Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005789

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 04380291901

Issued 10/15/04
Expires 04/15/05
Revenue Code 3157

Establishment:
CHRIS & ANNE HOBBS
T9N R5E SEC 24 QTR NE
YANKEE LAKE ACRES BLK 1 LOT 3
6100 YANKEE LAKE RD-DENTON

FEES: $200.00

Permittee:
CHRIS & ANNE HOBBS
6105 S 34 ST
APT 211
LINCOLN NE 68506

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

RECEIVED
OCT 14 2004

A

Permit Number: 04380291901

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 6100 Yankee Lake Rd (no rural route) City Denton NE, Zip 68339

Legal Description NE (1/4) 24 (1/4) 9N (Section) 5E (Township) Yankee Lake Acres (Range) (Subdivision) 1 (Addition) 3 (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 Chris + Anne Hobbs Signature _____

Address 6105 S. 34 # 211 City/State/Zip Lincoln NE

☐ Check if owner designed system Home Phone 423-2478 Work Phone 471-5621

C. Contractor

Name Manzitto Bros Company Name Sam Manzitto, Jr

Address 3341 Pioneers Blvd City/State/Zip Lincoln, NE 68506

☐ Check if contractor designed system Work Phone 402-483-2302

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

Designer Name Lloyd Jirkoubek 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 10/15/04 Date frwd 10/15/04 ACTION ☒ Approved ☐ Disapproved Signature Jerrold "Hood"
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10-15-04 Date frwd 10-15-04 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 10-15-04 Date frwd 10-15-04 ACTION ☒ Approved ☐ Disapproved Signature Jim Plouzek

12/29/04 - Need fence OS.

Installation Final Written Approval

By ~~Doug Amick~~ Doug Amick

Date 12/29/04 3/7/05

Business Office Use Only

Date Rec'd 10/15/04
Amt Paid 200.00
Rec'd By JS Cash/Check No. 5513

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

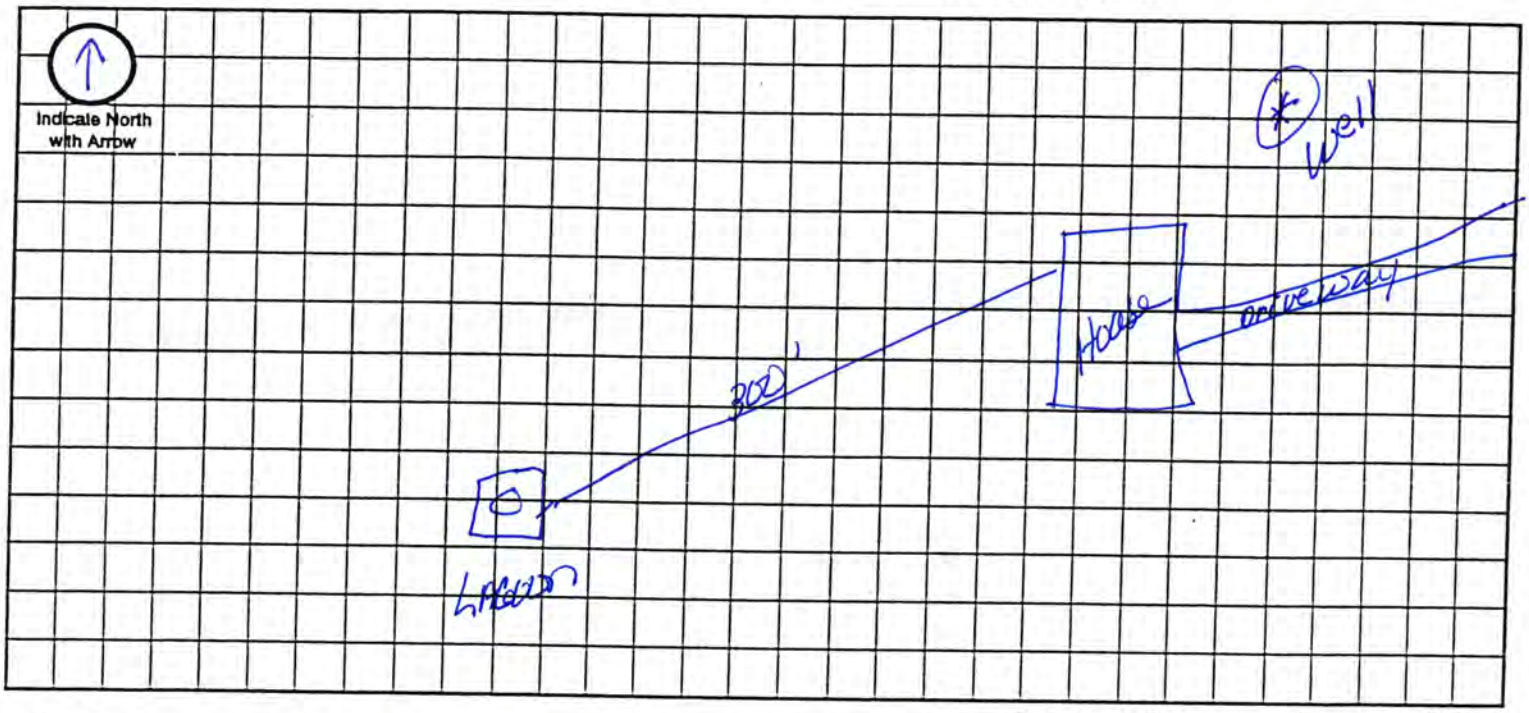
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Phone: 402-441-8022

C

Permit Number: 043802919

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) 6100 Yankee Lake 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 _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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	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 11-13-04

Installer _____ Date 10-14-04

FORM 23-102 10-96

DEC 2 7 2004

D

Permit Number:

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

Sewage Disposal System

As Built Plans & Specifications

Date 12-21-04

System Location (Indicate correct number and street)

Address 6100 Yankee Lake Rd. (no rural route) City Denton NE, Zip 68339

A. Building Sewer

1. Material: Class 160 4"
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 3 in.
3. Distance between dwelling and ~~septic tank~~ Lagoon: 362 ft.
4. Number of clean-outs: 5
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ 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

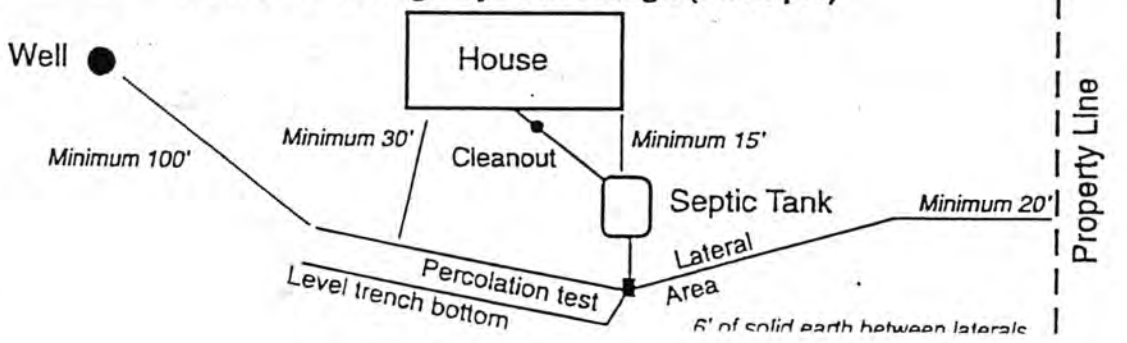
(Provide as-built drawings on back of this form)

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.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

