Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 99380200201

Issued 06/07/99
Expires 12/07/99
Revenue Code 3157

FEES: $150.00

Establishment

MANZITTO BROTHERS
T9N R5E SEC 24 QTR NE
YANKEE LAKE ACRES BLK 3 LOT 3
5701 YANKEE LAKE RD

TOTAL: $150.00

Permitee

MANZITTO BROTHERS
3341 PIONEERS BLVD
LINCOLN NE 68506

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010535

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

A

Permit Number:

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 5701 YANKEE LAKE RD (no rural route) City LINCOLN NE, Zip

Legal Description NE (1/4) 1/4 24 (Section) 9N (Township) 5E (Range) YANKEE LAKE ACRES (Subdivision) 3 (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 MANZITTO BROS Signature

Address 3341 PIONEERS BLVD City/State/Zip LINCOLN, NE 68506

☐ Check if owner designed system Home Phone 402-483-2302 Work Phone 402-483-2302

C. Contractor

Name MANZITTO BROS Company Name MANZITTO BROS

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 LARRY SCHWANK Firm Work Phone 430-6113

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 6/4/99 Date frwd 6/7/99 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/7/99 Date frwd 6/7/99 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 6-7-99 Date frwd 6-7-99 ACTION ☒ Approved ☐ Disapproved Signature Jim Pluym

Installation Final Written Approval

By Jerrold C. Hood M.E.H.S.

Date JUNE 10, 1999

Business Office Use Only

Date Rec'd 06/04/99
Amt Paid 150 ck
Rec'd By LS Cash/Check No. 026633

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

Also well

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

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 5701 Yankee Lake Rd. (no rural route) City Lincoln NE. Zip

Owner Manzito Bros Address 3341 PIONEERS BLVD

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: min./inch

Date of Tests 5-27 to 5-28-99 Weather: Precipitation 72° Temperature

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	32"	5-27	2:00	5-28	7:45	5-28	10:45	24	5-28	11:15	30	1 1/2	20 MIN/IN
2								21 1/8				1 1/4	24 MIN/IN
3								16 3/4				3/4	40 MIN/IN
4													
5								9 1/2				1 1/4	24 MIN/IN
6								11 1/4				1 3/4	17 MIN/IN
7								10 1/2				1 1/2	20 MIN/IN
8								18				3/4	40 MIN/IN

