Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

007905

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380304001

Issued 06/17/05
Expires 06/17/06
Revenue Code 3157

Establishment:
ROBERT E SANBURN
T9N R5E SEC 13 QTR SE
TIMBERLINE ESTS BLK 3 LOT 6
5959 ALPINE CT-DENTON

FEES: $200.00

Permittee:
ROBERT E SANBURN
6634 SHADOW PINES PL
LINCOLN NE 68516

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

JUN 17 2005

A

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

Permit Number: 05380304001

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 5959 Alpine Ct (no rural route) City Denton NE, Zip 68339

Legal Description SE (1/4) 1/4 13 Section 9N Township 5E Range Timberline Estates Subdivision 3 Addition 6 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 Bob Sanburn Signature Robert E Sanburn

Address 6634 Shadow Pines Pl City/State/Zip Lincoln, NE 68516

☐ Check if owner designed system Home Phone 402-440-6531 Work Phone 402-471-0850 ext. 1102

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 Jakoubek Firm Raymond Contracting, Inc Work Phone 402-890-6009

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 6/17/05 Date frwd 6/20/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Wood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/20/05 Date frwd 6/20/05 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 6/20/05 Date frwd 6/20/05 ACTION ☒ Approved ☐ Disapproved Signature

1/26/05 Need drawing - J.G.H.
1/25/06 Sewer + Plans J.C.H.

Installation Final Written Approval

By _____

Date 3/23/06

Business Office Use Only

Date Rec'd 6-17-05
Amt Paid $200.00
Rec'd By CW Cash/Check No. 5807

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Lincoln-Lancaster County Health Department
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Phone: 402-441-8022

B

Permit Number: 053803040

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 5959 Alpine Ct (no rural route) City Denton NE, Zip 68339

Owner Bob Sanburn Addresss 6634 Shadow Pines Pl Lincoln, NE 68516

Soil Type (SCS): Kennebec Percolation Rate: 41 min./inch

Date of Tests 6/1/05 to 6/2/05 Weather: Precipitation trace Temperature 83°

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		6/1	1:30p	6/1	5:30p	6/2	12:00p	6	6/2	4:00p	30	11/16	30/.69 = 43
2		"	"	"	"	"	"	"	"	"	"	13/16	30/.81 = 37
3		"	"	"	"	"	"	"	"	"	"	3/4	30/.75 = 40
4		"	"	"	"	"	"	"	"	"	"	7/8	30/.88 = 34
5		"	"	"	"	"	"	"	"	"	"	5/8	30/.63 = 48
6		"	"	"	"	"	"	"	"	"	"	11/16	30/.69 = 43

