Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

000447

(402) 441-8000

Permit SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380260401

Issued 03/11/03
Expires 09/11/03
Revenue Code 3157

Establishment DAVID & LINDA SUNDBERG
T8N R8E SEC 9
LITTLE NEMAHA LK EST LOT 6
14400 WITTSTRUCK RD-BENNET

FEES: $200.00

Permittee DAVID & LINDA SUNDBERG
8801 S 120 ST
LINCOLN NE 68526

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: 033802604 01

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 14400 W. Hstruck Rd (no rural route) City Bennet NE, Zip 68317

Legal Description ~~29~~ 9 8N 8E Little Nemaha Lake Estates 6
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 & Linda Sundberg Signature Linda Sundberg

Address 8801 S. 120th City/State/Zip Lincoln, NE 68526

☐ Check if owner designed system Home Phone 782-3127 Work Phone 434-7244

C. Contractor

Name Mike Kinning Company Name Kinning-Sydow Builders, Inc

Address P.O. Box 6554 City/State/Zip Lincoln, NE 68506

☐ Check if contractor designed system Work Phone 421-1334 or 430-6344

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 3 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 3/11/03 Date frwd 3/11/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3/14/03 Date frwd _____ ACTION ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 3-11-03 Date frwd 3-11-03 *ACTION ☒ Approved ☐ Disapproved Signature Jim Pluyah

7/17/03 Need drawing. J.C.H

Installation Final Written Approval

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

Date ~~JULY 17~~, 2003 AUGUST 14,

Business Office Use Only
Date Rec'd 3/11/03
Amt Paid 200.00
Rec'd By CW Cash/Check No. 23996

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

* Contingent on septic system being located outside the floodplain

Lincoln-Lancaster County Health Department
Environmental Health Division
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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 Lot 6 W. Hickstruck Rd. (no rural route) City Bennett NE. Zip

Owner Address

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

Date of Tests 4-17-02 to 4-18-02 Weather: Precipitation Temperature 77°

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		4-17	545	4-18	830	4-18	11:00	19 3/4	4-18	11:30	30	1/2	60 MIN/IN
2								19 1/2				1/2	60 MIN/IN
3								17 1/2				1/2	60 MIN/IN
4								19				3/4	40 MIN/IN
5								18 1/4				1/2	60 MIN/IN
6								20 1/4				1/2	60 MIN/IN

Person Conducting Percolation Tests

Name: Mundhenke Trench

Phone: (402)641-4156

Address

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation:

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official

Date

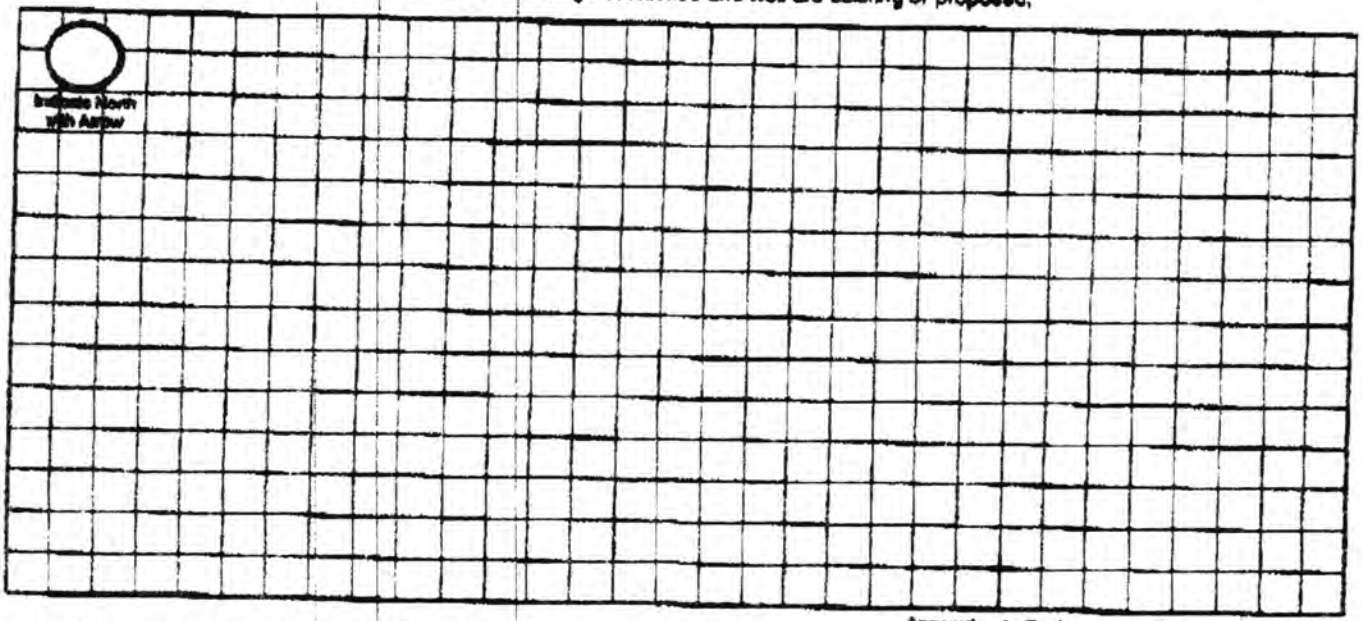
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 03380204

