Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

004913

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment:
TRAVIS SWIGGART
T8N R8E SEC 10 QTR SW
LOT 108IT
14000 S 148 ST-BENNET

Permittee:
TRAVIS SWIGGART
14000 S 148 ST
BENNET NE 68317

Permit # 04380281201

Issued 11/04/03
Expires 05/04/04
Revenue Code 3157

FEES: $200.00

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: 043802812

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 14000 S 148 (no rural route) City Bennet NE, Zip 68317

Legal Description SW 10 T 8N R 8E — Subdivision — Addition — Block — Lot 1 OUT Lt.
(1/4 1/4 Section Township Range)

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Travis Swiggart Signature Travis Swiggart

Address 14000 S 148 St. City/State/Zip Bennet NE 68317

☐ Check if owner designed system Home Phone 402(489-7919) Work Phone cell 610-1081

C. Contractor

Name Harry L. Muhlbach Company Name H.L. Muhlbach Constr.

Address 14605 N 56th Str. City/State/Zip Lincoln, Ne 68514

☐ Check if contractor designed system Work Phone 785-3815 cell: 430-7304

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 11/5/03 Date frwd 11/10/03 ACTION ☒ Approved ☐ Disapproved Signature Gerald C. Hood
12-22-03, well testing OK

2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 11-12-03 Date frwd 11-12-03 ACTION ☒ Approved ☐ Disapproved Signature _____

3. **City or County Engineer** Date rec'd 11/10/03 Date frwd 11/10/03 ACTION ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By Ron Mayer

Date 4-23-04

Business Office Use Only
Date Rec'd 11/04/03
Amt Paid 200.00
Rec'd By m Cash/~~Check~~ No. CASH

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

B

Permit Number: 043802812

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 14000 S. 148th (no rural route) City Bennett NE, Zip _____

Owner Travis Swiggert Addresss _____

Soil Type (SCS): Kennebec silt loam Percolation Rate: 53 min./inch

Date of Tests Dec-4-03 to Dec-5-03 Weather: Precipitation Rained about ½ inch day before 12-4-03 Temperature 35°-40°F

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	20" (6½" gravel)	12-4-03	11:00AM	12-4-03	3:30PM	12-5-03	11:45	7"	12-5-03	3:45PM	30	4¼	7 mpi
#2	20"	"	"	"	"	"	"	8"	"	"	"	5½	5
#3	20"	"	"	"	"	"	"	7"	"	"	"	4 1/16	7
#4	22"	"	"	"	"	"	"	6"	"	"	"	1 13/16	17
#5	25"	"	"	"	"	"	"	6"	"	"	"	2¾	11
#6	22"	"	"	"	"	"	"	6"	"	"	"	9/16	53

Person Conducting Percolation Tests

Name: Ron Meyernart, LLCHD

Phone: 441-8030

Address: LLCHD

Sum of Percolation Rates: _____

Average of Rates: >20 mpi variation

Rate Used for Calculation: 53 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks: Must keep leach field to the west end of property and bottom of leach field trenches no deeper than 20". Wastewater treatment system must be outside the 100 yr floodplain elevation.

Signature of Reviewing Official: Ron Meyernart Date: 12-10-03

FORM 23-101 10-96

430-7304

B

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

Permit Number: 043802812

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 14000 S 148 St. (no rural route) City Bennet NE, Zip 68317

Owner Travis Swiggart Address 14000 S 148th St.

Soil Type (SCS): _____ Percolation Rate: _____ 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	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	4½"	6.6
2	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	3¼"	9.2
3	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	4¼"	7.0
4	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	3½"	8.6
5	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	4¼"	7.0
6	24"	9-15	9 AM	9-16	6 PM	9-17	8 AM	18"	9-17	12 AM	30	3¼"	9.2

Sum of Percolation Rates: 47.6
Average of Rates: 7.9
Rate Used for Calculation: _____

Person Conducting Percolation Tests

Name: Harry L. Muhlbach
Phone: 785-3815 cell 470-7304
Address 14605 N 56th St Lincoln, Ne 68514

