Required: ~~2300~~ 1400 sq. ft.

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

Capacity of Septic Tank ~~1500~~ 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals ~~100~~ 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 _____ Date _____

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D

Permit Number: 023802561

Sewage Disposal System
As Built Plans & Specifications

MAY 12 2004

Date _____

System Location (Indicate correct number and street)

Address 15901 S 54th ST (no rural route) City Roca NE, Zip 68430

A. Building Sewer

1. Material: PVC
   Diameter: 4" ϕ in.
2. Distance above basement floor: N/A, in.
   or distance below basement floor: 2'-6" in.
3. Distance between dwelling and septic tank: 75 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line N.A ft.
   stream N.A. ft.
   pressure line 100 ± ft.
   property line 32 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: one
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter over Center in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade even in. w/ Grade - 18"
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line N.A ft.
   Stream N.A ft.
   Pressure line N.A ft.
   Property line N.A. ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 6 ft.

D. Absorption Field

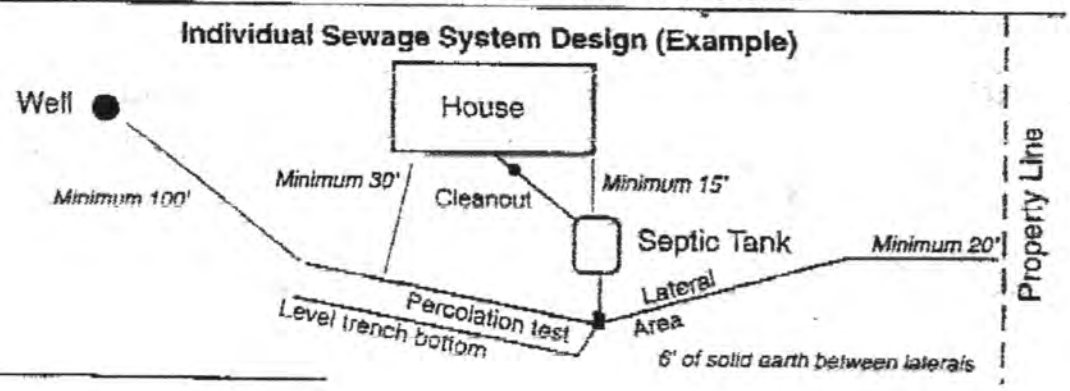
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 24" Chambers
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 90 ft. 96 ft.
   90 ft. 96 ft., _____ ft.
3. Trench dimensions: Width 4 FT ft.
   Slope 0 in/100 ft.
   Average depth 2'-3" in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line N/A ft.
   Stream N.A ft.
   Pressure line N.A ft.
   Property line 32 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



RM 22-103 10-96

ATTN: Jerry Hood 441-6206

From: Dave Fairbanks / RR Roca, NE

Re Sewer System @ 15901 S 54th Roca, NE 68430

Final Test readings @ Test holes - per your request.

