Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003333

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 04380277201

Issued 01/23/04
Expires 07/23/04
Revenue Code 3157

Establishment

DAN & KELLY OLTMAN
T9N R5E SEC 13
TIMBERLINE ESTS-1ST BLK 1 LOT 1
5605 PINECREEK CIR-DENTON

FEES: $200.00

Permittee

DAN & KELLY OLTMAN
1408 SW 16 ST
LINCOLN NE 68522

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: 04380277201

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 5605 Pine Creek Cr. (no rural route) City Denton NE, Zip 68339

Legal Description 1/4 13 1/4 Section T9N Township 5E Range Timberline Subdivision 1st Addition Block 1 Lot 1

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Dan & Kelly Oltman Signature [signature]

Address 1408 SW 16th City/State/Zip Lincoln NE 68522

☐ Check if owner designed system Home Phone 476-7354 Work Phone _____

C. Contractor

Name Mel Gagner. Company Name Gagner Const.

Address Lincoln NE. City/State/Zip 68523

☒ Check if contractor designed system Work Phone 432-5698

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 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 1/23/04 Date frwd 1/27/04	**ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd 1-27-04 Date frwd 1-27-04	**ACTION** ☒ Approved ☐ Disapproved Signature [signature]	
3. **City or County Engineer**	Date rec'd 1/27/04 Date frwd 1/27/04	**ACTION** ☒ Approved ☐ Disapproved Signature [signature]	

Installation Final Written Approval

By Doug Simon

Date 8/6/04

Business Office Use Only

Date Rec'd 01/23/04

Amt Paid 200.00

Rec'd By [signature] ~~Cash~~/Check No. 4039

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: 043802772

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 5605 Pine Creek CR. City DENTON NE, Zip 68339
(no rural route)

Owner DAN + Kelly OITMAN Addresss 1408 SW 16th LINCOLN 68522

Soil Type (SCS): PAWNEE CLAY LOAM + KENNEBEC SILT LOAM IN AREA Percolation Rate: 54 min./inch

Date of Tests 1/16/04 to 1/17/04 Weather: Precipitation 0 Temperature 34

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	1/16	10:00	1/17	9:00	1/17	9:10	6	1/17	11:40	30	1/2	60
2	30	"	"	"	"	"	"	"	"	"	"	5/8	48
3	31	"	"	"	"	"	"	"	"	"	"	5/8	48
4	28	"	"	"	"	"	"	"	"	"	"	1/2	60
5	30	"	"	"	"	"	"	"	"	"	"	1/2	60
6	31	"	"	"	"	"	"	"	"	"	"	5/8.	48

