Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005482

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 04380288801

Issued 09/08/04
Expires 03/08/05
Revenue Code 3157

Establishment:
ASPEN BUILDERS
T9N R5E SEC 11 QTR NW
LOT 11IT
~~8200~~ 8383 W PIONEERS BLVD-DENTON

FEES: $200.00

TOTAL: $200.00

Permittee:
ASPEN BUILDERS
1640 NORMANDY CT
APT A
LINCOLN NE 68512

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

SEP 7 2004

A

Permit Number: 04380288801

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)

8383

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 ~~8200~~ W. Pioneers Blvd City Denton NE, Zip 68339
(no rural route)

Legal Description I.T. NW 11 9N 5E of the 6th P.M. 11
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 Aspen Builders Inc. Signature _____

Address 1640 Normandy Ct Ste A City/State/Zip Lincoln NE 68512

☐ Check if owner designed system Home Phone _____ Work Phone 423-6811

C. Contractor

Name Bob Benes Company Name Aspen Builders Inc.

Address 1640 Normandy Ct Ste A City/State/Zip Lincoln NE 68512

☒ Check if contractor designed system Work Phone _____

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 5 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** 3-8-05, hm
   Date rec'd _____ Date frwd _____
   ACTION ☒ Approved ☐ Disapproved
   Signature Doug Mrsny

2. **Supt. Bldg. Insp. or Village Clerk**
   Date rec'd 9-8-04 Date frwd 9-8-04
   ACTION ☒ Approved ☐ Disapproved
   Signature Shawn Johnson

3. **City or County Engineer** – Line + lagoon, See letter 3/8 05
   Date rec'd 9-8-04 Date frwd 9-8-04
   ACTION ☒ Approved ☐ Disapproved
   Signature Jim Plouzek