Person Conducting Percolation Tests

Name: Larry Schwabek

Phone: 489-7294

Address 8200 old Cheney Rd

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation: 40

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date 6/ /99

FORM 23-101 10-96

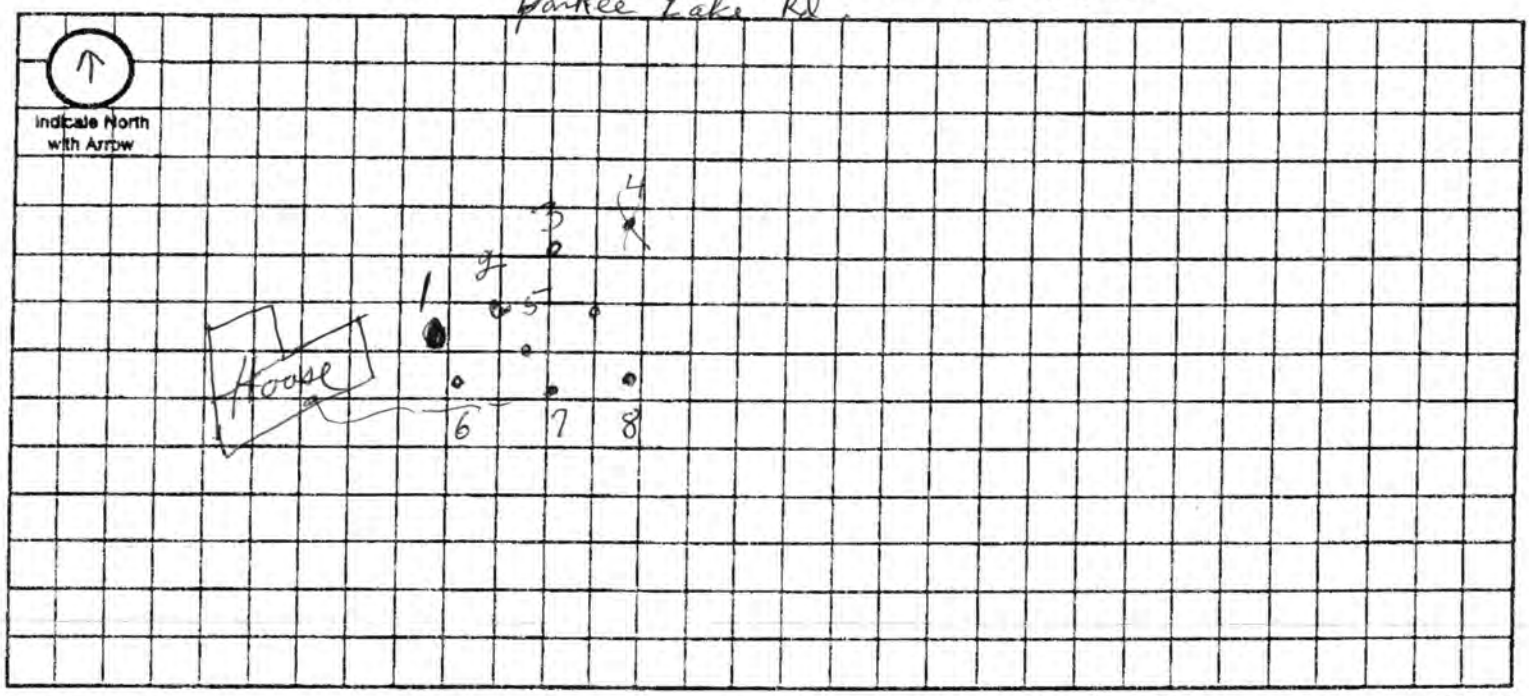
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 7504 5701 Yankee Lake Rd City LINCOLN NE, Zip _____

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: WYMORE SILTY CLAY LOAM Land Slope: — %

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

Total Square Feet of Field Required: 862 sq. ft.

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

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

Total Length of Laterals 215 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 [signature] Date 6.3.99

Installer Larry Schewarck Date 5-28-99

FORM 23-102 10-96

JUN 1 0 1999

D

Permit Number:

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

Sewage Disposal System

As Built Plans & Specifications

Date 6-7-99

System Location (Indicate correct number and street)

Address 7501 Yankee Lake Rd (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 65 ft.
4. Number of clean-outs: 1 inside
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Precast
   Number of compartments: _____
2. Capacity: 1000 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: 10 in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: Precast
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 11 ft.

D. Absorption Field

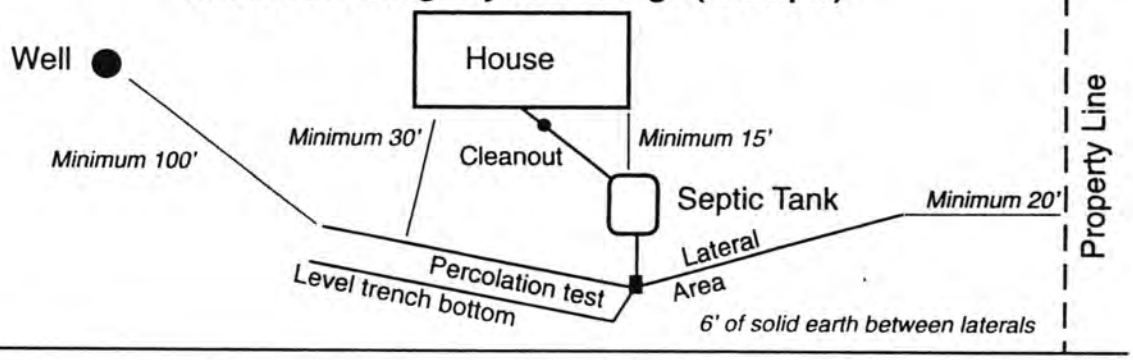
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator 15"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 132
   Length of each line: 82 ft. 75 ft.
   75 ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: Road Gravel
   Depth of material 16 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.

