Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 02380246301

Issued 05/06/02
Expires 11/06/02
Revenue Code 3157

Establishment

JOHN R & ANNA M GLEASON
T9N R5E SEC 21 QTR SE
SUBDIV OF LOT 9IT LOT 17
9860 W YANKEE HILL RD-DENTON

FEES: $200.00

TOTAL: $200.00

Permittee

JOHN R & ANNA M GLEASON
1121 COLONY LN
LINCOLN NE 68505

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002175

MAY 0 9 2002

A

Permit Number: 02302463

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

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 9860 W. YANKEE HILL RD (no rural route) City DENTON NE, Zip 68339

Legal Description SE 1/4 1/4 21 Section 9N Township 5E Range LOT 17, SUBDIVISION OF LOT 9 I.T. 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 JOHN R & ANNA M GLEASON Signature _____

Address 1121 COLONY LANE City/State/Zip LINCOLN NE 68505

☐ Check if owner designed system Home Phone 464-5294 Work Phone (402) 474-6603

C. Contractor

Name BRAD SOUTHWICK Company Name SOUTHWICK SEWER & DRAIN

Address 17201 S. 72ND City/State/Zip HICKMAN, NE

☑ Check if contractor designed system Work Phone (402) 475-2462

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 5/6/02 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature Jerrold E. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 5-8-02 Date frwd 5-8-02 ACTION ☐ Approved ☐ Disapproved Signature Charlotte Sell
3. **City or County Engineer** Date rec'd 5-9-02 Date frwd 5-9-02 ACTION ☒ Approved ☐ Disapproved Signature _____

6/19/02 Tank + sewer only - J.C.H.
6/20/02 2 Laterals 6/21/02 3rd lateral OK Need drawing receive

Installation Final Written Approval

By Doug Smith

Date 12/4/02

Business Office Use Only

Date Rec'd 5/6/02
Amt Paid $200.00
Rec'd By CW Cash/Check No. 1116

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

#02-3802463

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPT.
Division of Environmental Health
3140 "N" Street
Lincoln, Nebraska 68510
Phone: 402-441-8000

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 5E ; Section & ¼ Section SE ¼ #21.
Property Dimensions: 234 ft. x 555 ft. Area: 3.0 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☒ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 4-15 to 4-16 . Weather: Precip. none Temp. 70°

OWNER: JOHN R & ANNA M GLEASON
Address: 9860 W. YANKEE HILL RD

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				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.
1		4-15	9:00	4-16	9:00	4-16	12:42	12.0	1:12	10.0	30	2.0	15 min/in.
2			9:02		9:02	4-16	12:43	12.0	1:13	9.75	30	2.25	13.3
3			9:04		9:04	4-16	12:44	12.0	1:14	11.25	30	0.75	40.0
4			9:06		9:06	4-16	12:45	12.0	1:15	11.25	30	0.75	40.0
5			9:08		9:08	4-16	12:46	12.0	1:16	8.00	30	4.00	7.50
6			9:10		9:10	4-16	12:47	12.0	1:17	8.00	30	4.0	7.50

Sum of Percolation Rates: _____
Average of Rates: 20.55
Mean of Rates: _____

Wm. C. Gleason, P.E.
Signature of Person Conducting Test

Address 5701 N. 58th St. Lincoln, NE Phone 402 466-8154.

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): DICKENSON SANDY LOAM
Date: MAY 6, 202

Approved Percolation Rate (a)
A. _____ min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

