Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

000086

(402) 441-8000

Permit SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380259201

Issued 01/29/03
Expires 07/29/03
Revenue Code 3157

Establishment DLOUHY CONSTRUCTION INC
T8N R7E SEC 22
HICKMAN RIDGE ESTS BLK 1 LOT 16

FEES: $200.00

Permittee RUSSELL R DLOUHY
12500 S 82 ST
ROCA NE 68430

TOTAL: $200.00

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: 03380259201

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 6800 LEISURE PLACE (no rural route) City 1 NE, Zip

Legal Description ~~Lot 16 Block 1~~ Hickman Ridge estates 1 16
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude 32 8N 7E Latitude

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

B. Owner

Name Dlouhy Signature Russell R Dlouhy

Address 12500 S 82 City/State/Zip Roca NE 68430

☐ Check if owner designed system Home Phone 423 9389 Work Phone 560 5545

C. Contractor

Name Dlouhy Company Name Dlouhy Const. Inc.

Address 12500 S 82 City/State/Zip Roca NE 68430

☐ Check if contractor designed system Work Phone 560 5545

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 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 1/29/03 Date frwd 1/29/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 1-29-03 Date frwd 1-29-03 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 1/29/03 Date frwd 1/29/03 ACTION ☒ Approved ☐ Disapproved Signature Don Killeen

5/13/03 J.C.H.

Installation Final Written Approval

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

Date JULY 17, 2003

Business Office Use Only

Date Rec'd 11/29/03
Amt Paid 200.00
Rec'd By cw Cash/Check No. 5860.

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

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

B

Permit Number: 03380292

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address Lot 16 Block 1 Hickman Ridge (no rural route) City _____ NE, Zip _____

Owner Dlouhy Addresss 12500 S 82 Roca NE 68430

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 48 min./inch

Date of Tests _____ to _____ Weather: Precipitation _____ Temperature _____

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"	1-13	2:30 PM	1-14	6:30	1-14	10:30 AM	6	1-14	2:30	30	1	30 MIN/IN
2	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	5/8	48 MIN/IN
3	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	1 1/4	24 MIN/IN
4	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	7/8	34 MIN/IN
5	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	1 3/8	22 MIN/IN
6	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	7/8	34 MIN/IN
7	36"	1-13	2:30	1-14	6:30	1-14	10:30	6	1-14	2:30	30	1 1/2	20 MIN/IN

Person Conducting Percolation Tests

Name: Russ Dlouhy
Phone: 560 5545
Address: 12500 S 82
Roca NE 68430

Sum of Percolation Rates: _____
Average of Rates: 28 MIN/IN
Rate Used for Calculation: 48 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official: Jerrold C. Hood R.E.H.S. Date: JANUARY 29, 2003