Sewage Disposal System
Preliminary Plan Specifications

Draw a plat 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 lines

A. System Location (Indicate correct number and street)

Address (no rural route) LOT 6 WITTSTRUCK ROAD City BENNET NE, Zip _____

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 _____ Land Slope: _____ %

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

Total Square Feet of Field Required: 1050 sq. ft.

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

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

Total Length of Laterals 263 ft. Number of Trenches _____ Trench Width EF 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 ☐	20 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

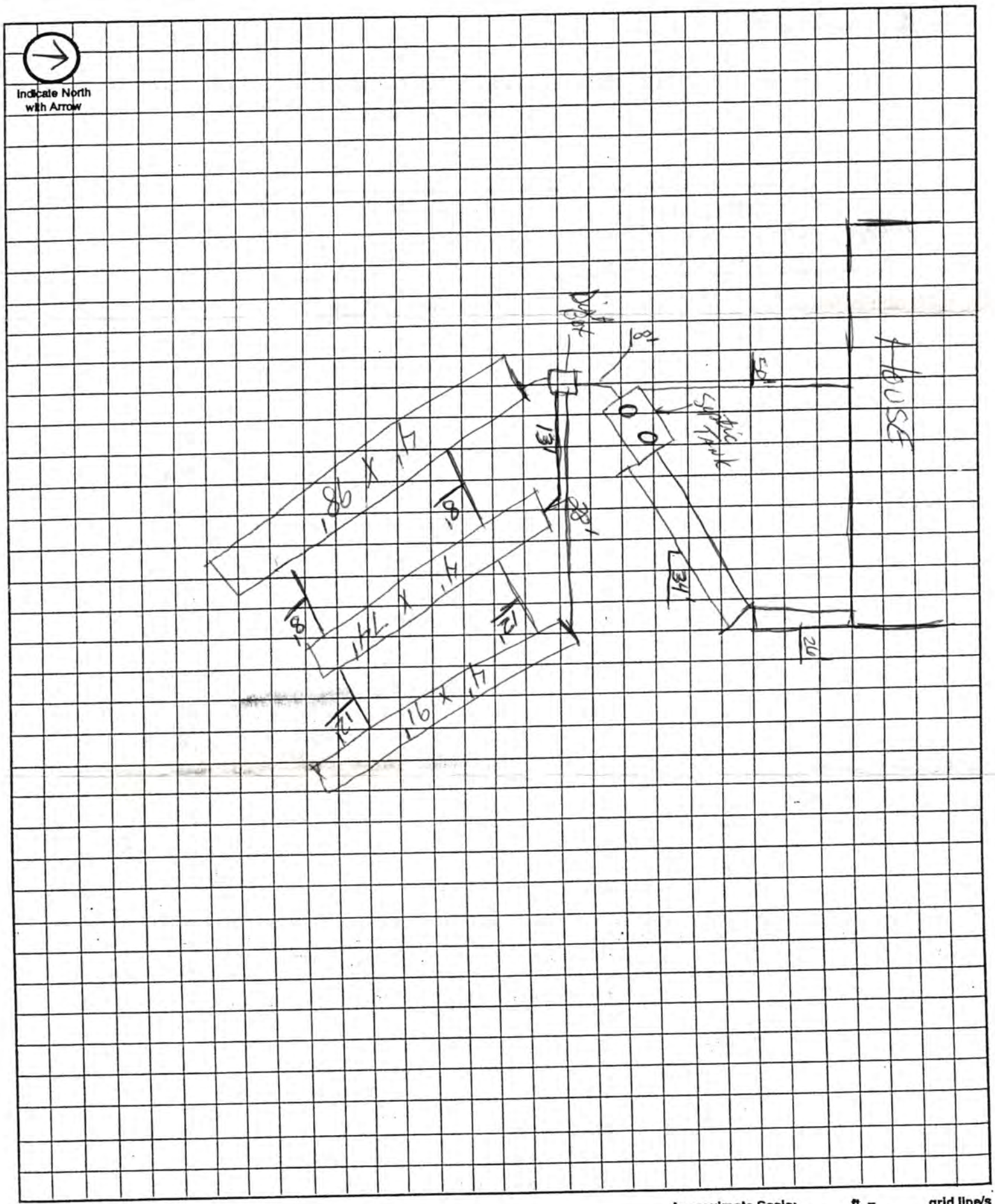
E. Required Signatures

Home Building Contractor Mary Kinning Date 2-10-03