Sum of Percolation Rates: 245

Average of Rates: 41

Rate Used for Calculation: 41

Person Conducting Percolation Tests

Name: Terri Jakoubek, Raymond Contracting, Inc

Phone: 402-783-2663 or 402-890-3870

Address 13800 NW 40th St

Raymond, NE 68428 #P1198

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

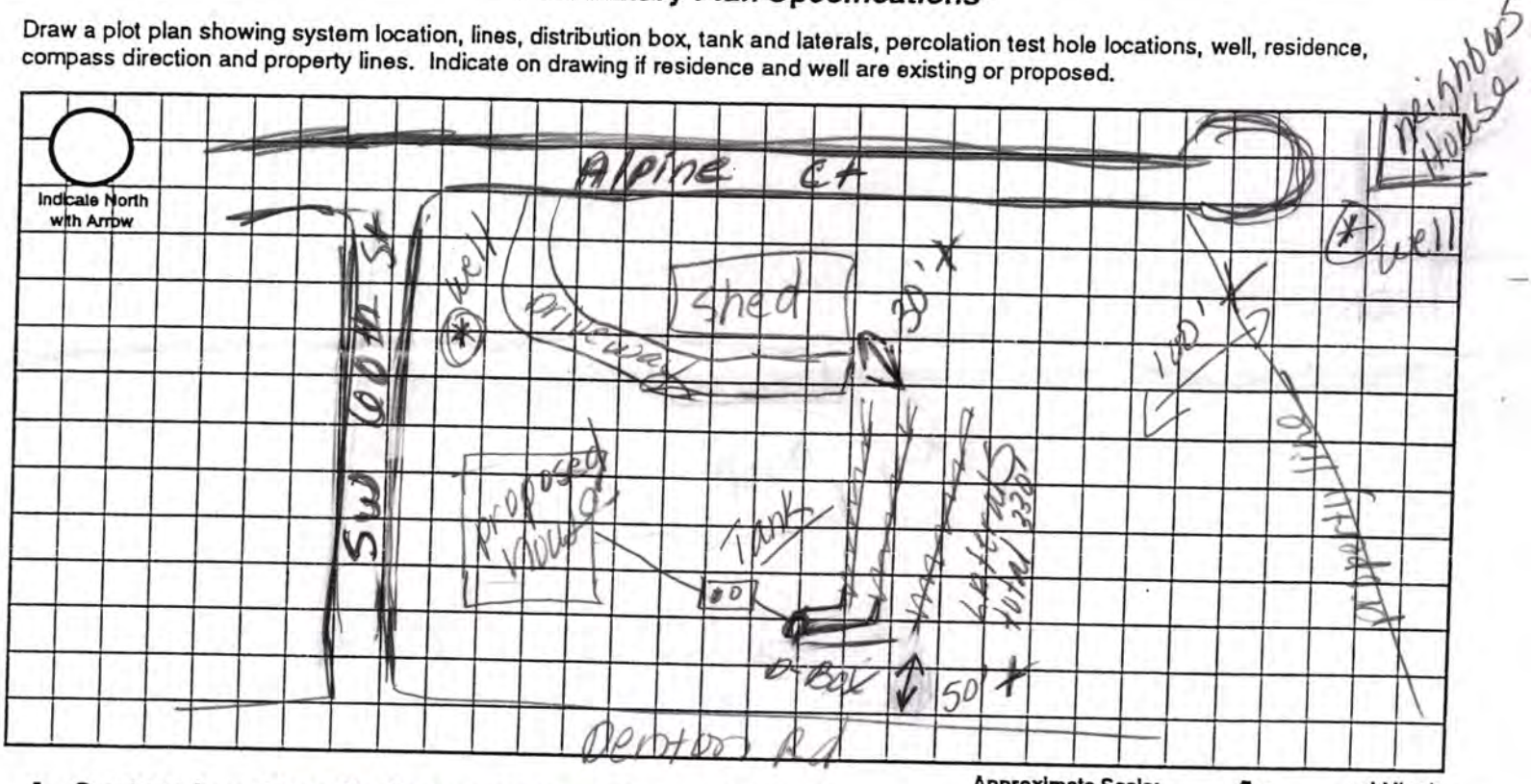
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Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 053803040

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) 5959 Alpine Ct 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 41 (min. per inch) Soil Type: Kennebec SILT LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 1,320 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: H-10 standard

Capacity of Septic Tank 1,500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 330 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 Robert E Jankus (owner) Date 6-13-05

Installer Mark L. Jakubek Date 6-8-05

FORM 23-102 10-96

Timberline
FEB 21 2006

9-5-13

D

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 1-26-06

System Location (Indicate correct number and street)

Address 5959 Alpine Court (no rural route) City Denton NE, Zip

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 122 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 6 ft.
   property line 100+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 20 in.
   Over outlet, diameter 20 in.
   Riser: ☒ above ☐ below grade 1 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: PVC
   Number available outlets: 9
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 7 ft.

D. Absorption Field

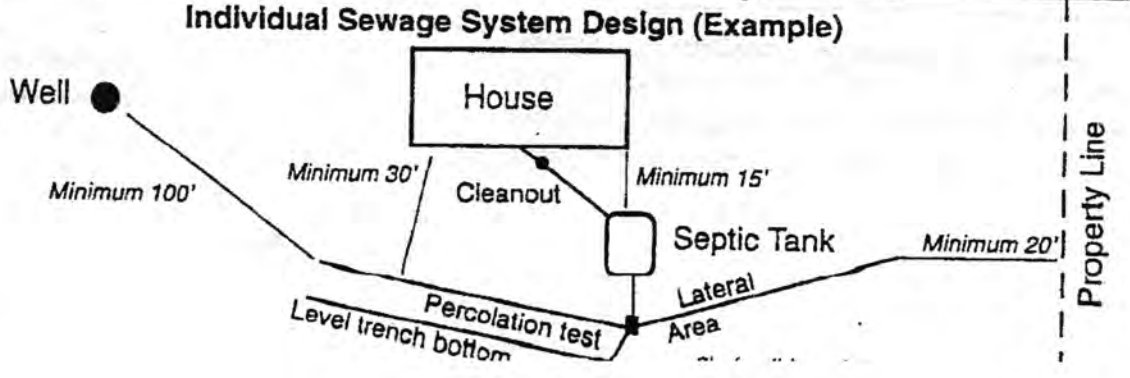
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: 4 Ea Filtrator
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 5
   Length of each line: 56 ft. 52 ft.
   56 ft. 64 ft., 68 ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 38 in
4. Filter material: Dirt
   Depth of material ____ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

