# Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
LAGOON

Establishment

BRET CORBRIDGE
T9N R5E SEC 14 QTR NE
E1/2OFNW1/4OFNE1/4
7401 OLD CHENEY RD-DENTON

Permittee

BRET CORBRIDGE
6707 W OLD CHENEY RD
DENTON NE 68339

Permit # 01380238701

Issued 10/17/01
Expires 04/17/02
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

000196

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

**A**

Permit Number: 013802387

# 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 7401 W old Cheney (no rural route) City Denton, NE NE, Zip 68339

Legal Description East half NW Quarter of NE Quarter 14 - 9N - 5E
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 Bret Cavbridge Signature Bret Cavbridge

Address 6707 W old Cheney City/State/Zip Denton, NE 68339

☒ Check if owner designed system Home Phone 797-2417 Work Phone 475-8277

### C. Contractor

Name Gordon Lukes Company Name G-A Backhoe Service

Address 239 S. 214th Street City/State/Zip Eagle, NE 68347

☐ Check if contractor designed system Work Phone 781-2400

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

Designer Name Gordon Luke Firm G-A Backhoe Work Phone 781-2400

### 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 10/17/01 Date frwd 10/17/01 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10/17/01 Date frwd 10/17/01 ACTION ☒ Approved ☐ Disapproved Signature Gary Lyon
3. **City or County Engineer** Date rec'd 10/17/01 Date frwd 10/17/01 ACTION ☒ Approved ☐ Disapproved Signature [illegible]

11/30/01 Need fencing ~~drawing~~ J.C.H.

## Installation Final Written Approval

By Doug Smith

Date 2/7/02

***Business Office Use Only***
Date Rec'd 10/17/01
Amt Paid 200.00
Rec'd By CW. Cash/Check No. 3483

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

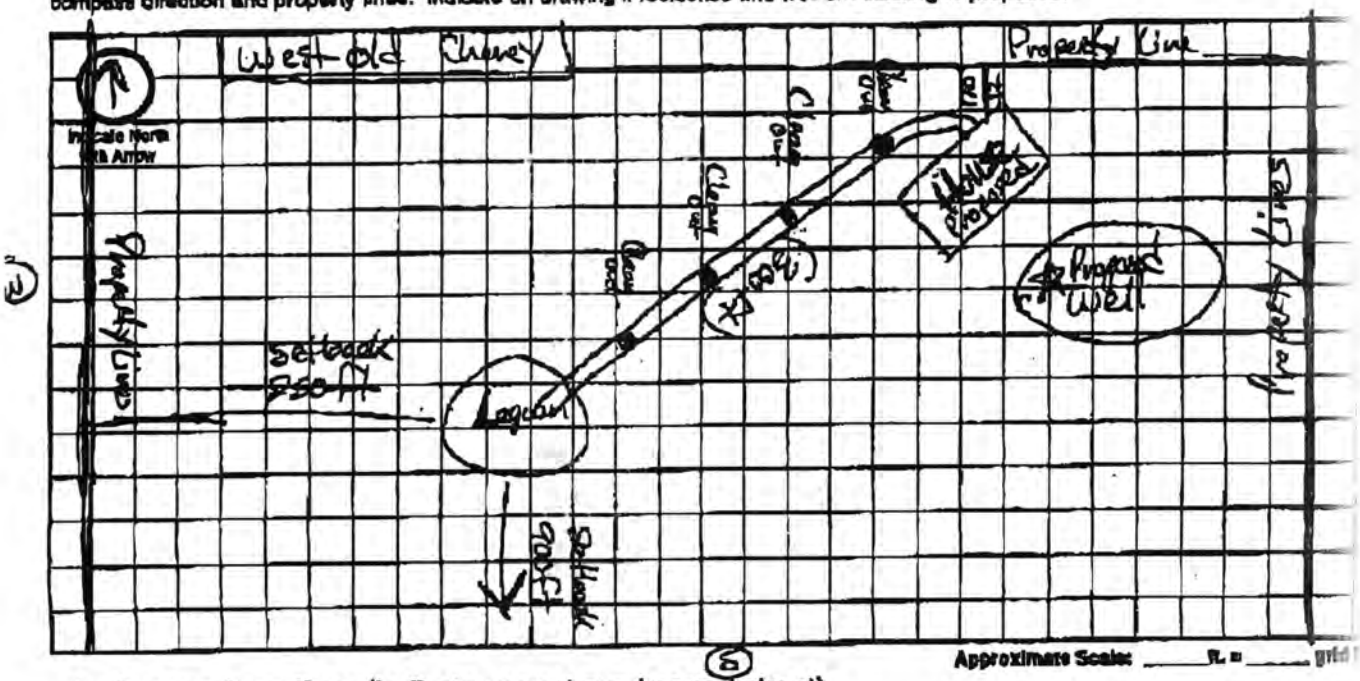
C

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# Sewage Disposal System
## Preliminary Plan Specifications Lagoon

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.




## A. System Location (Indicate correct number and street)

Address (no rural route) 7401 W old Chaney City Gordon NE NE, Zip 68339

## B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other Lagoon

## 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 Lagoon

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 | Ground Water | Pressure Water Lines | Property Lines | Foundations Yours | Foundations Neighbors | All Oth Setbac |
|---|---|---|---|---|---|---|---|---|---|
| Tank (ft) | 50 ☐ | 500 ☐ | 50 ☐ | NA ☐ | 25 ☐ | 20 ☐ | 15 ☐ | 25 ☐ | ☐ |
| Field (ft) | 100 ☐ | 500 ☐ | 50 ☐ | 4 ☐ | 50 ☐ | 20 ☐ | 30 ☐ | 40 ☐ | ☐ |
| Lagoon (ft) | 100 ☒ | 500 ☒ | 50 ☒ | N/A ☐ | 30 ☒ | 50 ☒ | 100 ☒ | 200 ☒ | ☒ |

## E. Required Signatures

Home Building Contractor Bret Cartwright Date 10-15-01

Installer Gordon Sykes G&A Backhoe Service Date 10-16-20

FORM 20-103 10-98

# G & A

## BACKHOE SERVICE

**Gordon Lukes - Owner/Operator**
**2319 South 214th Street**
**Eagle, NE 68347-1995**
**Bus. (402) 781-2400**
**Cell. (402) 450-2409**
**Fax. (402) 781-2411**

01/29/02

This is the as built drawing for 7401 South West Old Cheney Road

