Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005854

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 04380293001

Issued 11/12/04
Expires 05/12/05
Revenue Code 3157

Establishment
TERRY ULLSPERGER
T9N R6E SEC 17
ROLLING MEADOWS-1ST BLK 5 LOT 2
6700 SW 34 ST

FEES: $200.00

Permittee
TERRY ULLSPERGER
816 MARY CT
LINCOLN NE 68522-1674

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

A

Permit Number: 04380293001

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 6700 S.W. 34TH ST. (no rural route) City LINCOLN NE, Zip 68523

Legal Description 1/4 1/4 Section 17 Township 9N Range 6E Subdivision ROLLING MEADOWS 1ST Addition 5 Block 2 Lot

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Terry Ullsperger Signature Terry Ullsperger

Address 816 mary court City/State/Zip Lincoln Ne

☐ Check if owner designed system Home Phone 438-8559 Work Phone 540-4465

C. Contractor

Name ROB CHAMPOUX Company Name PRAIRIE HOME BUILDERS INC.

Address 2045 S. FOLSOM ST. SUITE "A" City/State/Zip LINCOLN, NE 68522

☒ Check if contractor designed system Work Phone 476-6597 EXT 101

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 11/12/04 Date frwd 11/16/04 ACTION ☒ Approved ☐ Disapproved Signature Jerrold E. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 11-16-04 Date frwd 11-16-04 ACTION ☒ Approved ☐ Disapproved Signature _____

- Site inspection 4/27/05

Installation Final Written Approval

By _____

Date 5/3/05

Business Office Use Only

Date Rec'd 11/12/04

Amt Paid $200.00

Rec'd By cw. Cash/Check No. 19780

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:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street) Rolling Meadows

Address Blk 5 Lot 2 6700 SW 34TH ST. (no rural route) City Lincoln NE, Zip 68523

Owner Prairie Homes Addresss 2045 S. FOLSOM ST. SUITE "A" LINCOLN, NE 68522

Soil Type (SCS): SHARPSBURG SILTY CLAY LOAM Percolation Rate: 50.29 min./inch

Date of Tests 10/14/04 to 10/15/04 Weather: Precipitation 0 Temperature 50's.

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	10/14	13:00	10/14	17:00	10/15	12:15	6	10/15	16:15	30m	1/2	60
2	"	"	"	"	"	"	"	"	"	"	"	5/8	48
3	"	"	"	"	"	"	"	"	"	"	"	5/8	48
4	"	"	"	"	"	"	"	"	"	"	"	1/2	60
5	"	"	"	"	"	"	"	"	"	"	"	3/4	40
6	"	"	"	"	"	"	"	"	"	"	"	5/8	48
7	"	"	"	"	"	"	"	"	"	"	"	5/8	48

Sum of Percolation Rates: 352

Average of Rates: 50.29

Rate Used for Calculation: 50.29

Person Conducting Percolation Tests

Name: Phillip Malley

Phone: 304-4296

Address LINCOLN NE 68532 6005 W. "A" ST

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

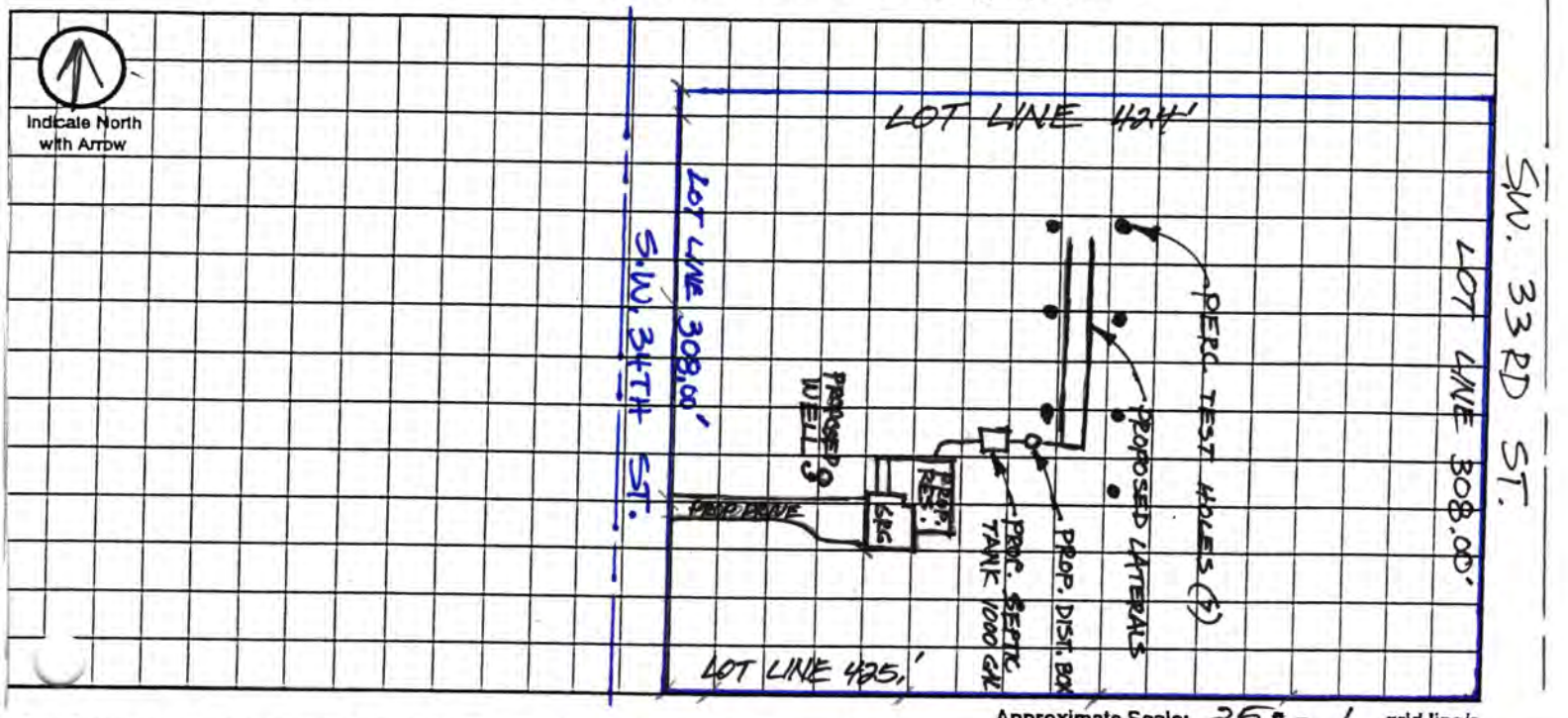
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C