R - 30M
S -
H

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Not approved - test run at 18" instead of 6"
See results of LLCHD standardized perc tests

Signature of Reviewing Official Ron Maynard Date _____

FORM 22-101 10-95

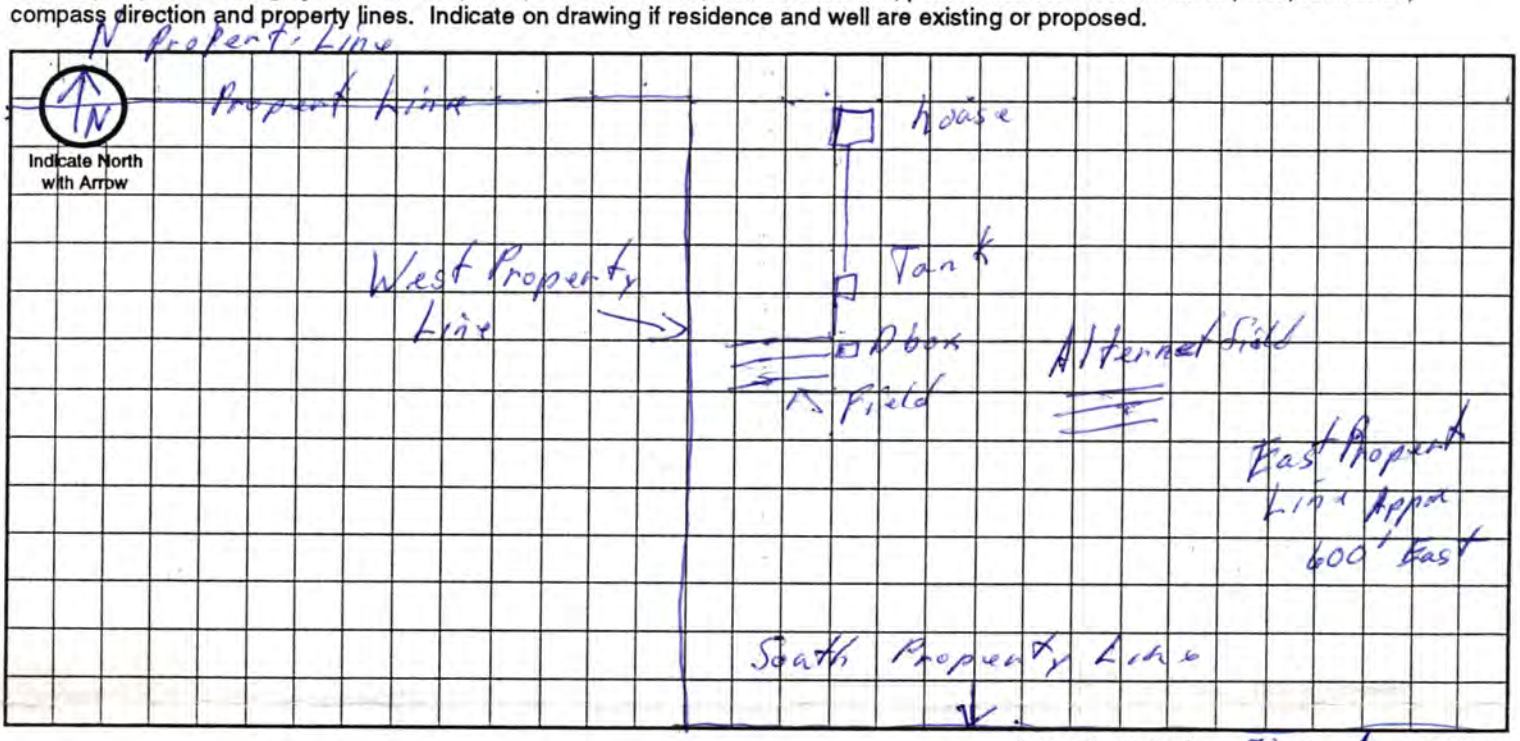
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 043802812

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) 14000 S 148 St. City Bennet NE, Zip 68317