Fax 474-6604

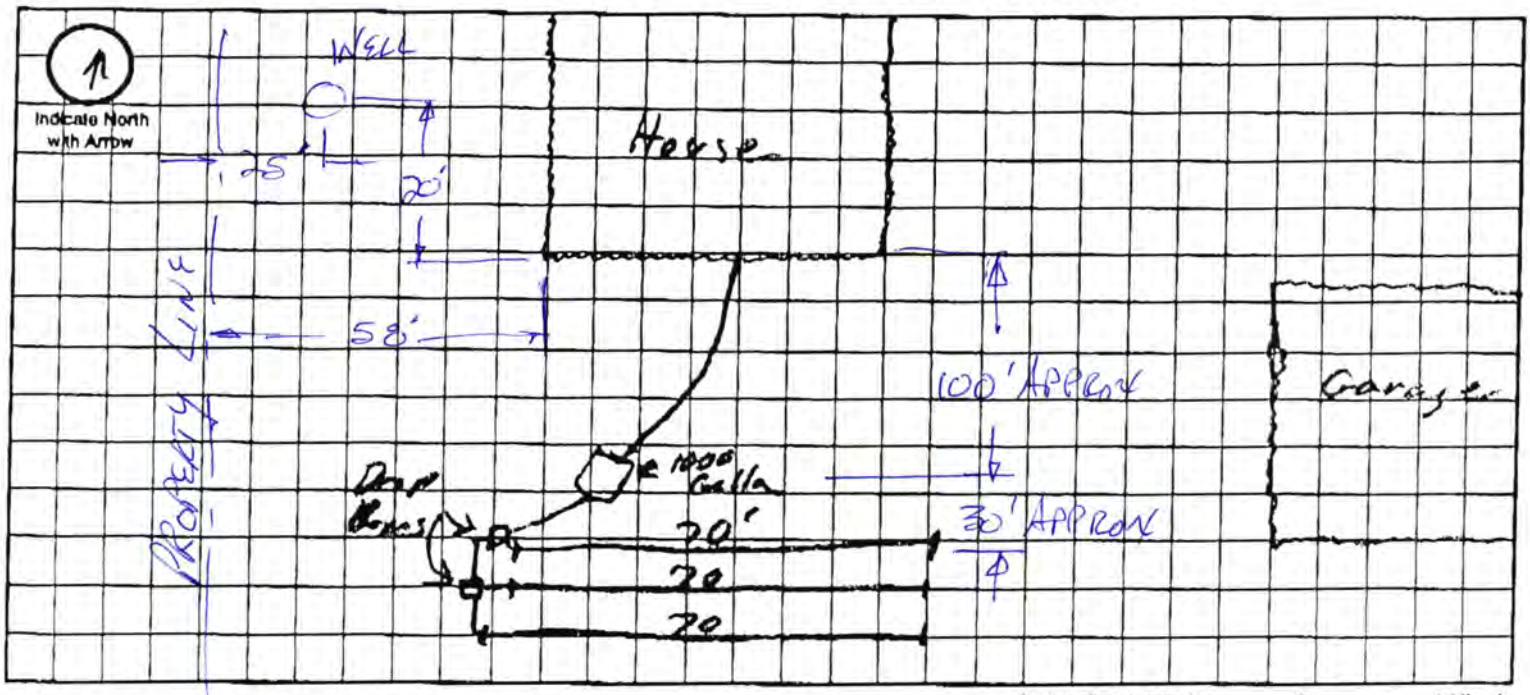
C

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

Permit Number: 02380246 3

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) 9860 W. Yankee Hill 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 40 (min. per inch) Soil Type: Dickinson SANDY LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 825 sq. ft.

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

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 210 (306) 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 30 APR 02

Installer Brad Southwick Date 4-25-02

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 6-20-02

John Gleason

System Location (Indicate correct number and street)

Address 9900 w. Yankee Hill Rd. (no rural route) City Denton NE, Zip 68339

A. Building Sewer

1. Material: PVC Sch 40
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: NA in.
3. Distance between dwelling and septic tank: 125 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line > 50 ft.
   stream NA ft.
   pressure line NA ft.
   property line > 20 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1,000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6x8 in.
   Over outlet, diameter 6x9 in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 13 in.
8. Distances to: Well or suction line > 50 ft.
   Stream NA ft.
   Pressure line > 35 ft.
   Property line > 20 ft.

C. Distribution Box

1. Material: PVC Drop Boxes
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No Tuf-Tite
3. Distance from septic tank: 25 & 38' ft.

D. Absorption Field

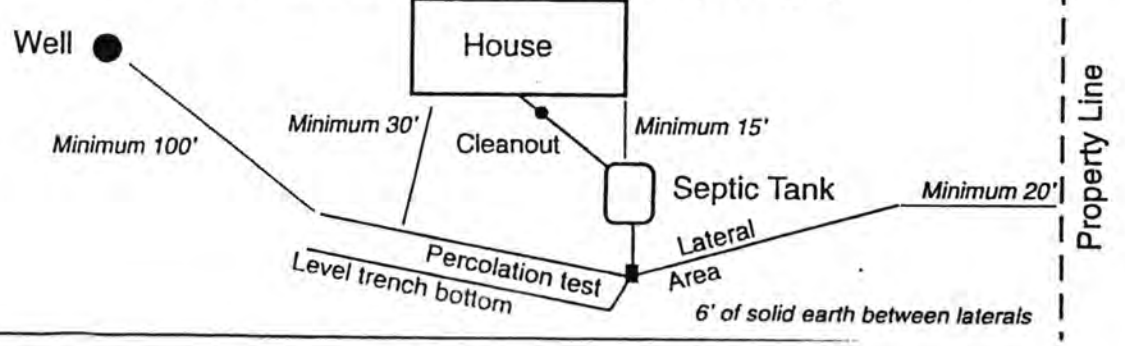
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other Infiltrator (CADS)
2. Lateral lines: Number _____
   Length of each line: 71 ft. 71 ft.
   71 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 6 in/100 ft.
   Average depth 18 in
4. Filter material: Gravelless (Dickenson Sand only)
   Depth of material _____ in.
5. Distances to: Well or suction line > 100 ft.
   Stream NA ft.
   Pressure line > 35 ft.
   Property line > 20 ft.

