Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

002766

(402) 441-8000

Permit SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380265201

Issued 06/13/03
Expires 12/13/03
Revenue Code 3157

Establishment MELODIE JOHNSON
T9N R5E SEC 13
TIMBERLINE ESTS BLK 1 LOT 1
6855 ALPINE RD-DENTON

FEES: $200.00

Permittee MELODIE JOHNSON
4140 F ST
LINCOLN NE 68510

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: 03380265201

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 6855 Alpine Rd. (no rural route) City Denton NE, Zip NE

Legal Description ____ (1/4) ____ (1/4) 13 (Section) 9N (Township) 5E (Range) Timberline Estates (Subdivision) ____ (Addition) 1 (Block) 1 (Lot)

Geographical Location (if known): Longitude ____ Latitude ____

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

B. Owner

Name Melodie Johnson Signature Melodie Johnson

Address 4140 'F' St City/State/Zip Lincoln, NE

☐ Check if owner designed system Home Phone 310-1745 Work Phone 471-1081

C. Contractor

Name Deprez Custom Homes ↔ Company Name Jim Deprez

Address 7420 Unionhill Cr City/State/Zip Lincoln, NE 68516

☐ Check if contractor designed system Work Phone 429-8513

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

Designer Name Gordon Firm G&A Backhoe Work Phone 450-2409

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 6/13/03 Date frwd 6/16/03	ACTION ☒ Approved ☐ Disapproved Signature Jerrald C. Wood	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 6-16-03 Date frwd 6-16-03	ACTION ☒ Approved ☐ Disapproved Signature	
3. City or County Engineer	Date rec'd 6/16/03 Date frwd 6/16/03	ACTION ☒ Approved ☐ Disapproved Signature	

8/6/03 Line, tank, lateral

Installation Final Written Approval

By ____

Date 9/3/03

Business Office Use Only
Date Rec'd 6/13/03
Amt Paid $200.00
Rec'd By ____ Cash/Check No. 5118

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 033802652

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address _____ City _____ NE, Zip _____

(no rural route)
Owner Deprez Homes Address 7420 Union Hill Cr Lincoln 68516

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

Date of Tests 6-10 to 6-10 Weather: Precipitation — Temperature 75

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Pre-Saturation Period				Percolation Readings					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	36	6/10	10:15	6/10	6:00	6/10	7:45	15 5/8	6/10	8:12	30	1/2	60
2			AM		PM		PM	13 1/2		PM		5/8	48
3								14				3/4	40
4								13 1/4				1 3/8	22
5								15 5/8				1 1/4	24
6								20 3/4				1 1/4	24

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 430-7606
Address 17201 So 72nd St.
Lincoln, NE 68372

Sum of Percolation Rates: 218
Average of Rates: 34
Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

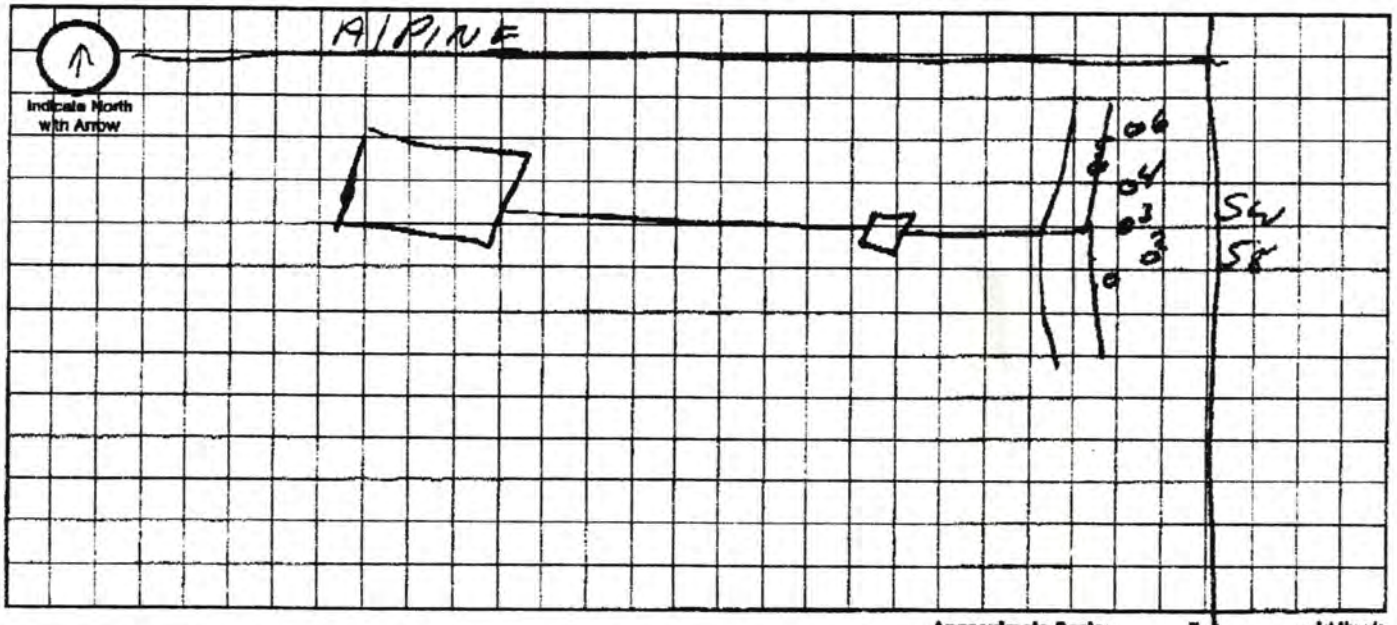
Lincoln-Lancaster County Health Department
Environmental Health Division
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C

Permit Number: 033802652

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 _____ NE, Zip _____

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: WTC Land Slope: 4 %

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 Brad Southwick Date 6-10-03

FORM 23-102 10-96

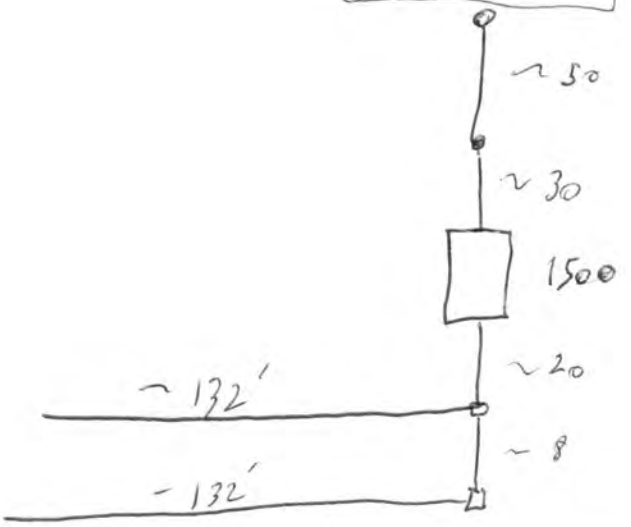
8/6/07

6855 Alpine Road

3:00 p.m.

Dupree Custom Homes

D + a Backhoe



Lincoln-Lancaster County
HEALTH DEPARTMENT

"Working for Your Health for over 100 Years"