Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009895

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 07380331101

Issued 03/19/07
Expires 03/19/07
Revenue Code 3157

Establishment

LEE PESTER
T9N R5E SEC 14 QTR SW
NW1/4 OF SW1/4-IRREG LOT NEIT
8060 W DENTON-DENTON

FEES: $290.00

Permittee

LEE PESTER
12300 ADAMS ST
PRAIRIE HOME NE 68527

TOTAL: $290.00

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: 07380331101 AH

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: 39.6 acres

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 8060 W Denton (no rural route) City Denton NE, Zip 68339

Legal Description LCR 5938 NW of SW 14 T-9-N R-5-E — — NE I.T.
(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 Lee Pester Signature Lee Pester

Address 12300 Adams City/State/Zip Prairie Home, Ne 68529

☐ Check if owner designed system Home Phone 464-3195 Work Phone 450-0911

C. Contractor

Name Harry L. Muhlbach Company Name H.L. Muhlbach Construction

Address 14305 N 56th St. City/State/Zip Lincoln, Ne 68514

☒ Check if contractor designed system Work Phone 402-435-3815

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 3/19/07 Date frwd 3/19/07 ACTION ☒ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3-12-07 Date frwd 3-12-07 ACTION ☒ Approved ☐ Disapproved Signature Charlotte Boyle
3. **City or County Engineer** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____

— Tank - paid 1/2 7/20/01 — Later 7/20

Installation Final Written Approval

By _____

Date 7/23/07

Business Office Use Only

Date Rec'd 03/19/07
Amt Paid 290.00
Rec'd By m Cash/Check No. 6343

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

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B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 8060 West Denton Rd (no rural route) City Denton NE, Zip 68339

Owner Lee Pester Addresss 12300 Adams Str, Prairie Home, Ne 6852

Soil Type (SCS): Crete-Sharpsburg Percolation Rate: min./

Date of Tests 11-3-06 to 11-4-06 Weather: Precipitation Dry Temperature 20

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 Rate (Min/in)
1	18"	11-3	8:00	11-3	5:15	11-4	1:00	6"	11-4	5:00	30	1 1/8	26.7
2	18"	"	8:05	"	5:20	"	1:05	"	"	5:05	"	1	30.0
3	18"	"	8:10	"	5:25	"	1:10	"	"	5:10	"	1	30.0
4	18"	"	8:15	"	5:30	"	1:15	"	"	5:15	"	7/8	34.3
5	18"	"	8:20	"	5:35	"	1:20	"	"	5:20	"	1 1/4	24.0
6	18"	"	8:25	"	5:40	"	1:25	"	"	5:25	"	7/8	34.3

Sum of Percolation Rates: 179.3
Average of Rates: 30/in
Rate Used for Calculation: 30/in

