Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

009846

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 06380329101

Issued 12/20/06
Expires 12/20/07
Revenue Code 3157

Establishment

ZLAB/TROYER CONSTRUCTION INC
T8N R7E SEC 19
WHITETAIL RIDGE ADDN LOT 12
16450 REEHL PL-ROCA

FEES: $290.00

Permittee

ZLAB/TROYER CONSTRUCTION INC
9055 TURNBERRY CIR
LINCOLN NE 68526-9236

TOTAL: $290.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 06380329101

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 16450 Reehl Place (no rural route) City Roca NE, Zip NE

Legal Description LCR 5914 — 1/4 — 1/4 — Section 19 — Township 8 — Range 7 — Subdivision Whitetail Ridge — Addition — Block 12 — Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Jon & Cindy Miller Signature _____

Address _____ City/State/Zip _____

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

C. Contractor

NCR 71604 to Magdalena

Name ~~Z-Lab/Troyer~~ Kevin Troyer Company Name Z-Lab/Troyer Construction Inc.

Address 9055 Turnberry Circle City/State/Zip Lincoln, NE 68526-9236

☐ Check if contractor designed system NCR 97335 Work Phone 402 430 7429

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

Designer Name Dave Voyt Firm Voyt Excavating Work Phone 560-4267

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

hold plz Nate

Approval Process

☐ Municipal Code 24.38 ☑ County Resolution No. 2832

1. Health Department	Date rec'd 12/20/06 Date frwd 12/20/06	ACTION ☑ ~~Approved~~ ☐ Disapproved Signature _____	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd _____ Date frwd _____	ACTION ☒ Approved ☐ Disapproved Signature _____	
3. City or County Engineer	Date rec'd 12-20-06 Date frwd 12-20-06	ACTION ☒ Approved ☐ Disapproved Signature Jim Plauzh	

Installation Final Written Approval

By _____

Date _____

Business Office Use Only

Date Rec'd 12/20/06

Amt Paid 290.00

Rec'd By _____ ~~Cash~~/Check No. 7411

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

A

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

Permit Number: 06380329101

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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 16450 REEHL Place (no rural route) City ROCA NE, Zip NE

Legal Description 1/4 1/4 Section 19 Township 8 Range 7 Subdivision WHITETAIL RIDGE Addition ADDITION Block 12 Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name JON & CINDY Miller Signature _____

Address _____ City/State/Zip _____

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

C. Contractor

Name ~~Z/AB/TROYER~~ KEVIN TROYER Company Name Z/AB/TROYER CONSTRUCTION INC.

Address 9055 TURNBERRY Ct. City/State/Zip LINCOLN, NE 68526

☐ Check if contractor designed system Work Phone 402 430 7429

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

Designer Name DAVE VOGT Firm VOGT EXCAVATING Work Phone 560-4267

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 12/20/06 Date frwd 12/20/06 ACTION ☑ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 12-20-06 Date frwd 12-20-06 ACTION ☒ Approved ☐ Disapproved Signature Jim Plough

Installation Final Written Approval

By _____

Date 6/27/07

Business Office Use Only
Date Rec'd 12/20/06
Amt Paid 290.00
Rec'd By _____ Cash/Check No. 7411

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

D

Permit Number 063803291

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1614
Phone: 402-441-8022

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Zlab/Troyer

System Location (indicate correct number and street)

Address 16450 REEHL Place City ROCA NE. Zip NE

Lot 12
Owner JON & Cindy Miller (no rural route) Address

Soil Type (SCS): Percolation Rate: 56 min./in.

Date of Tests 8-31 to 9-1 Weather: Precipitation Temperature 60

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 Rate (Min/in)
1	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	5/8	48
2	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	1/2	60
3	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	1/2	60
4	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	1/2	60
5	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	5/8	48
6	30	8-31	7:15	9-1	6:45	9-1	6:45	6	9-1	7:15	30	1/2	60

Sum of Percolation Rates: 336
Average of Rates: 56
Rate Used for Calculation: 56

Person Conducting Percolation Tests

Name Dave Vogt
Phone: 560-4267
Address P.O Box 22253

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

3140 N Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Sewage Disposal System

As Built Plans & Specifications

Date 6-27-07

System Location (Indicate correct number and street)

Address 16450 Reehl Place (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12" in.
3. Distance between dwelling and septic tank: 118' ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 50+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 2
2. Capacity: 2000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☑ above ☐ below grade 4" 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 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50+ ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 4
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 23' ft.