Person Conducting Percolation Tests

Name: Mel Wagner
Phone: 432-5698
Address 4810 W Claire Ave.
Lincoln NE. 68523

Sum of Percolation Rates: 324
Average of Rates: 54
Rate Used for Calculation: 54

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

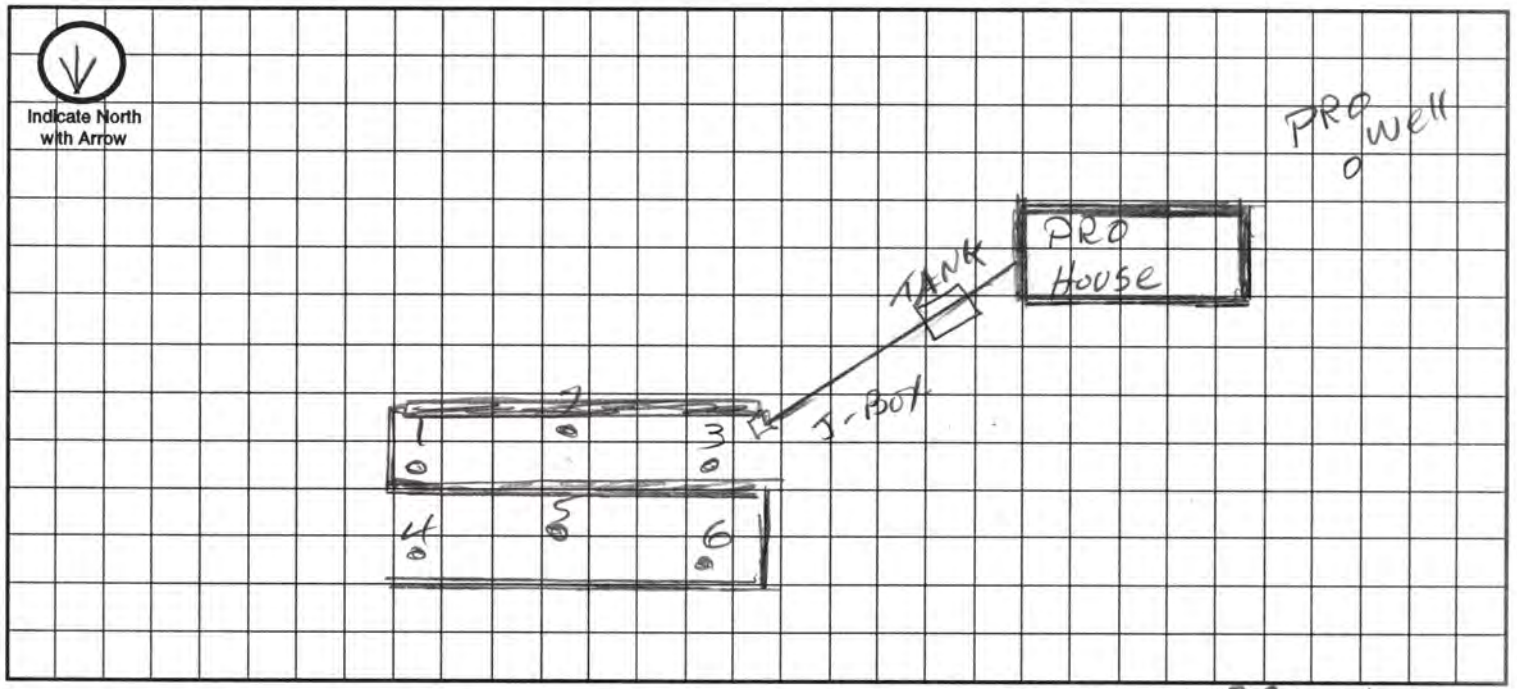
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 04380277 2

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 5605 Pine Creek CR 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 54 (min. per inch) Soil Type: PAWNEE CLAY LOAM & KENNEBEC SILT LOAM IN AREA Land Slope: 3 %

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

Total Square Feet of Field Required: 1050 sq. ft.

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

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

Total Length of Laterals 2625 ft. Number of Trenches 3 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 _____ Date 1/18/4

Installer Melvin Wagner Date 1/18/04

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:

Sewage Disposal System
As Built Plans & Specifications

Date 8/6/04

System Location (Indicate correct number and street)
Address 5605 Pine Creek C.R. (no rural route) City DENTON NE, Zip 68339

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: NA in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 34 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line OVER 100 ft.
   stream NA ft.
   pressure line NA ft.
   property line 200 ft.

B. Septic Tank

1. Material: CEMENT
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade 0 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 2 in.
8. Distances to: Well or suction line 100 ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 150 ft.

C. Distribution Box

1. Material: PLASTIC
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 25 ft.

D. Absorption Field

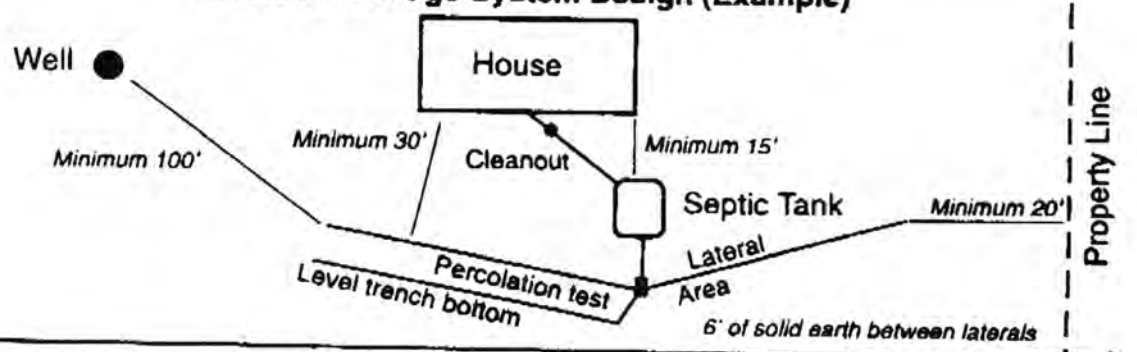
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other INFILTRATOR
2. Lateral lines: Number 2
   Length of each line: 150 ft. 112.5 ft.
   _____ ft. _____ ft. _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 24 in
4. Filter material: NA
   Depth of material NA in.
5. Distances to: Well or suction line OVER 100 ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 40 ft.