Person Conducting Percolation Tests

Name: Harry Muhlbach
Phone: 430-7304
Address 14305 N 56th Str Lincoln, Ne 68514

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

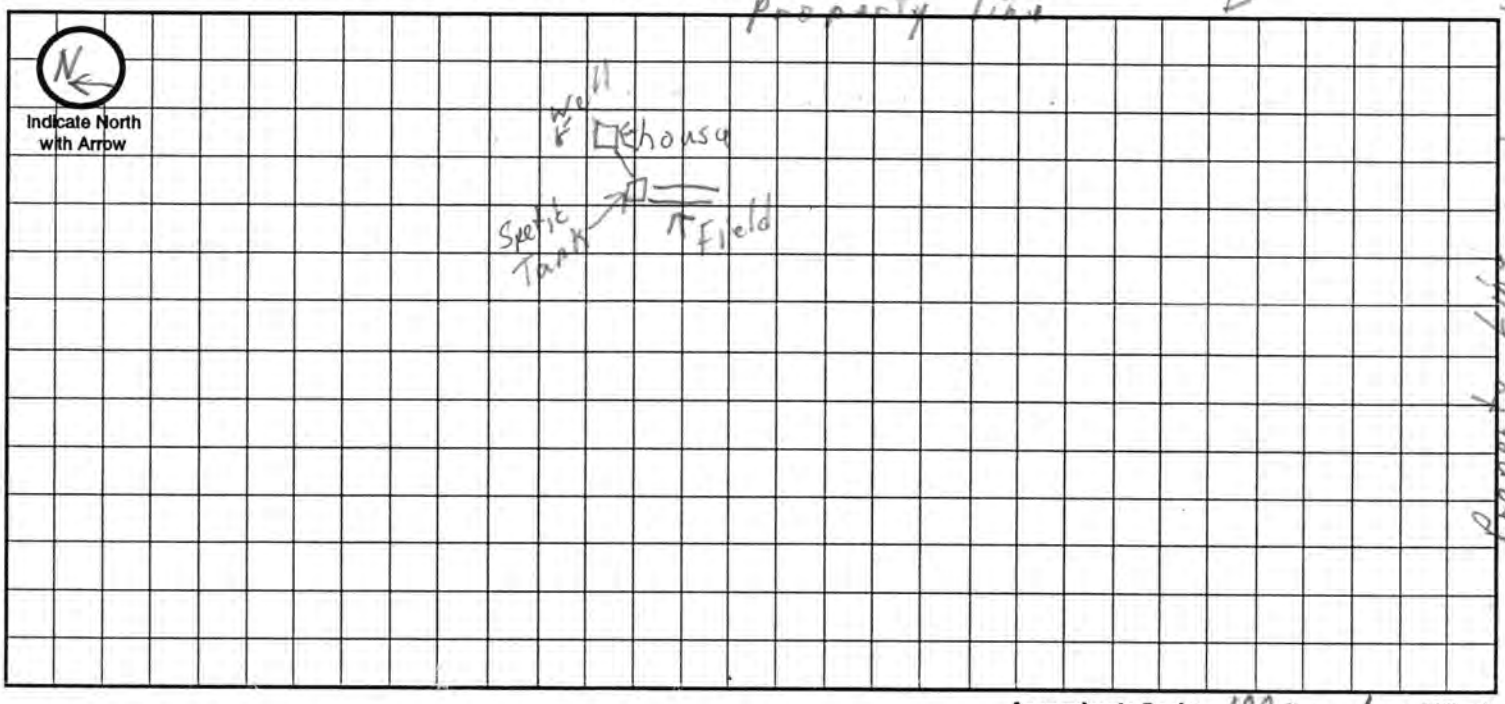
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C

Permit Number:

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: 100 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 8060 West Denton Rd 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 30 (min. per inch) Soil Type: Crete-Sharpsburg Land Slope: 2 %

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

Total Square Feet of Field Required: 750 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed 1

Total Length of Laterals 188 ft. Number of Trenches 2 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 _____

Installer Harry T. Mylliard Date 3-6-07

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address _____ City _____ NE, Zip _____
(no rural route)

A. Building Sewer

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

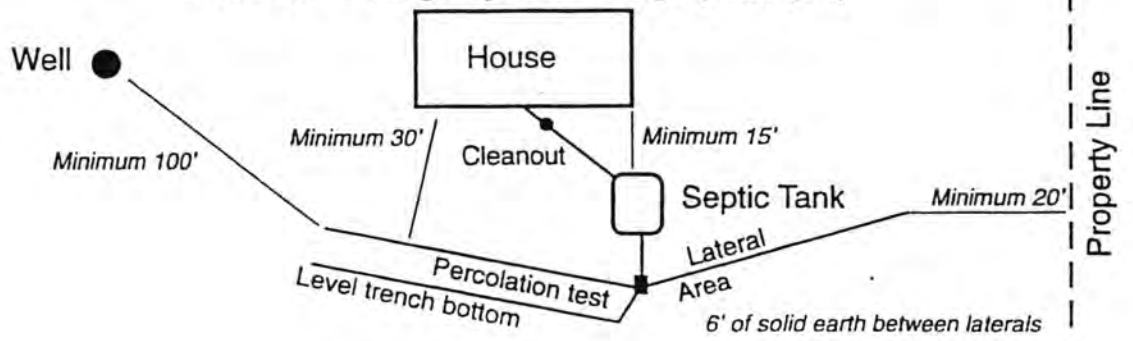
(Provide as-built drawings on back of this form)