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 7.9 (min. per inch) Soil Type: Loamy Land Slope: Less than 1%

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

Total Square Feet of Field Required: 1400 sq. ft. 4 | 1400 = 350

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

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

Total Length of Laterals _____ 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 H.L. Muhlbach Constr. Date 11-4-03

Installer Harry L. Muhlbach 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: 043802812

Sewage Disposal System

As Built Plans & Specifications

Date 12-20-03

System Location (Indicate correct number and street)

Address 14000 So 148 Stn (no rural route) City Bennet NE, Zip 68317

Travis Swggart

A. Building Sewer

1. Material: Schedule 40
   Diameter: 4 in.
2. Distance above basement floor: — in.
   or distance below basement floor: 30 in.
3. Distance between dwelling and septic tank: 184 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 150 ft.
   stream 458 ft.
   West pressure line 150 ft.
   property line 146 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 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: 10 in.
8. Distances to: Well or suction line 300 ft.
   Stream 450 ft.
   Westside Pressure line 300 ft.
   Property line 143 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 25' ft.

D. Absorption Field

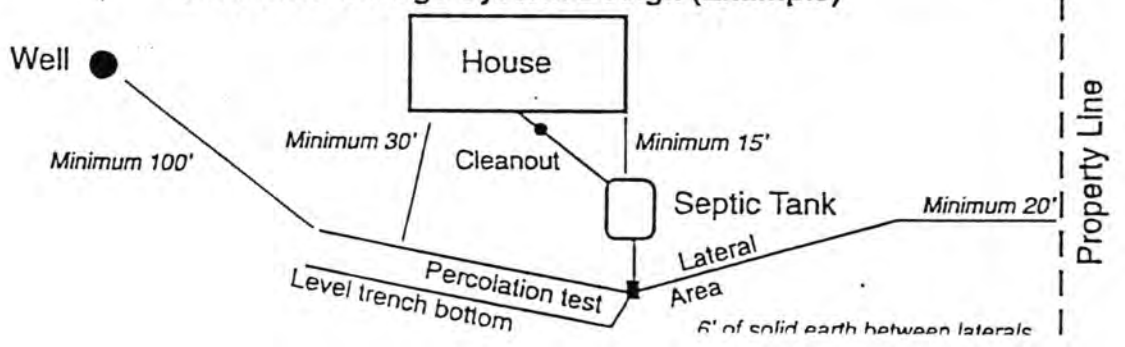
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds Infiltrator ☐ Perforated pipe
   Diameter of half round: 16"
   or perforated pipe:
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 3
   Length of each line: 118 ft. 118 ft.
   114 ft. ft., ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 22" in
4. Filter material: Soil
   Depth of material — in.
5. Distances to: Well or suction line 333 ft.
   Stream 410 ft.
   Rural water Pressure line 333 ft.
   Property line 25 ft.
   Westside