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

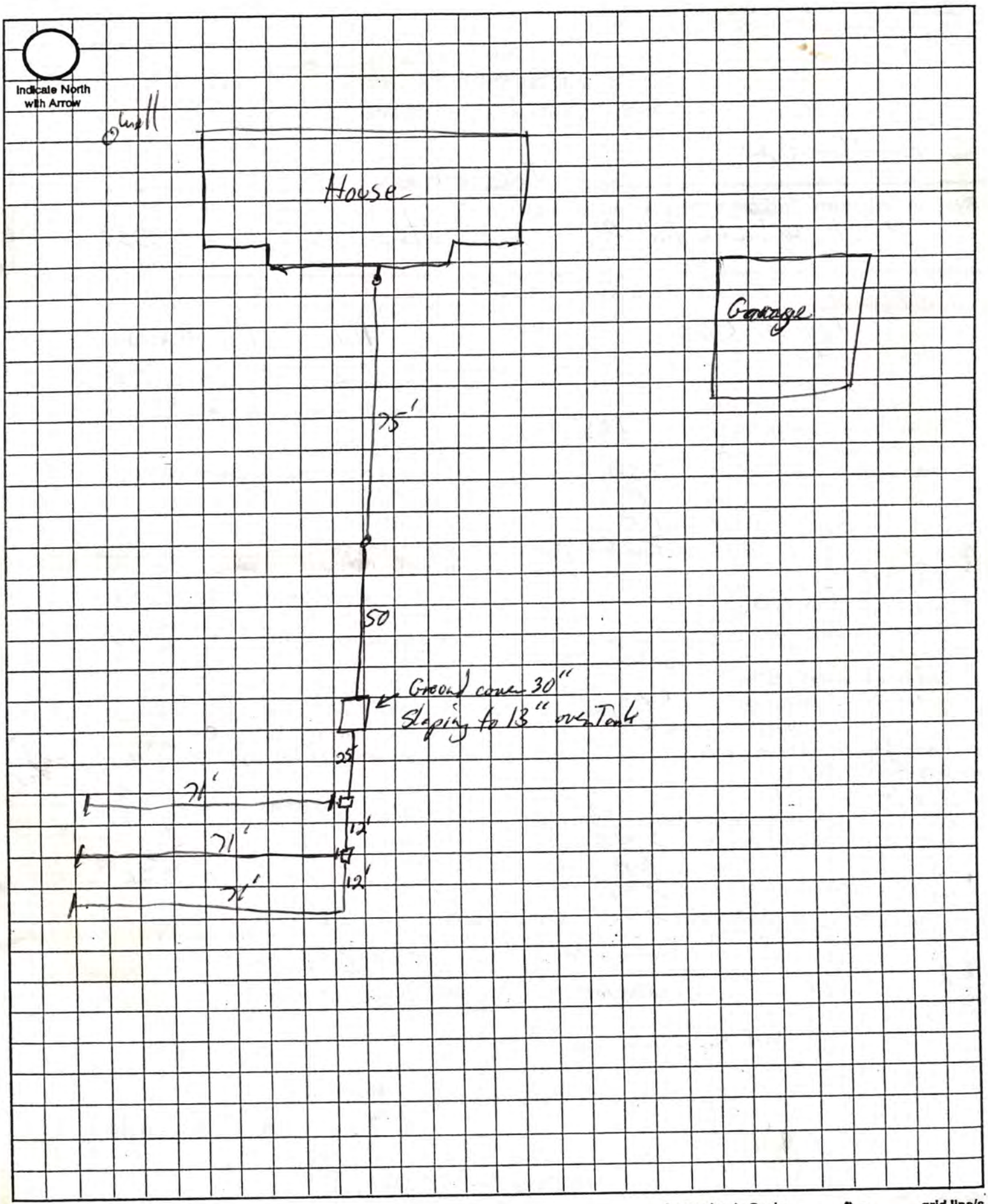
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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