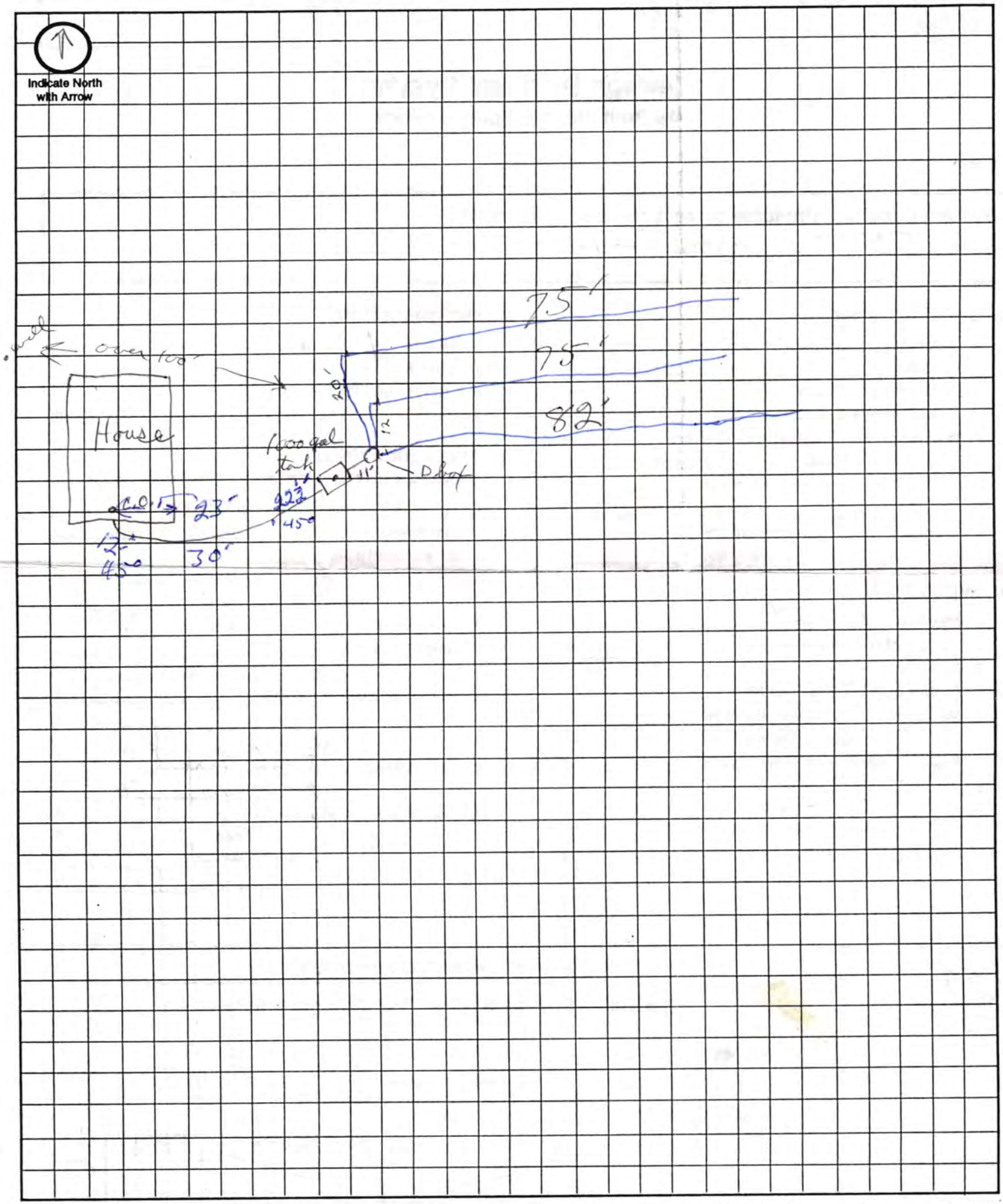
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing by Larry Schubeck



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