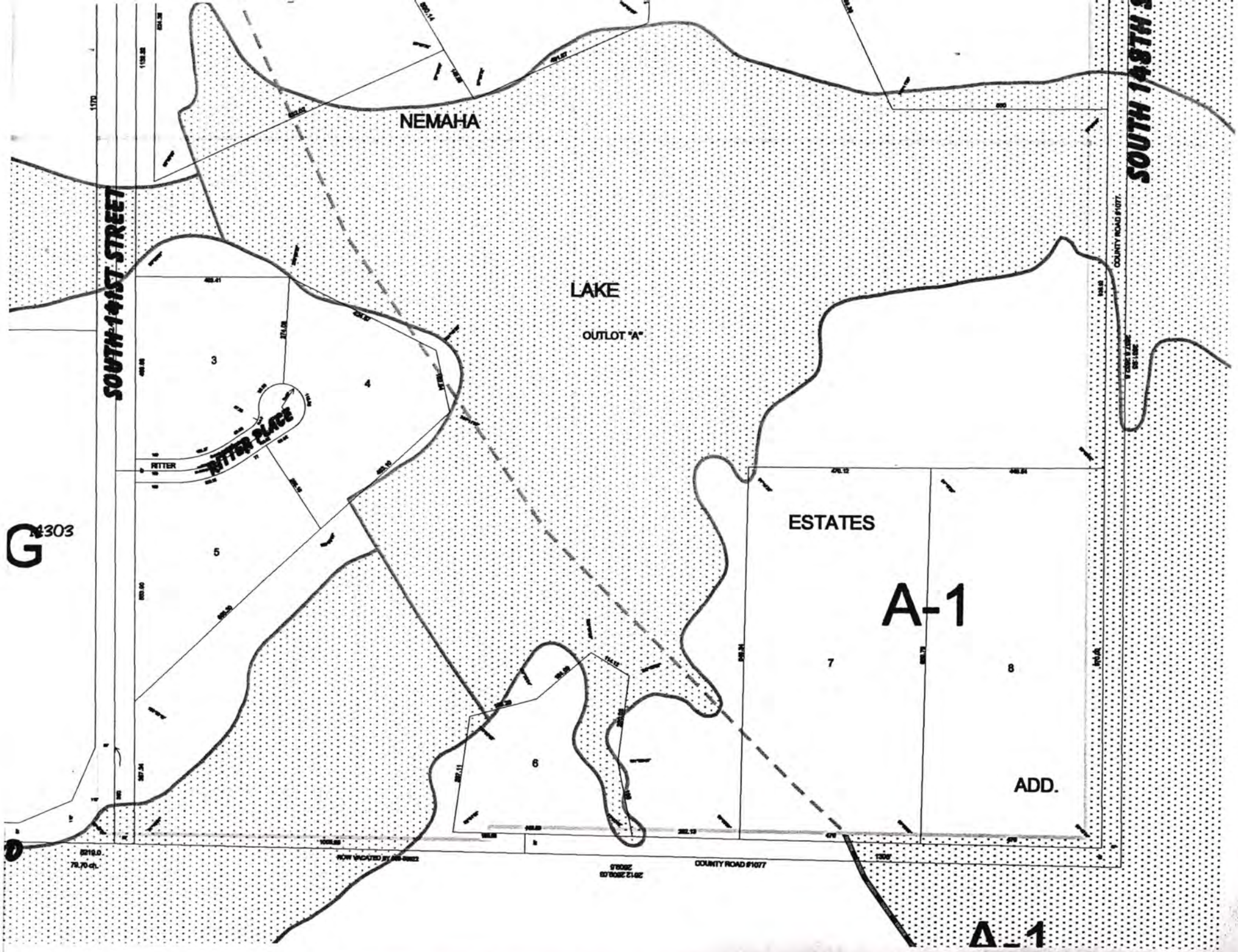
Installer Scott Mueller Date 2-10-03

FORM 25-102 10-96

As Built Drawing



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


NEMAHA
LAKE
OUTLOT "A"
ESTATES
A-1
ADD.
SOUTH 141ST STREET
SOUTH 148TH
RITTER PLACE
RITTER
COUNTY ROAD #1077
COUNTY ROAD #1077
3
4
5
6
7
8
A-1

Lincoln-Lancaster County Health Department
Environmental Health Division
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AUG 1 3 2003

D

Permit Number: 03380260401

Sewage Disposal System

As Built Plans & Specifications

Date 7-22-03

System Location (Indicate correct number and street)

Address 14400 Wittstruck Rd (no rural route) City Bennett NE, Zip

A. Building Sewer

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

B. Septic Tank

1. Material: Plastic
