Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

004934

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit #: 04380281701

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

Establishment:
DAVID D SHIPPERBOTTOM
T9N R6E SEC 17 QTR NW
ROBERTS IRONWOOD EST BLK 1 LOT 5
3700 BUCKTHORNE RD

FEES: $200.00

Permittee:
DAVID D SHIPPERBOTTOM
135 S EAST AVE
HALLAM NE 68368

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
APR 15 2004

A

Permit Number: 04380281701

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 3700 Buckthorne Rd (no rural route) City Lincoln NE, Zip ~~NE~~ 68523

Legal Description NW (1/4) 1/4 17 Section 9N Township 6E Range Roberts Ironwood Estates Subdivision Addition 1 Block 5 Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name David Shipperbottom Signature David D Shipperbottom

Address 135 S. East Ave City/State/Zip Hallam NE 68368

☐ Check if owner designed system Home Phone 402-797-0329 Work Phone 402-429-0800

C. Contractor

Name _____ Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Lloyd Jakoubek Firm Raymond Contracting, Inc Work Phone 402-890-6009

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 500 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 4/15/04 Date frwd 4/21/04	**ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd 4-21-04 Date frwd 4-21-04	**ACTION** ☒ Approved ☐ Disapproved Signature	
3. **City or County Engineer**	Date rec'd 4/21/04 Date frwd 4/21/04	**ACTION** ☒ Approved ☐ Disapproved Signature	

Line, tank, lateral 10/14/04 Drawn

Installation Final Written Approval

By _____

Date 10/21/04

Business Office Use Only

Date Rec'd 4/15/04
Amt Paid $200.00
Rec'd By CW Cash/Check No. 5304

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

Lincoln-Lancaster County Health Department
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B

Permit Number: 043802817

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 3700 Buckthorn Rd (no rural route) City Lincoln NE, Zip 68523

Owner Dave Shipperbottom Addresss 135 S. East Ave., Hallam, NE 68368

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 48 min./inch

Date of Tests 4/12/04 to 4/13/04 Weather: Precipitation 0 Temperature 48°

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	24	4/12	10:00a	4/12	2:00p	4/13	10:00a	6	4/13	2:00p	30	5/8	0.63/30 = 48
2	28	"	"	"	"	"	"	"	"	"	"	1	1.00/30 = 30
3	27	"	"	"	"	"	"	"	"	"	"	5/8	0.63/30 = 48
4	25	"	"	"	"	"	"	"	"	"	"	1 1/4	1.25/30 = 24
5	24	"	"	"	"	"	"	"	"	"	"	1	1.00/30 = 30
6	24	"	"	"	"	"	"	"	"	"	"	2 3/8	2.38/30 = 13