D. Absorption Field

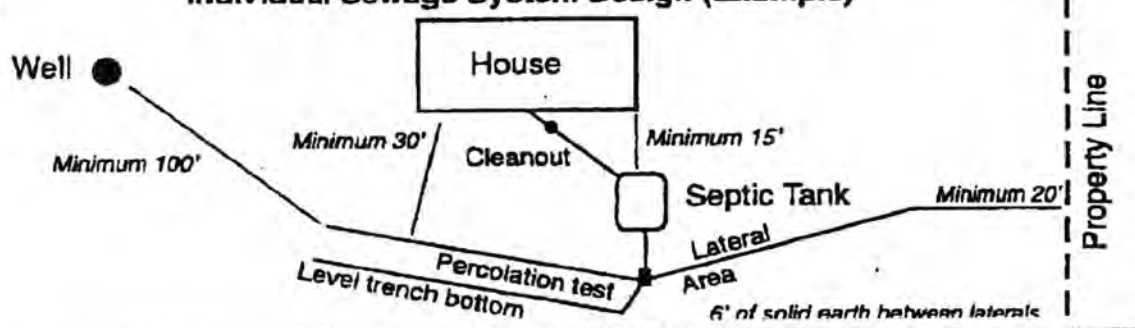
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: Plastic Infiltrator
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other Infiltrator
2. Lateral lines: Number 5
   Length of each line: 86 ft. 86 ft.
   90 ft. 90 ft., 90 ft.
3. Trench dimensions: Width 4' ft.
   Slope 0 in/100 ft.
   Average depth 3' In
4. Filter material: Dirt
   Depth of material 30 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 300+ ft.
   Pressure line 100+ ft.
   Property line 5 ft.

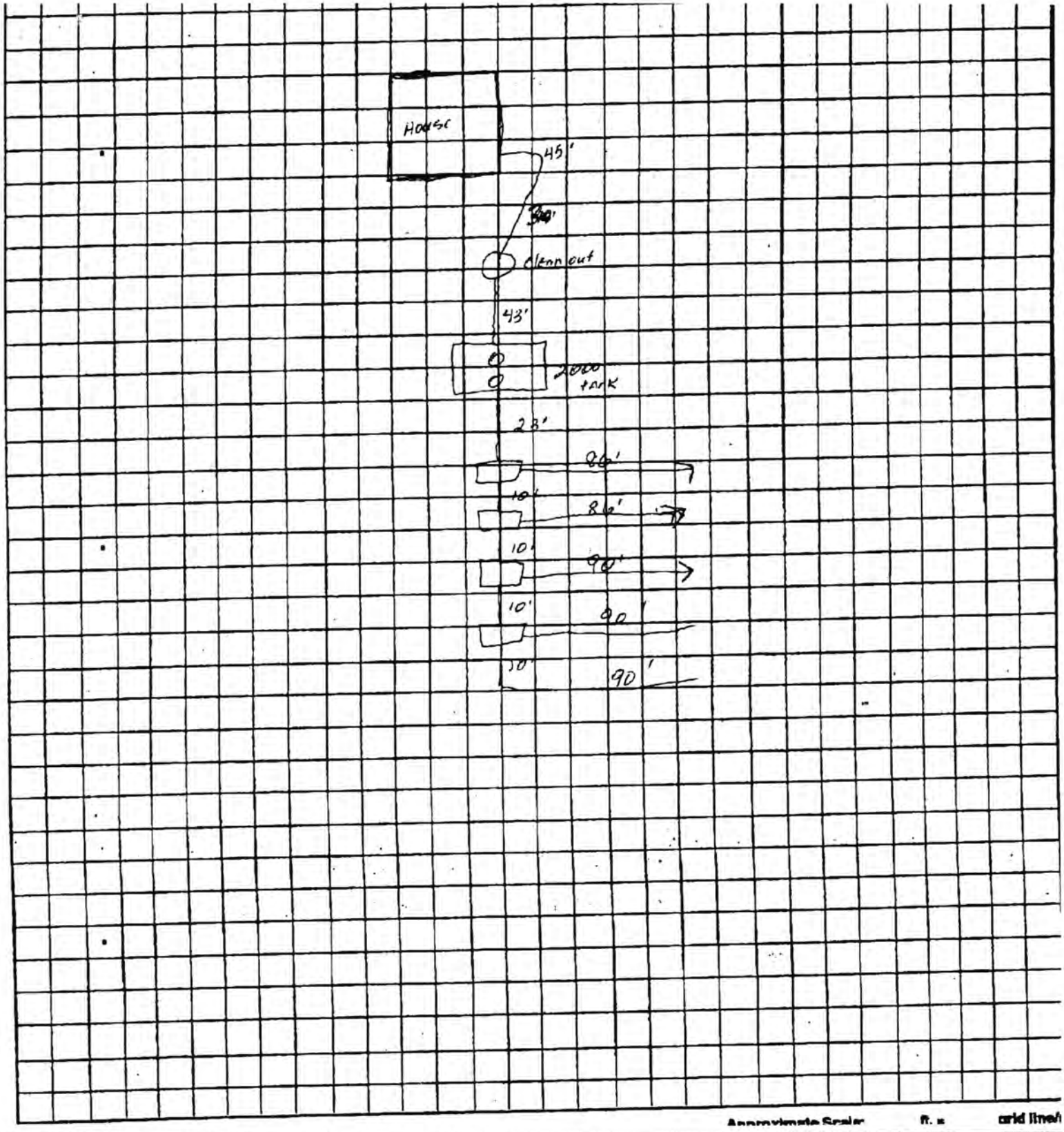
Complete "As Built" drawing on back of this form.