Installation Final Written Approval

By Doug Mrsny

Date 4/29/05

Business Office Use Only

Date Rec'd 09/08/04
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 8037

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

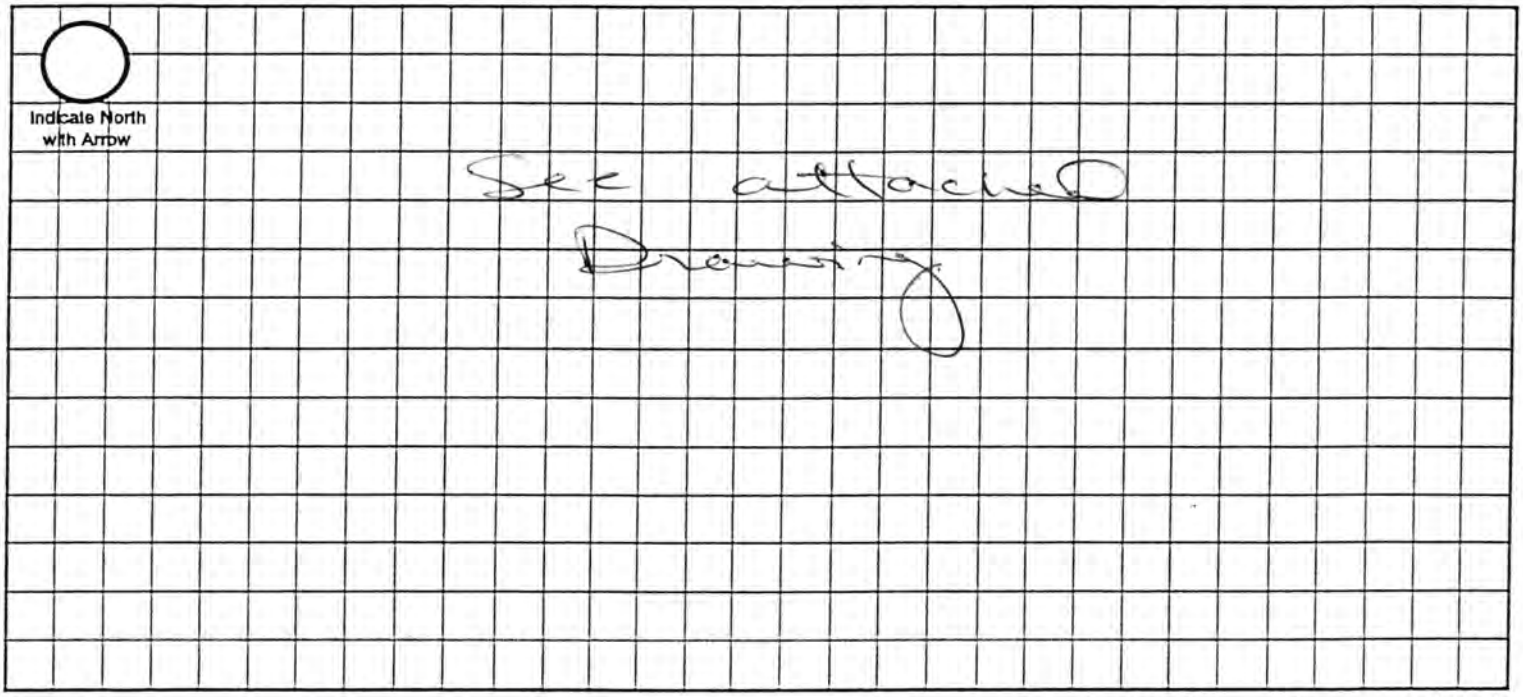
C

Permit Number: 04380288

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) 8200 W Pioneers Blvd. City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

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

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

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

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

Capacity of Septic Tank _____ 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 _____ Date _____

Installer Bob Barnes Date _____

FORM 23-102 10-96

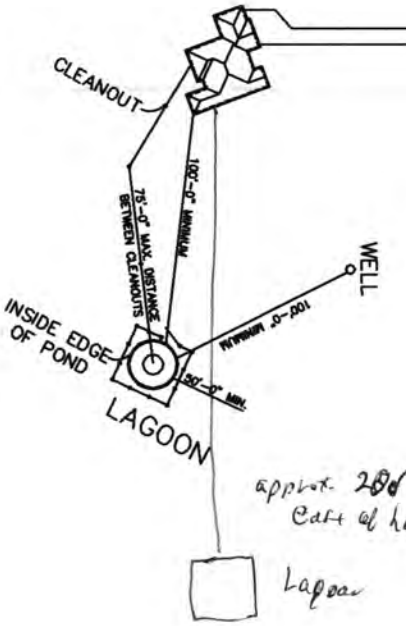
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Lot 11 NW 11-9-5

SW 84TH STREET

921.86'

60' SIDE YARD SETBACK



W. PIONEERS BLVD.

914.83'

50' FRONT YARD SETBACK

100' REAR YARD SETBACK

996.89'

60' SIDE YARD SETBACK

804.95'

136.18'

ASPEN BUILDERS, INC.
1640 NORMANDY COURT, SUITE A
LINCOLN, NE 68512

9-5-11

MAY 10 2005

D

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

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Sewage Disposal System

As Built Plans & Specifications

Date 3-31-05

System Location (Indicate correct number and street)

Address 8383 W. Pioneers Blvd. (no rural route) City Denton NE, Zip 68339

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 10" in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: 8
5. Distances to: well or suction line 200 ft.
   stream — ft.
   pressure line — ft.
   property line 200 ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ 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: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

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

D. Absorption Field

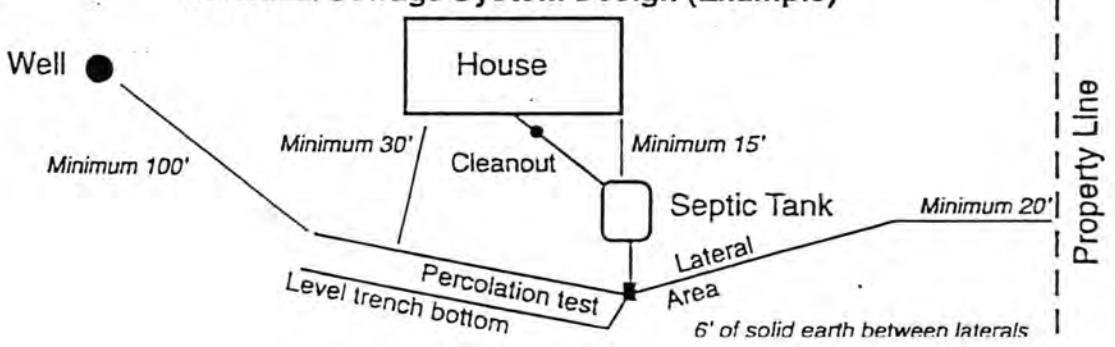
(Provide as-built drawings on back of this form)

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

Indicate North with Arrow

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

Individual Sewage System Design (Example)



As Built Drawing