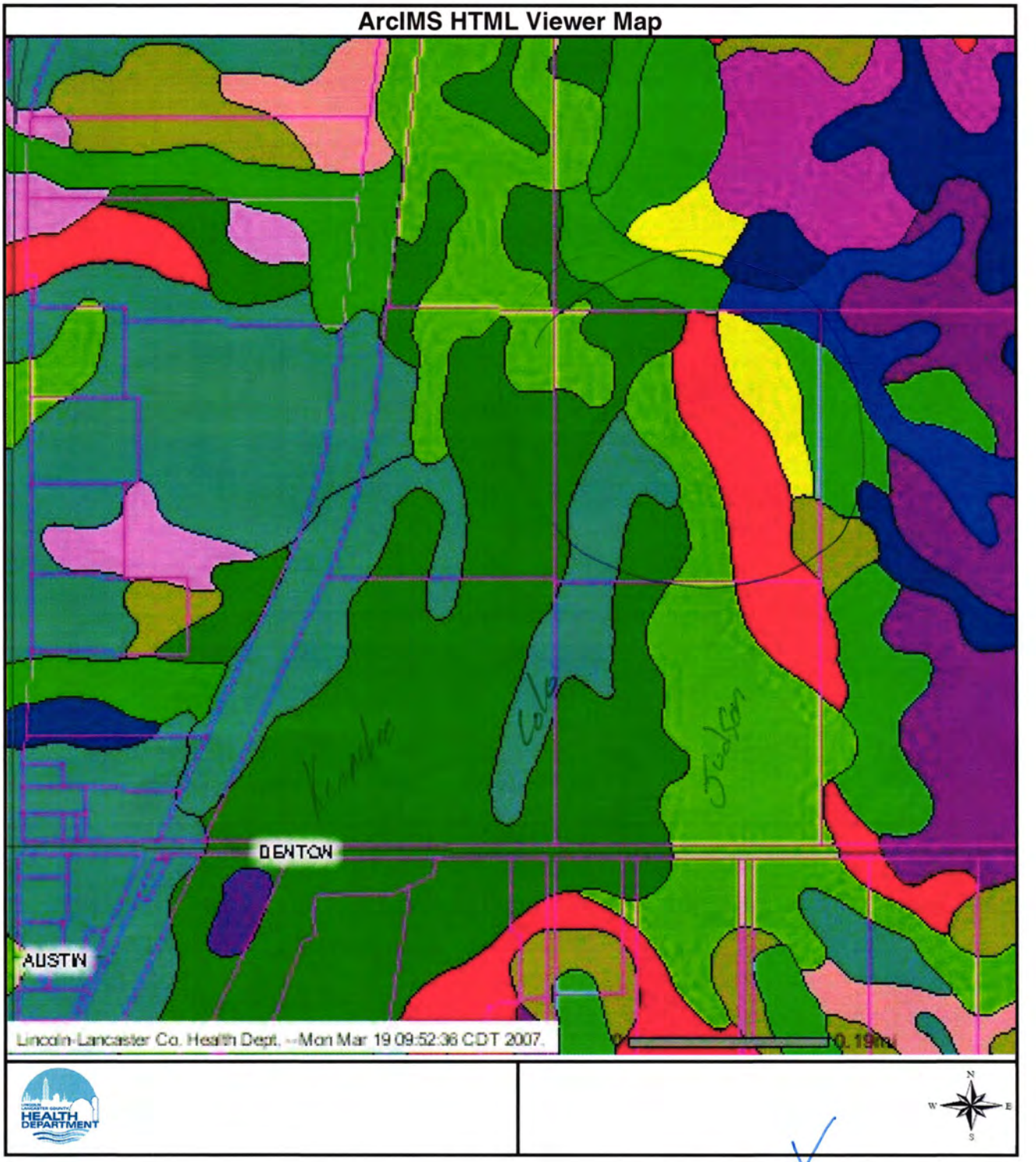
1. Type: ❑ Half rounds ❑ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ❑ fiberglass ❑ plastic ❑ concrete
   ❑ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ 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.