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: 25 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 6700 S.W. 34TH ST. 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 50.29 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: 1 %

Type of Absorption System: ☐ Trench ☒ Bed ☐ Other

Total Square Feet of Field Required: 990 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: 1 Number of Distribution Laterals per Bed 3

Total Length of Laterals 247.5 ft. Number of Trenches 3@82.5' & 2@123.75' ea, 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 ☒	☒
La (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Gordon Lukes Date 11-12-04

Installer Gordon Lukes Date 11-12-04

RM 23-102 10-96

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D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address 6700 SW 34th (no rural route) City LINCOLN NE, Zip _____

A. Building Sewer

1. Material: 4" PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 6 in.
3. Distance between dwelling and septic tank: 104 ft.
4. Number of clean-outs: ONE @ 52ft
5. Distances to: well or suction line 100 ft.
   stream / ft.
   pressure line / ft.
   property line 200 ft.

Septic Tank

1. Material: CONCRETE
   Number of compartments: ONE
2. Capacity: ~~1000gal~~ 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 4 in.
   Over outlet, diameter 4 in.
   Riser: ☐ above ☐ below grade LEVEL in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line 150 ft.
   Stream / ft.
   Pressure line / ft.
   Property line 58 ft.

C. Distribution Box x 3

1. Material: PLASTIC
   Number available outlets: ONE ON EACH
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 3ft, 18ft, 23ft ft.

D. Absorption Field

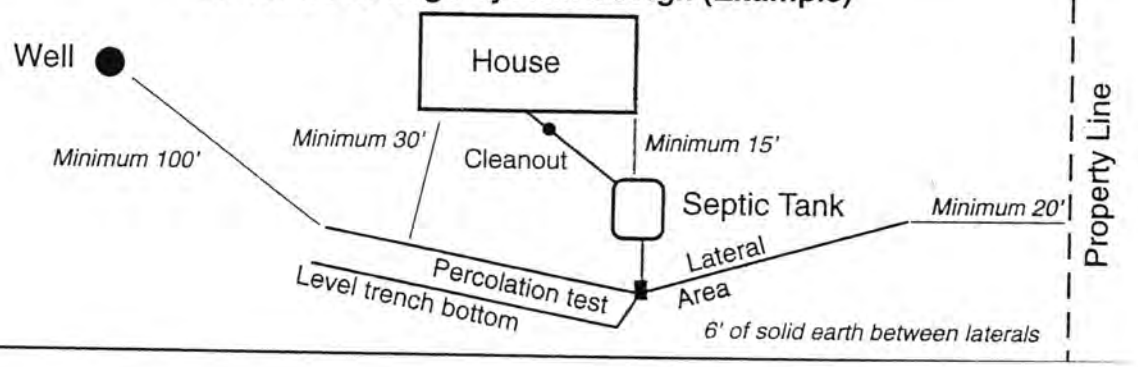
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 3ft
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 87' 6" ft. 87' 6" ft.
   75 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope _____ in/100 ft.
   Average depth 4 in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line OVER 200 ft.
   Stream / ft.
   Pressure line / ft.
   Property line 34 ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96