Indicate North with Arrow

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

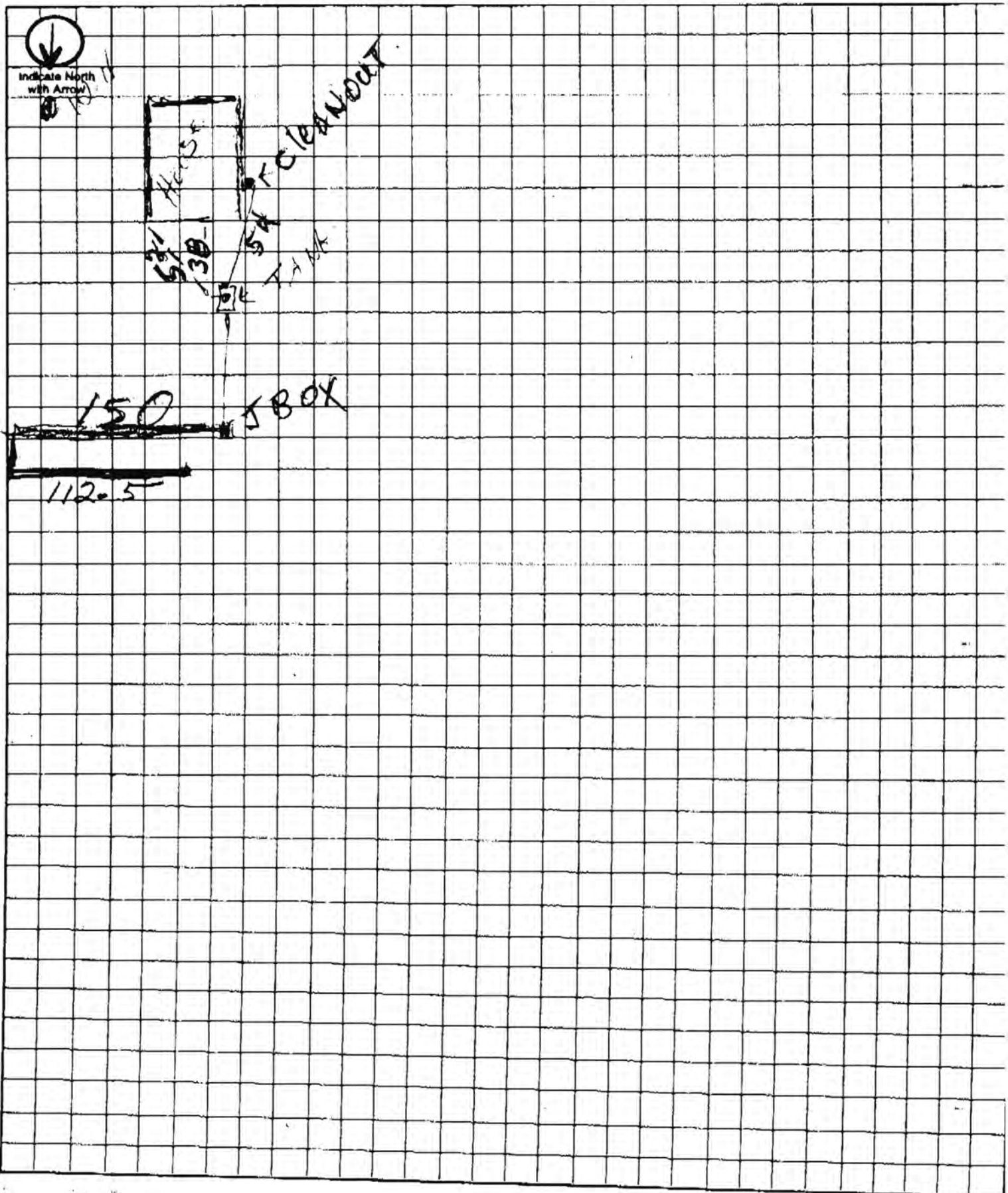
Individual Sewage System Design (Example)



FORM 23-103 10-96

08/06/2004 21:06 14027977475 GAGNER PAGE 02

As Built Drawing



Approximate Scale: 20 ft. = 1 grid line/s

Field Notes
8/6/04
DS

House

60'

1,250 tank

72'

150'

112'

~~184 6.2~~

North

Well 100'