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

Exhibit A

Official Survey Record

LANCASTER County, Nebraska

Phone (402) 434-2686
Fax (402) 434-2687

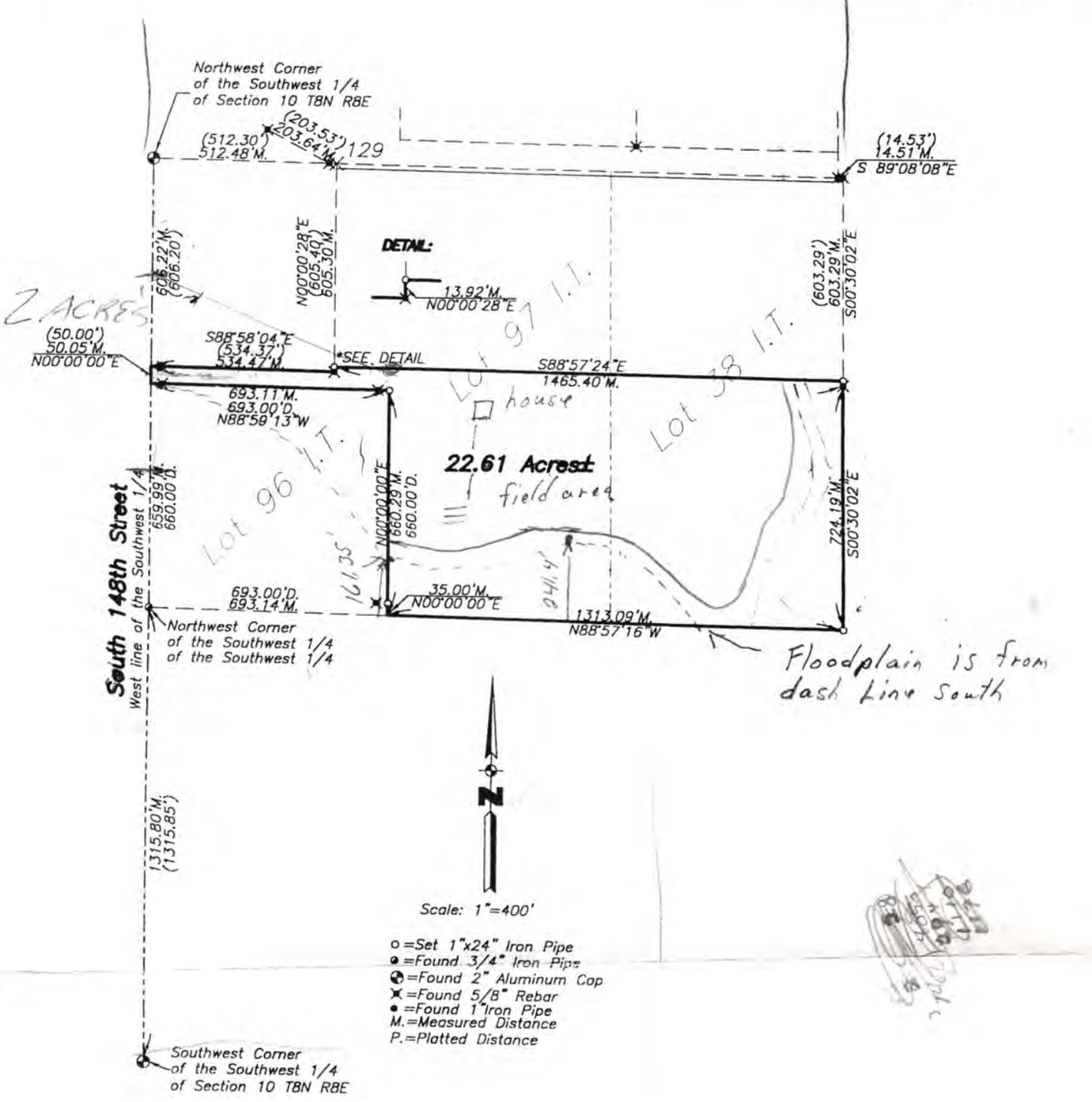
ALLIED SURVEYING AND MAPPING, INC.
6120 South 58th Street – Suite "A" – Lincoln, Nebraska 68516

Survey a part of Irregular Tract Lots 97 and 38 located in the Southwest Quarter
Section 10 T. 8 N., R, 8 East of the 6th P.M.

Job No. 30998

Sheet 1 of 1

June, 2002



Scale: 1"=400'

o =Set 1"x24" Iron Pipe
● =Found 3/4" Iron Pipe
◔ =Found 2" Aluminum Cap
✕ =Found 5/8" Rebar
• =Found 1" Iron Pipe
M.=Measured Distance
P.=Platted Distance

o = Set Set 1"x24" Iron Pipe

● = Monuments Found as shown

SURVEYORS CERTIFICATE

I hearby certify that I have accurately surveyed the property in the above plat. Iron Pipe were set at points marked o. All dimensions are in feet and decimals of a foot.

