LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 99380193501

Issued 02/17/99
Expires 08/17/99
Revenue Code 3157

FEES: $150.00

PAID

Establishment

DAN DALLMAN
T8N R8E SEC 36 QTR NW
E 1/2
18100 HICKMAN RD-BENNET

TOTAL $150.00

Permittee

DAN DALLMAN
12100 WITTSTRUCK RD
BENNET NE 68317

Issued By Health Director
Lincoln-Lancaster County Health Department

008724

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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

A

Permit Number: 993801935

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 18100 Hickman Rd (no rural route) City ~~Hickman~~ Bennet NE, Zip 68317

Legal Description E ½ NW 36 8N 8E (80 acres)
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 Dan Dallman Signature Dan Dallman

Address 12100 Wittstruck City/State/Zip Bennet Ne. 68317

☐ Check if owner designed system Home Phone 782-8782 Work Phone _____

C. Contractor

Name _____ 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 Clint Presnell Firm Wellmann Plumbing Work Phone 434-2400
cell 430-6817

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 12-11-98 Date frwd 12-15-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12-15-98 Date frwd 12-15-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 12/14/98 Date frwd _____ **ACTION** ☒ Approved ☐ Disapproved Signature _____

12-18-98 rec'd tank drift boy sensitive area labs
12-21-98 receiving letter(s) need drawing

Installation Final Written Approval

By Ron Mayard

Date 3-2-00

Business Office Use Only 3196
Date Rec'd 12/11/98
Amt Paid 150 ck
Rec'd By _____ ~~Cash~~/Check No. 1157

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: 993801935

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1814 Hintzman Rd (no rural route) City Bennet NE, Zip _____

Owner Dan Dallmann Address 12100 Whitestruck

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

Date of Tests 11-17 to 11-18-98 Weather: Precipitation — Temperature 52°

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	30	3:00	11-17	11-18	2:25	22'	3:55	22	11-18	4:25	30	3/4	40
2								24 1/2				1	30
3								26 1/4				3/4	40
4								18 1/4				1/2	60
5								20 3/4				1 1/4	24
6								19 7/8				5/8	48
7								26				3/4	40

Person Conducting Percolation Tests

Name: Larry Schwarck

Phone: 489-7294

Address 8200 old Cheney

Sum of Percolation Rates: 282

Average of Rates: 47

Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Paul D. Date 12-15-98

FORM 23-101 10-96

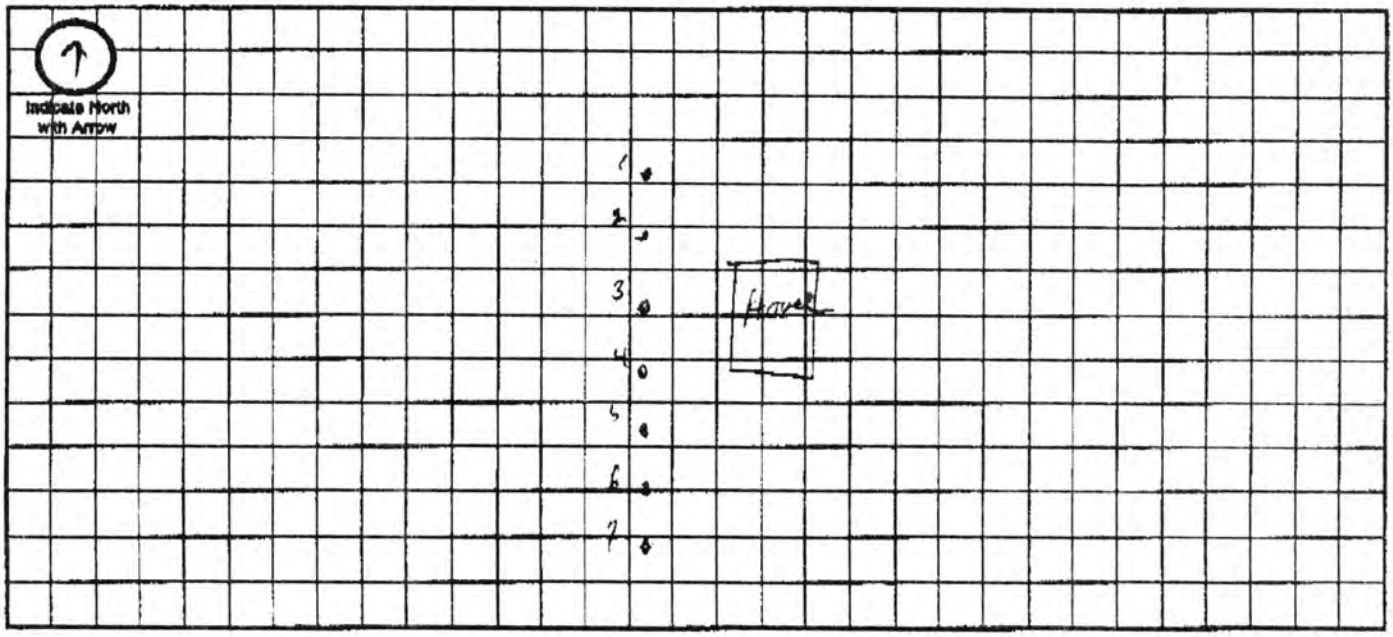
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 993801935

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) 18100 Hickman Rd. 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 60 (min. per inch) Soil Type: Clay loam Land Slope: 1 %

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 1250 gals Number of Absorption Beds: 5 Number of Distribution Laterals per Bed 1

Total Length of Laterals 440 ft. Number of Trenches 5 Trench Width 3'

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 Dan Dallmer Date _____

Installer Chet Presnell Wellmann Plumbing Inc. Date ~~11-18-98~~ 12-11-98

FORM 23-102 10-98

Attn. Ron

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)
Address 18100 Hickman Rd. (no rural route) City Bennet NE, Zip 68317

A. Building Sewer

1. Material: Sch. 40 PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 70 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100+ ft.
   stream — ft.
   pressure line 40 ft.
   property line 100+ ft.

B. Septic Tank

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

C. Distribution Box

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 10 ft.

D. Absorption Field

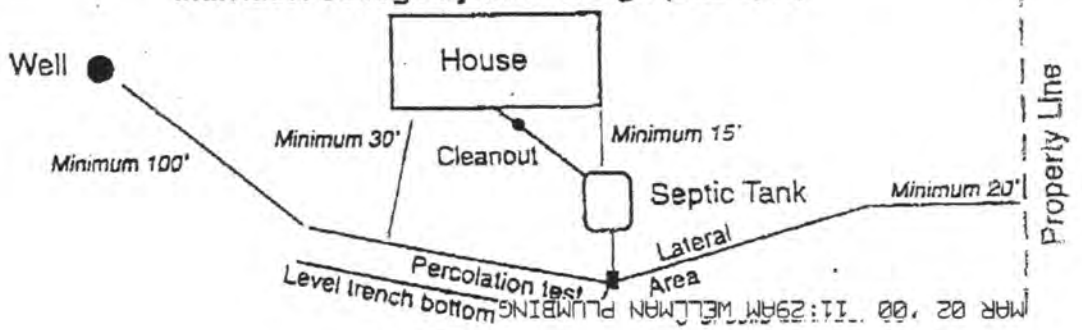
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☑ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 130 ft.
   100 ft. 60 ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 1 in/100 ft.
   Average depth 30 in
4. Filter material: Road Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 100+ ft.
   Stream — ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

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

Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-1

MAR 02 '00 11:29AM WELLMAN PLUMBING P.1

Attn: Ron

As Built Drawing