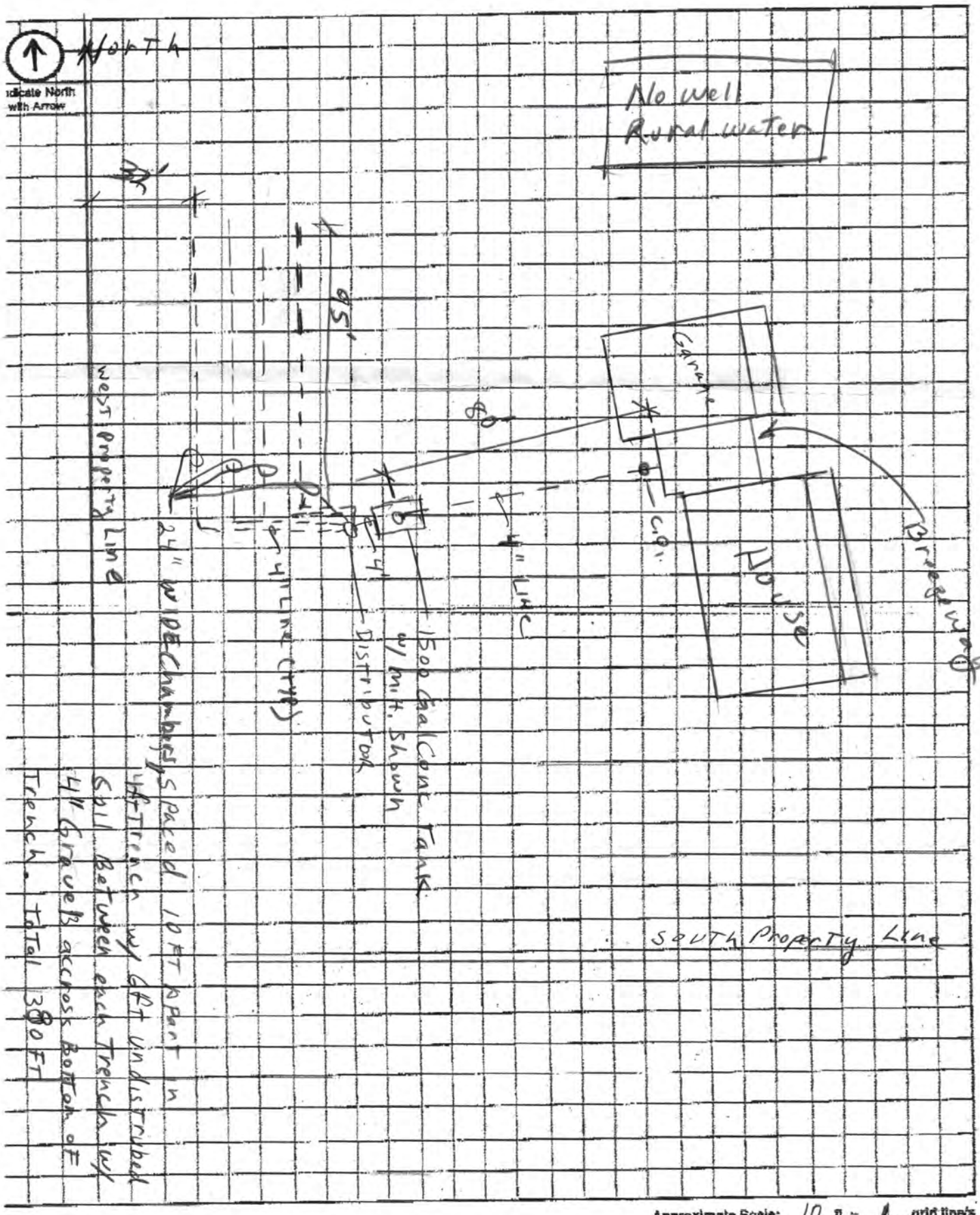
Hole #	Time (Last 30 min) Initial	Begin Reading	End Reading	in drop/H2O		in/min
1	4:10	2"	1 1/2	1/2	.50	60
2	4:12	3 7/8	3 1/4	5/8	0.63	47.6
3	4:13	1 1/2	1	1/2	0.50	60
4	4:14	3 1/4	2 3/4	1/2	0.50	60
5	4:15	4 7/8	4 1/2	3/8	0.38	79
6	4:16	4"	3 1/2	1/2	0.50	60
7	4:17	3"	2 1/2	1/2	0.5	60
8	4:18	2 7/8	2 1/2	3/8	0.38	79
9	4:20	3 3/4	2 3/4	1	1"	30
						535.6
				Avg =		59.5

Jerry, Sorry about delay at Intro, had to go to Cola & get wire.
Any Ques. Call me @ 402-499-9752

We had very wet weather, may not make any diff, but had about 2 1/2-3" Rain when we dug first set of holes, so had to dig second set of holes near 1st, had about 1/2" rain between re-soak & Test.

Dave Fairbanks

s Built Drawing



Scale: 1" = 40 FT.