LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380190901

Issued 12/07/98
Expires 06/07/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment

MICHAEL G REICHWALDT
T9N R6E SEC 9 QTR NE
W 1/2 OF SE 1/4 OFNE
4701 SW 12 ST

Permittee

MICHAEL G REICHWALDT
4701 SW 12 ST
LINCOLN NE 68523

Issued By Health Director
Lincoln-Lancaster County Health Department

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

008358

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 4701 SW 12TH (no rural route) City Lincoln NE, Zip 68523

Legal Description 9 9N 6E W1/2 SE1/4 NE1/4 sec 9 tw 9R6
(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 Michael & Reichwaldt Signature Michael & Reichwaldt

Address 4701 SW 12TH City/State/Zip Lincoln NE 68523

☐ Check if owner designed system Home Phone 476-3051 Work Phone 440-4073

C. Contractor

Name Gordon Lukes Company Name GNA Backhoe

Address 2319 S 214 City/State/Zip Eagle

☑ Check if contractor designed system Work Phone 781-2400 450-2408

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 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 12/7/98 Date frwd 12/7/98	ACTION ☒ Approved ☐ Disapproved Signature Gerald C. Hood	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 12/7/98 Date frwd 12/7/98	ACTION ☒ Approved ☐ Disapproved Signature Gary Lyon	
3. City or County Engineer	Date rec'd 12-7-98 Date frwd 12-7-98	ACTION ☒ Approved ☐ Disapproved Signature [illegible]	

12-8-98 saver line tank + dist box

Installation Final Written Approval

12-9-98 rec'd, need drawings

By Ron Maynard

Date 2-23-99

Business Office Use Only

Date Rec'd 12/07/98

Amt Paid 150

Rec'd By _____ ~~Cash~~/Check No. 2509

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

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

Owner Mike Reichwaldt Address _____

Soil Type (SCS): Clay loam CRETE SILT LOAM Percolation Rate: _____ min./inch

Date of Tests 12-5-98 to 12-6-98 Weather: Precipitation 0 Temperature 45

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	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	3/4	
2	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	3/4	
3	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	1	
4	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	3/4	
5	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	1	
6	36	12-5	9:30	12-6	4:45	12-6	4:45	6	12-6	6:45	30	1 1/4	

Sum of Percolation Rates: 34
Average of Rates: _____
Rate Used for Calculation: _____

Person Conducting Percolation Tests

Name: Brian Shafer
Phone: 464-0638
Address 3700 Dan Ave.
Lincoln, NE 68504

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood Date DECEMBER 7, 1998

TOTAL P.02

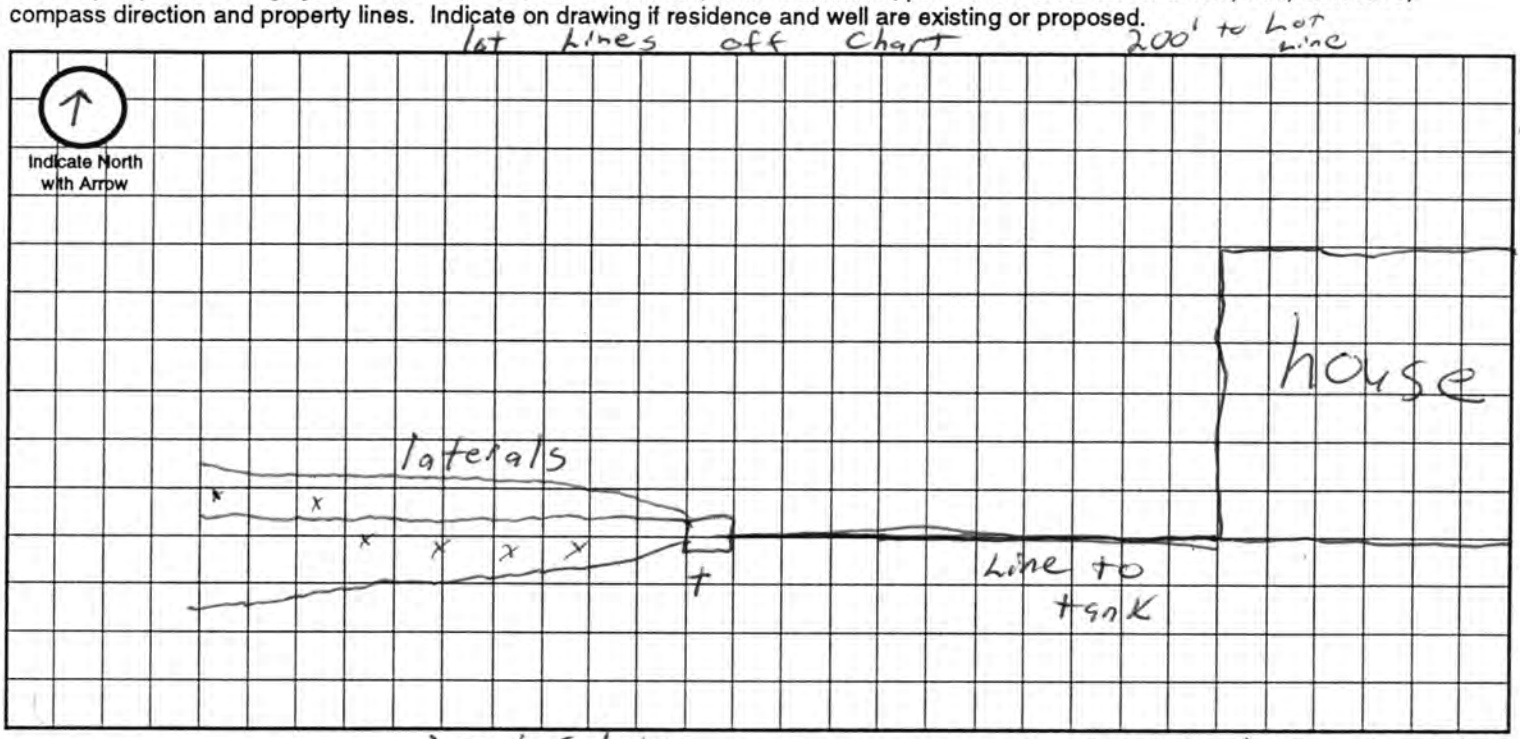
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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: 10 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 4701 SW 12TH City Lincoln NE, Zip 68523

