Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

007872

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment: RONALD S HUDSON
T8N R8E SEC 14 QTR SE
LOT 10
NA-BENNETT

Permittee: RONALD S HUDSON
6384 S RANGE RD
NORTH PLATTE NE 69101

Permit # 05380303801

Issued 06/13/05
Expires 06/13/06
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: 05380303801

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 address not yet available (no rural route) City Bennett NE, Zip 68317

Legal Description SE 14 8N 8E ____ 10
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 Ronald Hudson Signature Ronald S Hudson

Address 6384 S. Range Rd City/State/Zip North Platte, NE 69101

☐ Check if owner designed system Home Phone 308-520-0897 Work Phone _____

C. Contractor

Name owner Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Lloyd Jirkovsky Firm Raymond Contracting Inc Work Phone 402-390-6009

E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms 1 Is there a Whirlpool Bathtub YES (NO) Shed with 1 BATHroom

☐ 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 6/13/05 Date frwd 6/14/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6-14-05 Date frwd 6-14-05 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 6/14/05 Date frwd 6/14/05 ACTION ☒ Approved ☐ Disapproved Signature _____

6/14/05 J.C.H.

Installation Final Written Approval

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

Date JUNE 20, 2005

Business Office Use Only

Date Rec'd 6/13/05
Amt Paid $200.00
Rec'd By _____ Cash/Check No. 05785

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: 053803038

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 16200 + Rokeby Rd SE 1/4 14-8-8 Lot 10 (no rural route) City Bennett NE, Zip 68317

Owner Ron Hudson Addresss 3430 Cascade Cir. c/o Scott Hudson Lincoln, NE 68504

Soil Type (SCS): Wymore Percolation Rate: 60 min./inch

Date of Tests 5-9-05 to 5-10-05 Weather: Precipitation 0 Temperature 82°

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		5-9	11:30a	5-9	3:30	5-10	12:00p	6	5-10	4:00p	30	13/4	30/1.75 = 17
2		"	"	"	"	"	"	"	"	"	"	3/4	30/0.75 = 40
3		"	"	"	"	"	"	"	"	"	"	1/2	30/0.50 = 60
4		"	"	"	"	"	"	"	"	"	"	3/4	30/0.75 = 40
5		"	"	"	"	"	"	"	"	"	"	1	30/1.00 = 30
6		"	"	"	"	"	"	"	"	"	"	1/2	30/0.50 = 60

Person Conducting Percolation Tests

Name: Terri Jirkovsky, Raymond Contracting, Inc.
Phone: 402-783-2663 or 402-890-3870
Address: 13800 NW 70th St
Raymond, NE 68428

Sum of Percolation Rates: 247
Average of Rates: 41
Rate Used for Calculation: 60 (20 mpi Variance)

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official: Jerrold C. Hood R.E.H.S. Date: JUNE 13, 2005