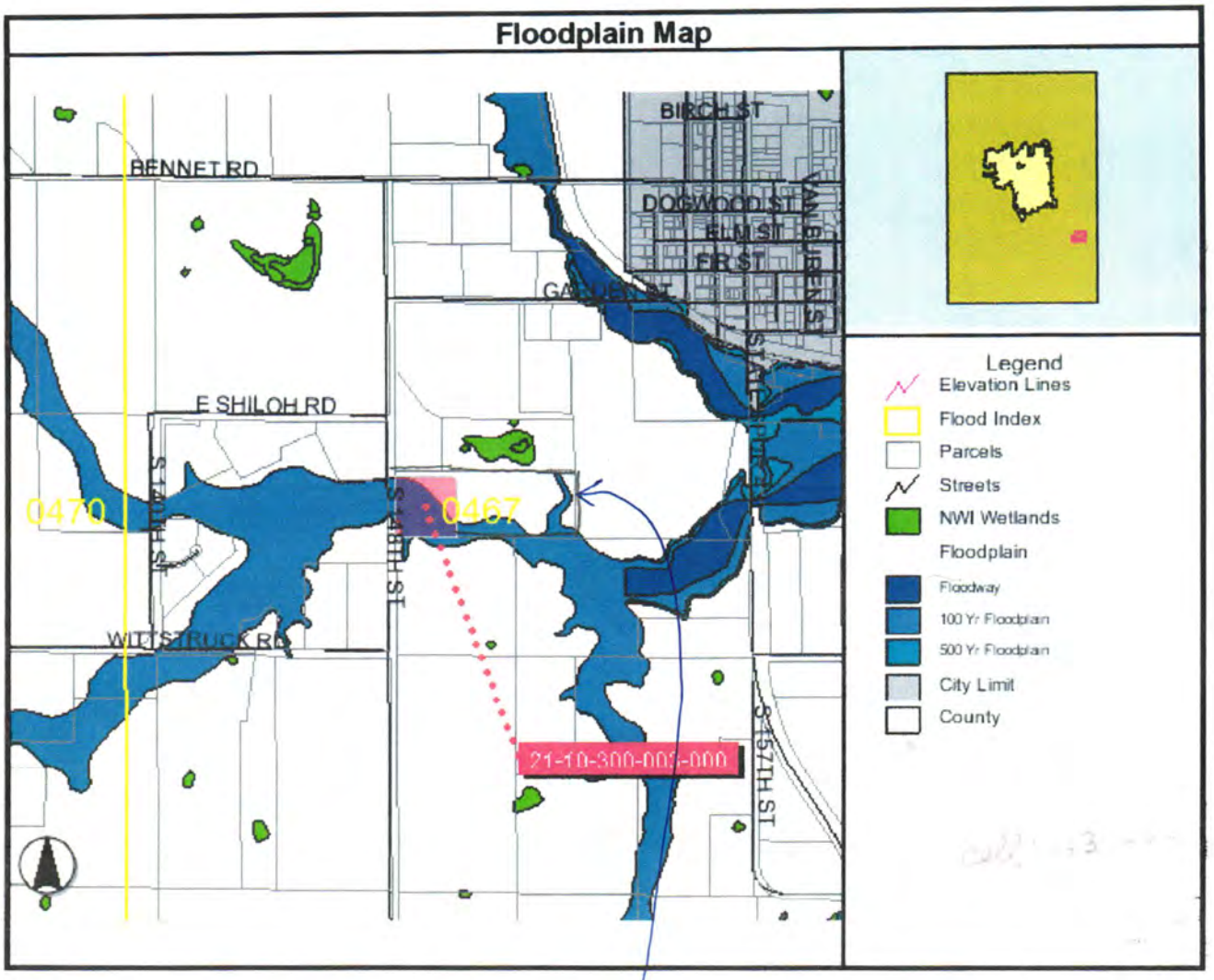
Signed this 18th day of June, 2002

NAME Dennis D. Simonds
DENNIS D. SIMONDS

Surveyor's License # 343
Nebraska L.S.

REGISTERED PROFESSIONAL LAND SURVEYOR
DENNIS D. SIMONDS
LS-343
STATE OF NEBRASKA
(SEAL)

11-1-03



Travis Swiggart Property

As Built Drawing