FORM 23-101 10-96

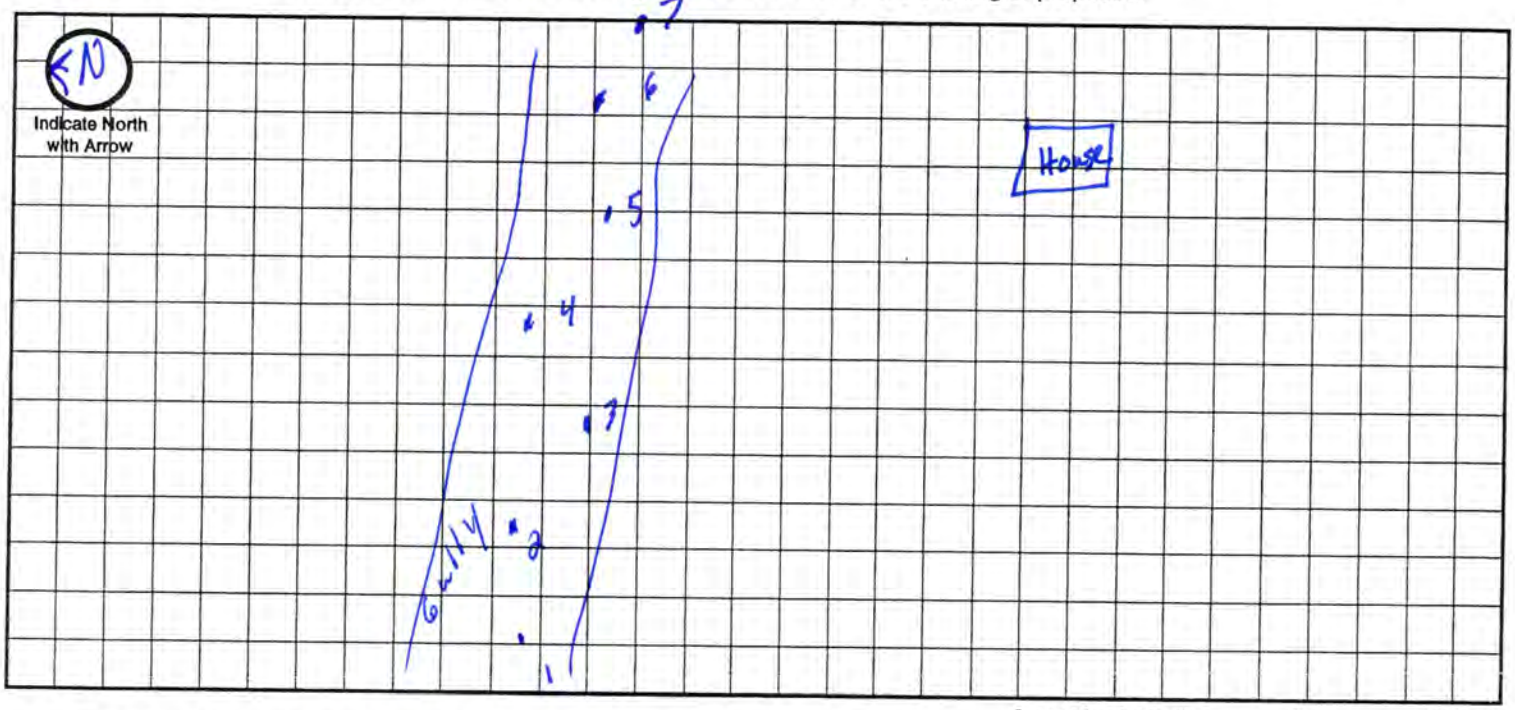
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 033802592

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) Lot 16 Block 1 Hickman Ridge Estates 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 48 (min. per inch) Soil Type: WYMORE SILTY CLAY LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 1320 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 330 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 Russell R Oberby Date 1-27-03

Installer _____ Date _____

FORM 23-102 10-96

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 7-17-03

System Location (Indicate correct number and street)

Address 6800 Leisure Pl. (no rural route) City Hickman NE, Zip 68372

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 18" in.
3. Distance between dwelling and septic tank: 58' ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line [illegible]' ft.
   stream ____ ft.
   pressure line 275' ft.
   property line 300' ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: ____
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☐ above ☐ below grade ____ in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12" in.
8. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line 275' ft.
   Property line 300' ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 32' ft.

D. Absorption Field

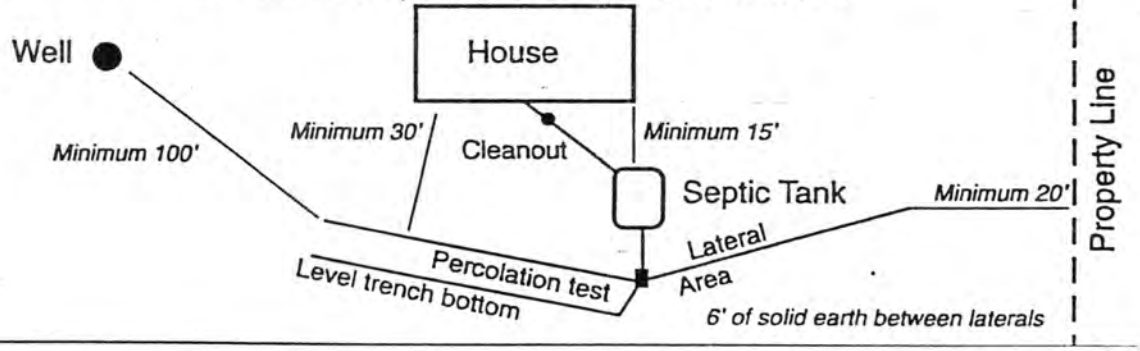
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 24"
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 4
   Length of each line: 100.8 ft. 100.8 ft.
   92.4' ft. 58.8' ft., ____ ft.
3. Trench dimensions: Width 4' ft.
   Slope 1" in/100 ft.
   Average depth 3' in
4. Filter material: Gravel / [illegible]
   Depth of material 18" in.
5. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line 400' ft.
   Property line 200' ft.