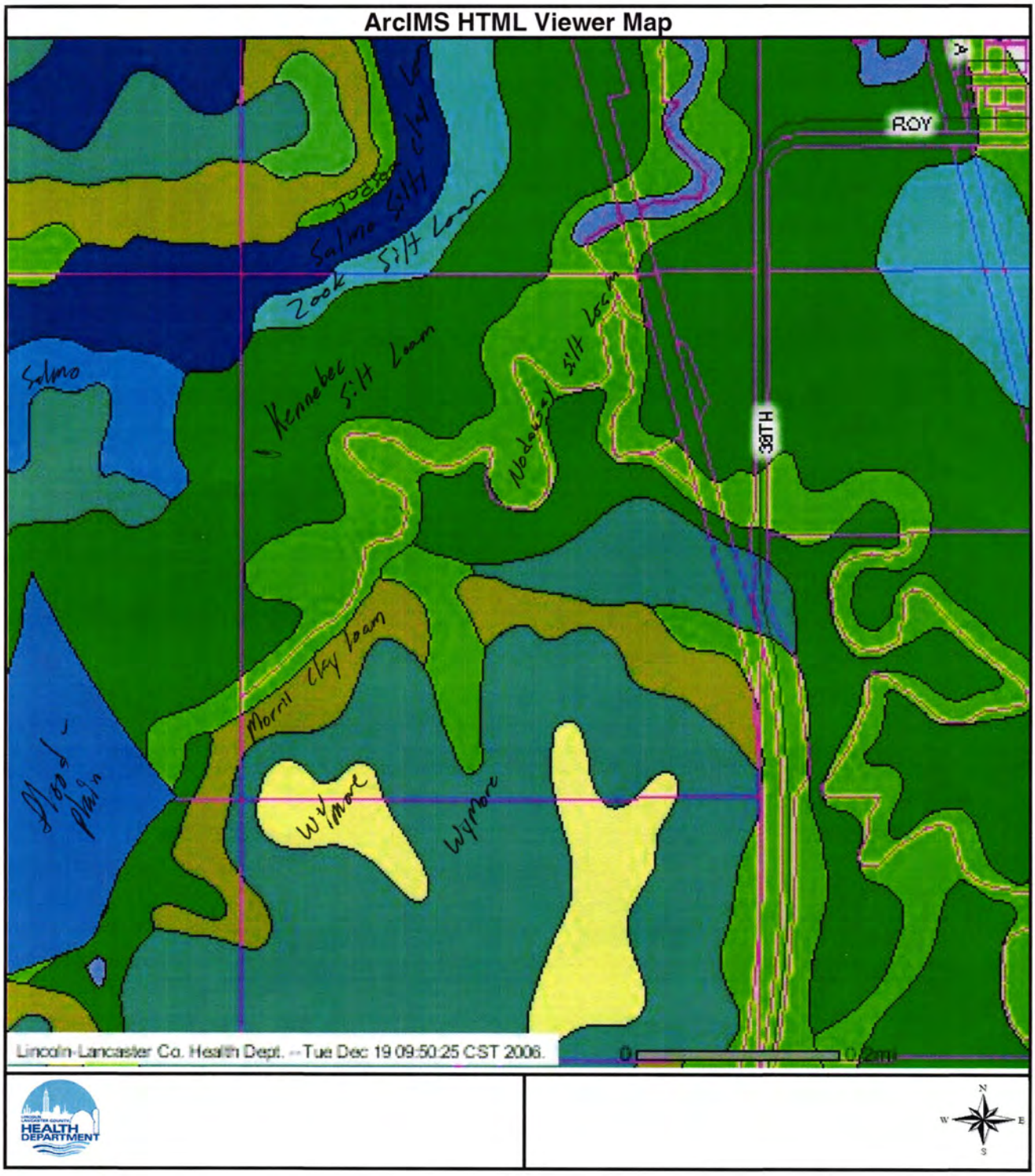
Indicate North with Arrow

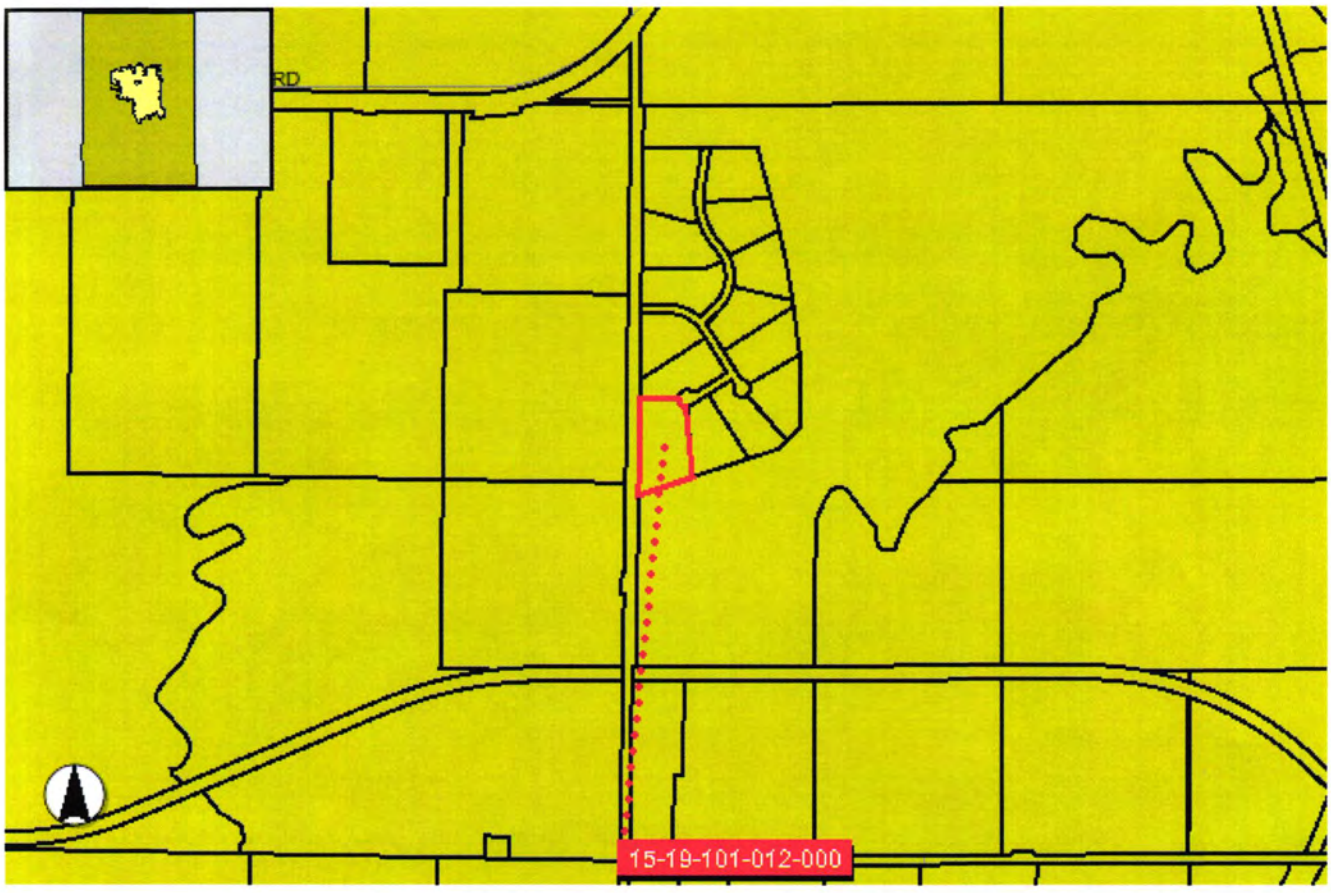
Individual Sewage System Design (Example)



FORM 23-103 10/96


House
45'
Clean out
43'
2000 tank
23'
80'
10'
80'
10'
90'
10'
90'
30'
90'


ArcIMS HTML Viewer Map
ROY
38TH
Salmo
Kennebec Silt Loam
Morril clay loam
Wymore
Lincoln-Lancaster Co. Health Dept. -- Tue Dec 19 09:50:25 CST 2006.
HEALTH DEPARTMENT


RD
15-19-101-012-000