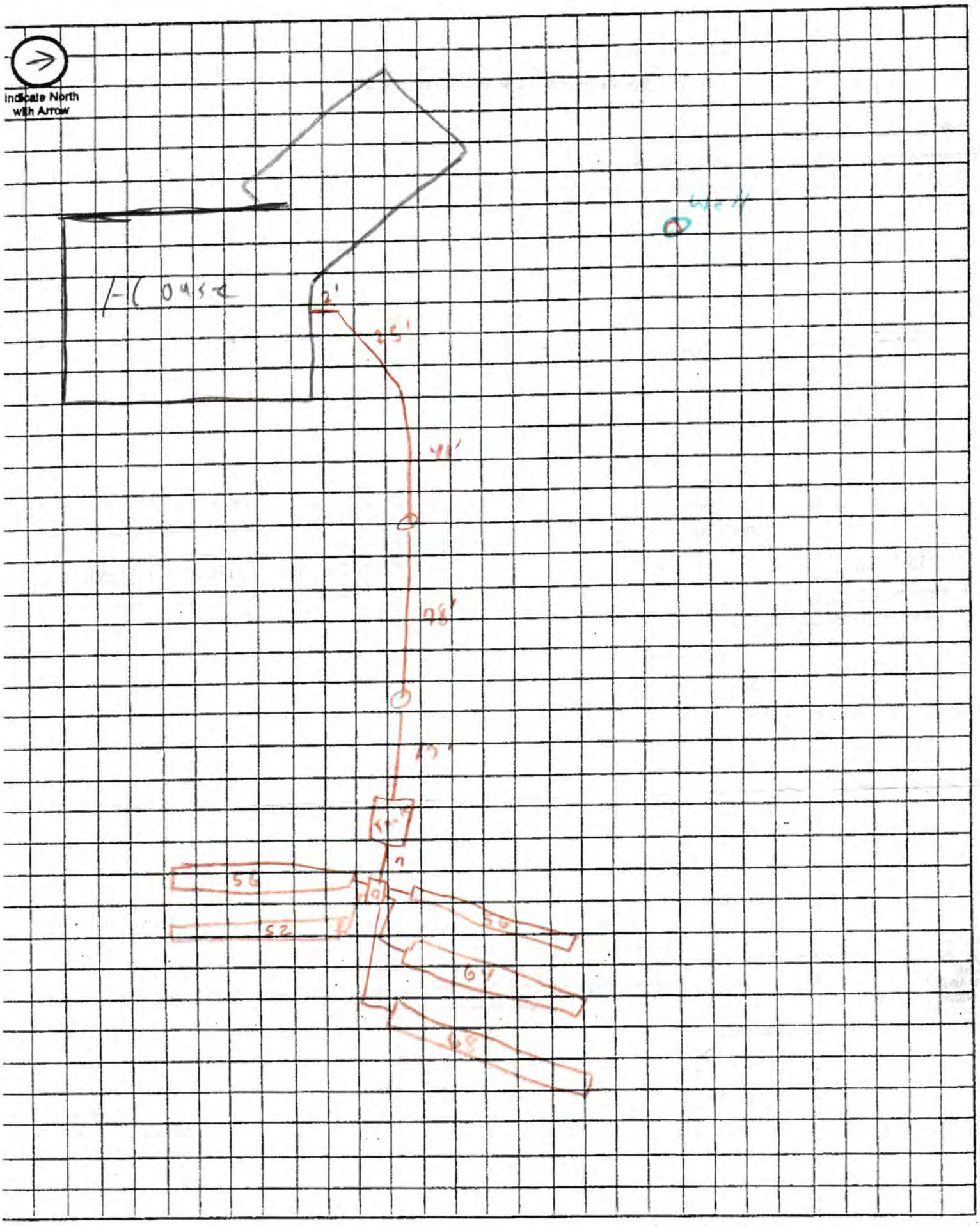
Indicate North with Arrow

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

Individual Sewage System Design (Example)



As Built Drawing



Approximate Scale: ft. = grid line/s