Indicate North with Arrow

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

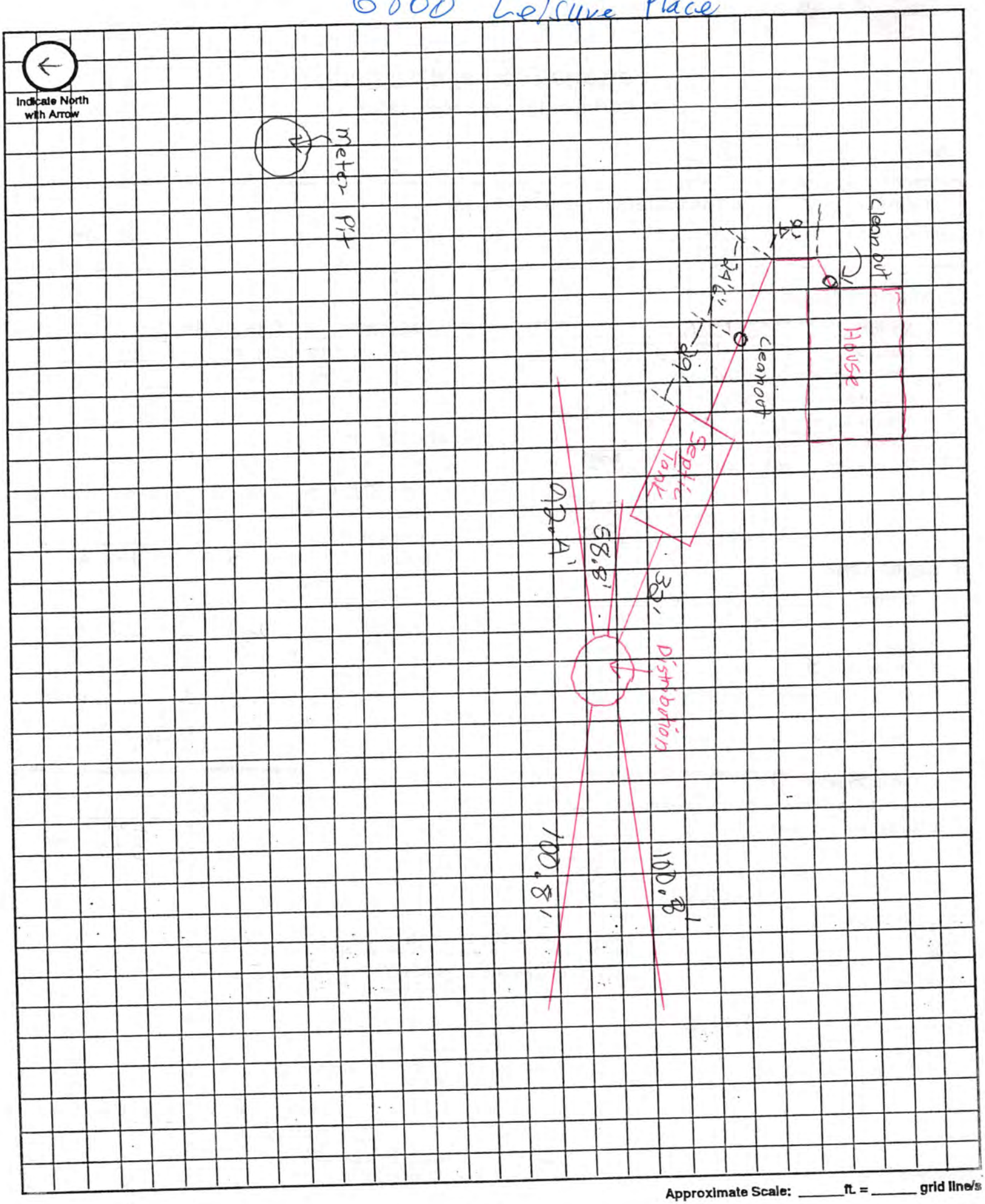
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

6800 Leisure Place



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