Sum of Percolation Rates: 193

Average of Rates: 32

Rate Used for Calculation: 48 - 20mpi variance

Person Conducting Percolation Tests

Name: Terri Trakoubek, Raymond Contracting, Inc

Phone: 402-783-2663 or 402-890-3870

Address 13800 Nw 70th St
Raymond, NE 68428

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date APRIL 15, 2004

FORM 23-101 10-95

Lincoln-Lancaster County Health Department
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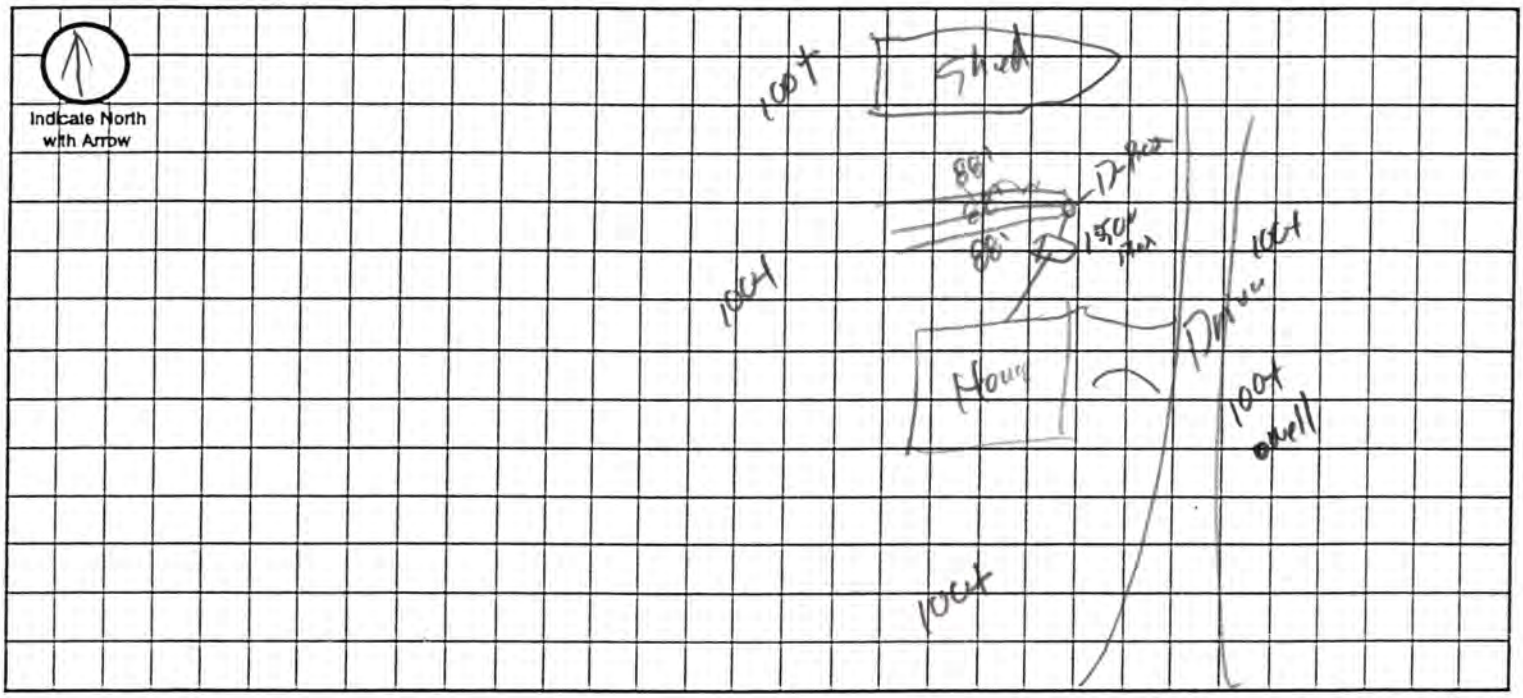
C

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) 3700 Buckthorn Rd 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 48 (min. per inch) Soil Type: W Land Slope: _____ %

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

Total Square Feet of Field Required: 1,320 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: ADS H-10 Standard

Capacity of Septic Tank 1,500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 264 ft. Number of Trenches 3 Trench Width 5'

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 _____

Installer Mike Johnson Date 4-15-04

OCT 2 0 2004

D

Permit Number:

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Phone: 402-441-8022

Sewage Disposal System

As Built Plans & Specifications

Date 10-15-04 Shipperbottom

System Location (Indicate correct number and street)

Address 3700 Buckthorn Rd (no rural route) City Lincoln NE, Zip 68523

A. Building Sewer

1. Material: ~~ABS~~ class 160
   Diameter: 4 in.
2. Distance above basement floor: 60 in.
   or distance below basement floor: X in.
3. Distance between dwelling and septic tank: 40 ft.
4. Number of clean-outs: 2
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: concrete
   Number of compartments: one
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade At grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 20" in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: PVC
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8' ft.

D. Absorption Field

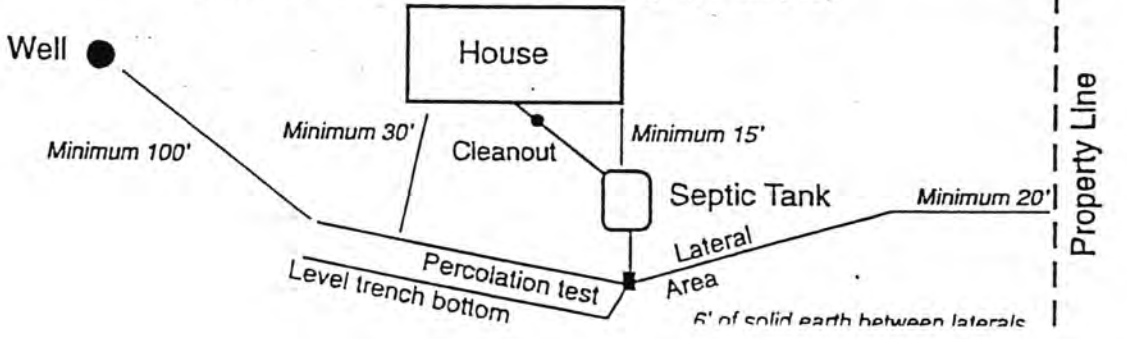
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 11" Tall 34" wide.
   or perforated pipe:
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other 330'
2. Lateral lines: Number ~~4~~ 3
   Length of each line: 112. ft. 110 ft.
   110 ft. ft., ft.
3. Trench dimensions: Width 4' ft.
   Slope Flat in/100 ft.
   Average depth 27" in
4. Filter material: Dirt
   Depth of material 100+ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50+ 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