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

Indicate North with Arrow

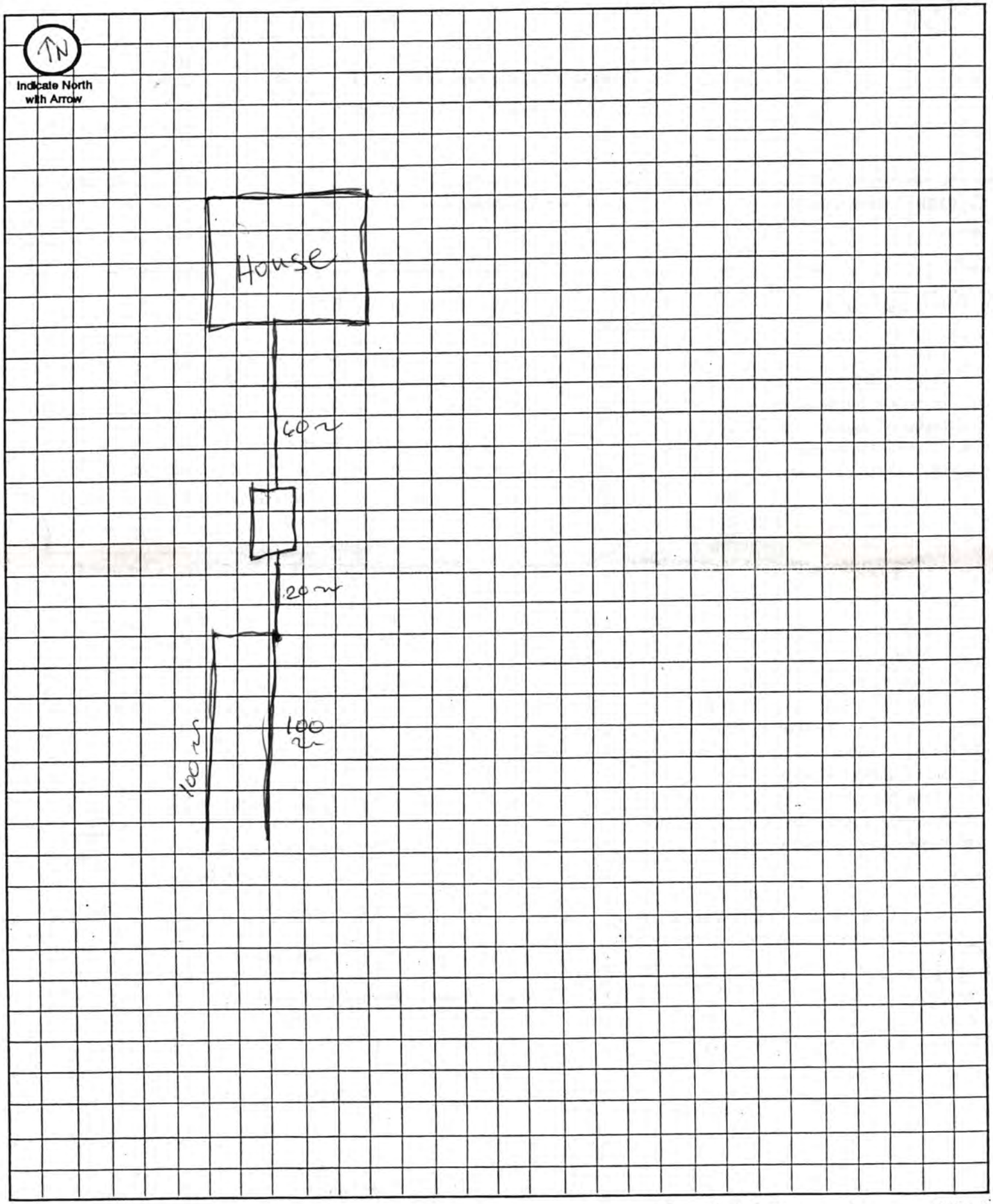
Individual Sewage System Design (Example)





Not in Floodplain

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line/s