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 18 in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade 2 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 26 in.
8. Distances to: Well or suction line NA ft.
   Stream 150 ft.
   Pressure line 100 ft.
   Property line 200 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

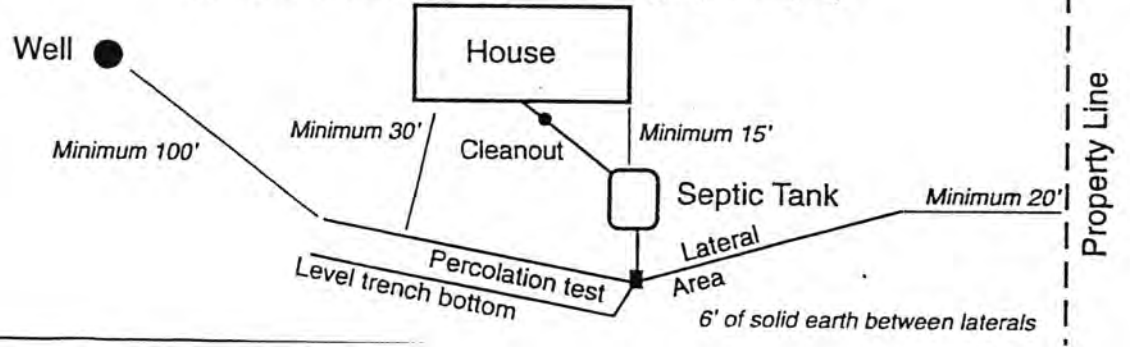
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☒ Perforated pipe
   Diameter of half round: 15"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 91 ft. 98 ft.
   74 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 1 in/100 ft.
   Average depth 30 in
4. Filter material: Gravel
   Depth of material 30 in.
5. Distances to: Well or suction line NA ft.
   Stream 100 ft.
   Pressure line 150 ft.
   Property line 125 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96