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 34 (min. per inch) Soil Type: CRETE SILT LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 1064 sq. ft.

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

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 266 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 Michael C Kirkham LLC Date 12-7-98

Installer _____ Date _____

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

D

FEB 22 1999

Permit Number: 983801909

Sewage Disposal System

As Built Plans & Specifications

Date 12-7-98

System Location (Indicate correct number and street)

Address 4701 SW 12 (no rural route) City Lincoln NE, Zip 68523

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: Concrete
   Number of compartments: 1
2. Capacity: 1,500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☒ below grade 16 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 32-34 in.
8. Distances to: Well or suction line 300' + ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line NA 300+ ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 6' 3" ft.

D. Absorption Field

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

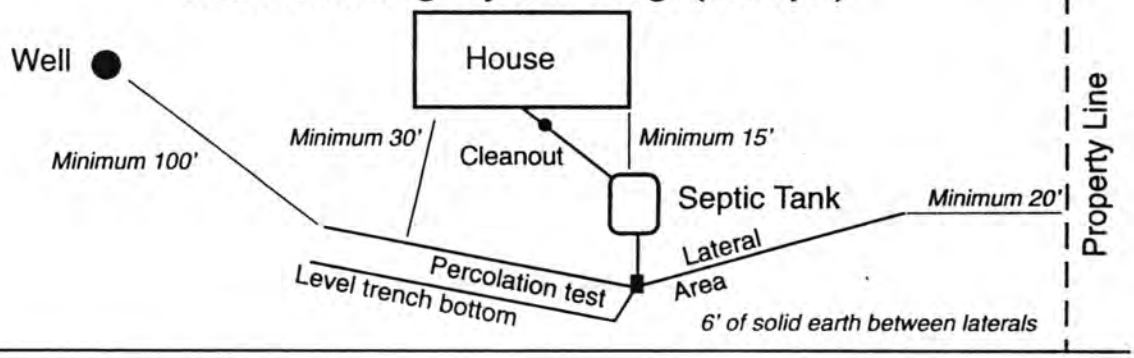
1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 15"
   or perforated pipe: NA
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other Infiltrator EQ24
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 5 ft.
   Slope 3 in/100 ft.
   Average depth 48 in
4. Filter material: 2A Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 300+ ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line NA 300+ ft.

20 Acres

Indicate North with Arrow

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

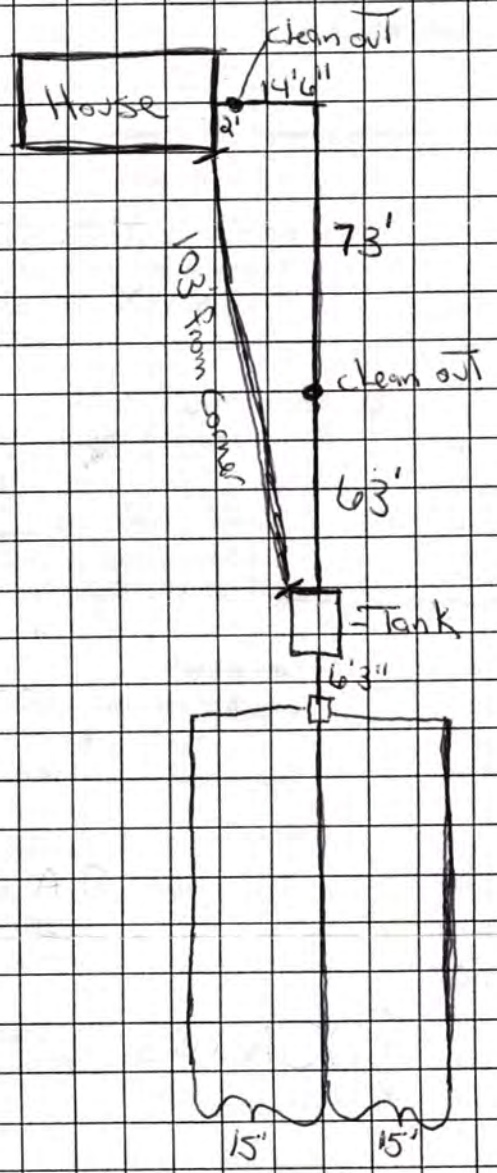
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

Indicate North with Arrow



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