FORM 23-101 10-96

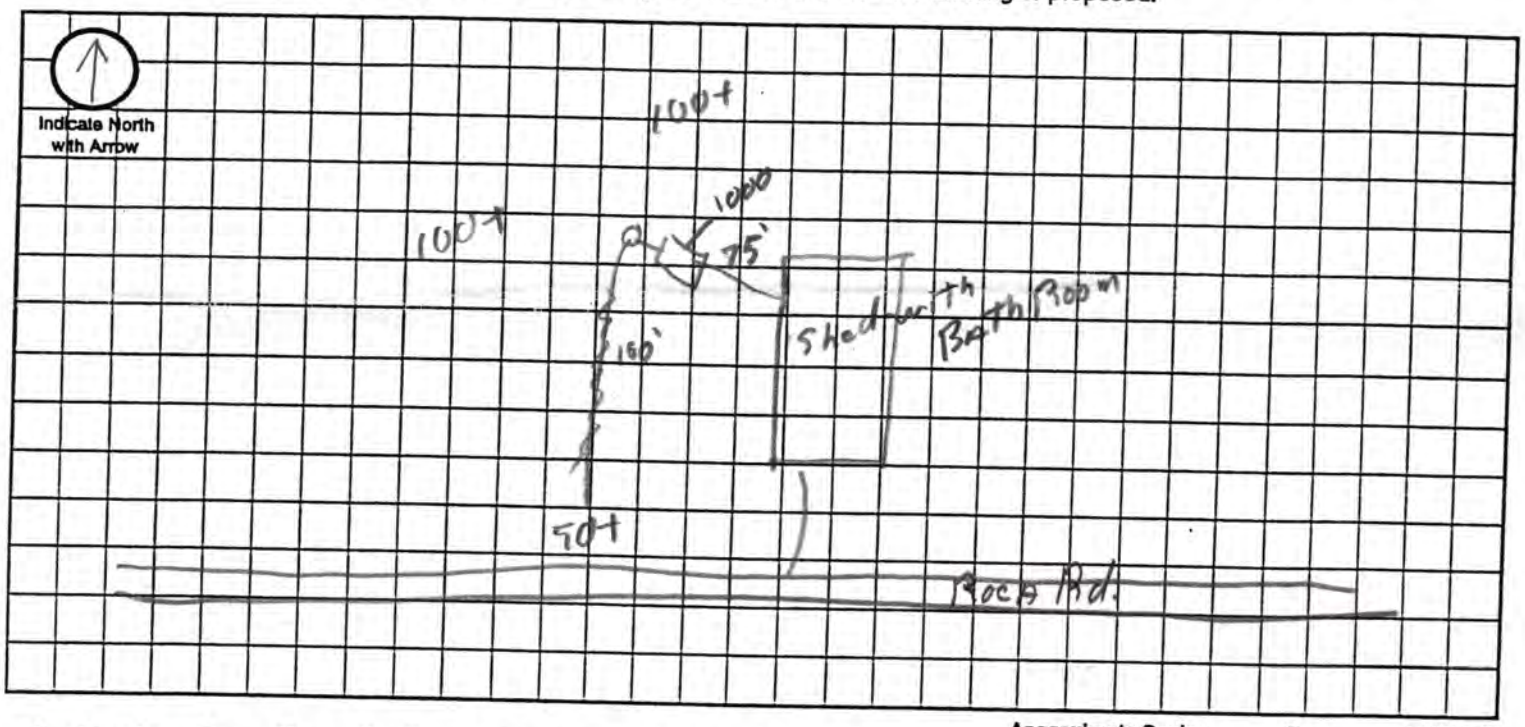
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 053803038

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) _____ City Bennett NE, Zip 68317

SE 1/4 14-8-8 Lot 10

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: Wymore Land Slope: _____ %

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

Total Square Feet of Field Required: 350 sq. ft.

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

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 160 ft. Number of Trenches 1 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 Ronald J Hudson Date 6-6-05

Installer Mike Schweitzer Date 5-27-05

Lincoln-Lancaster County Health Department
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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 6/14/05

Ron. Hudson

System Location (Indicate correct number and street) SE¼ 14-8-8 Lot 10

Address 5162 and Road Rd. (no rural route) City Bennett NE, Zip 68317

1/2 mile EAST / North Side.

A. Building Sewer

1. Material: _____
   Diameter: 4 in.
2. ~~Distance above basement floor:~~ _____ in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 36' ft.
4. Number of clean-outs: one
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: concrete
   Number of compartments: one
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade at Grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 16 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

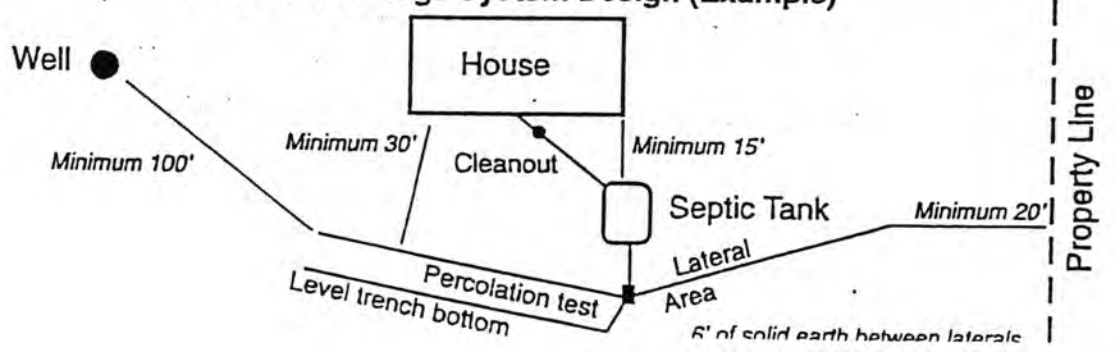
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 12"Tall - 34" wide
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number one
   Length of each line: 88' ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope Flat in/100 ft.
   Average depth 28" in
4. Filter material: Dirt
   Depth of material 28" in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ 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

