Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

009930

(402) 441-8000

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Establishment

CLEMENT SOUCIE
T9N R6E SEC 17
SOUTH FORTY BLK 1 LOT 1
6720 SW 40 ST

Permittee

CLEMENT SOUCIE
6720 SW 40 ST
LINCOLN NE 68523

Permit # 07390087001

Issued 04/18/07
Expires 04/18/08
Revenue Code 3157

FEES: $160.00

TOTAL: $160.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

0739008700 1 of

Individual Sewage Disposal System
Application to Alter, Extend or Repair

❒Municipal Code 24.38 ❒County Resolution Number 2832

Date: 4-17-07	File No.:

The undersigned hereby applies for a permit to: ❒ **ALTER** ☑ **EXTEND** ❒ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

PAR # 09-17-301-001-000 LOR 5960

1. **Legal description of property:**
   Township 9 Range 6 Section 17 1/4 Section _____
   Block 1 Lot 1 Addition SOUTH FOURTY
   Street Address 6720 SW 40th (FORMER 6500)

2. **Property use:** ☒ residential ❒ commercial ❒ other use
   Number of bedrooms 2 Describe _____

3. **Type of Present Individual Disposal System:** ☒ septic tank ❒ lagoon ❒ other

4. **Description of proposed alteration, extension or repair:** Add 100 ft INFILTRATORS

5. **Work to be done by:** ❒ owner ❒ contractor's name Melvin Wagner

6. **Estimated project:** a. Repair, replace or minor extension with a cost of less than $400.00 (no fee required).
   b. Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operation, location, or type of the system is being changed.

Print Name Clement Soucie Address 6720 SW 40th Phone 402-310-1155
Applicant Signature (owner or lessee) Clement Soucie

9160

Please include the permit fee ($~~50.00~~) with this application

(Please do not write below this line)

Date rec'd 4/18/2007 REVIEW: ☑ approved ❒ disapproved By: JS Mc

Site visits:
Date _____ By _____
Date _____ By _____
Date _____ By _____

Installation final written approval
Date ~~5/4/07~~ 5/4/07 By Dave Ann

Return to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE. 68510
441-8022

4/18/07 #1574 es

White - EH Pink - Business Office Revised 1/98

360 "

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 23 Apr. '07 Kim Sousie

System Location (Indicate correct number and street)

Address 6720 SW 40th (no rural route) City LINCOLN NE, Zip 68522

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 75 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line NA ft.
   stream NA ft.
   pressure line OVER 50 ft.
   property line OVER 50 ft.

B. Septic Tank

1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade 0 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 36 in.
8. Distances to: Well or suction line OVER 100 ft.
   Stream NA ft.
   Pressure line OVER 50 ft.
   Property line OVER 50 ft.

C. Distribution Box

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

D. Absorption Field

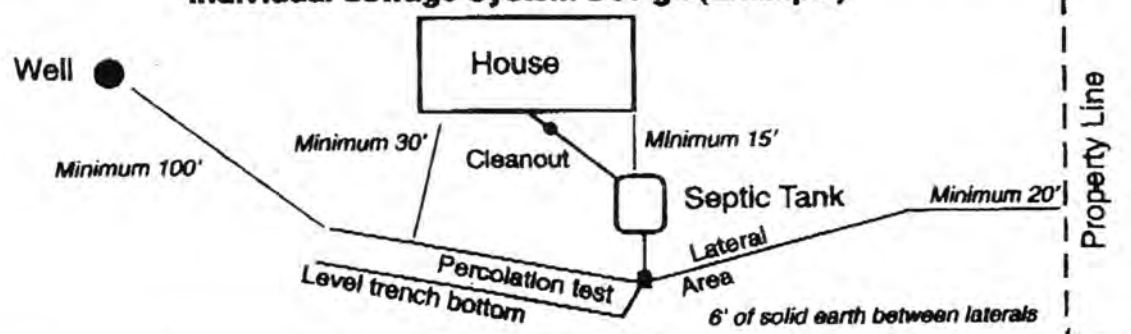
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ 100 ft ☐ other INFILTRATORS
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.

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

Indicate North with Arrow

Individual Sewage System Design (Example)

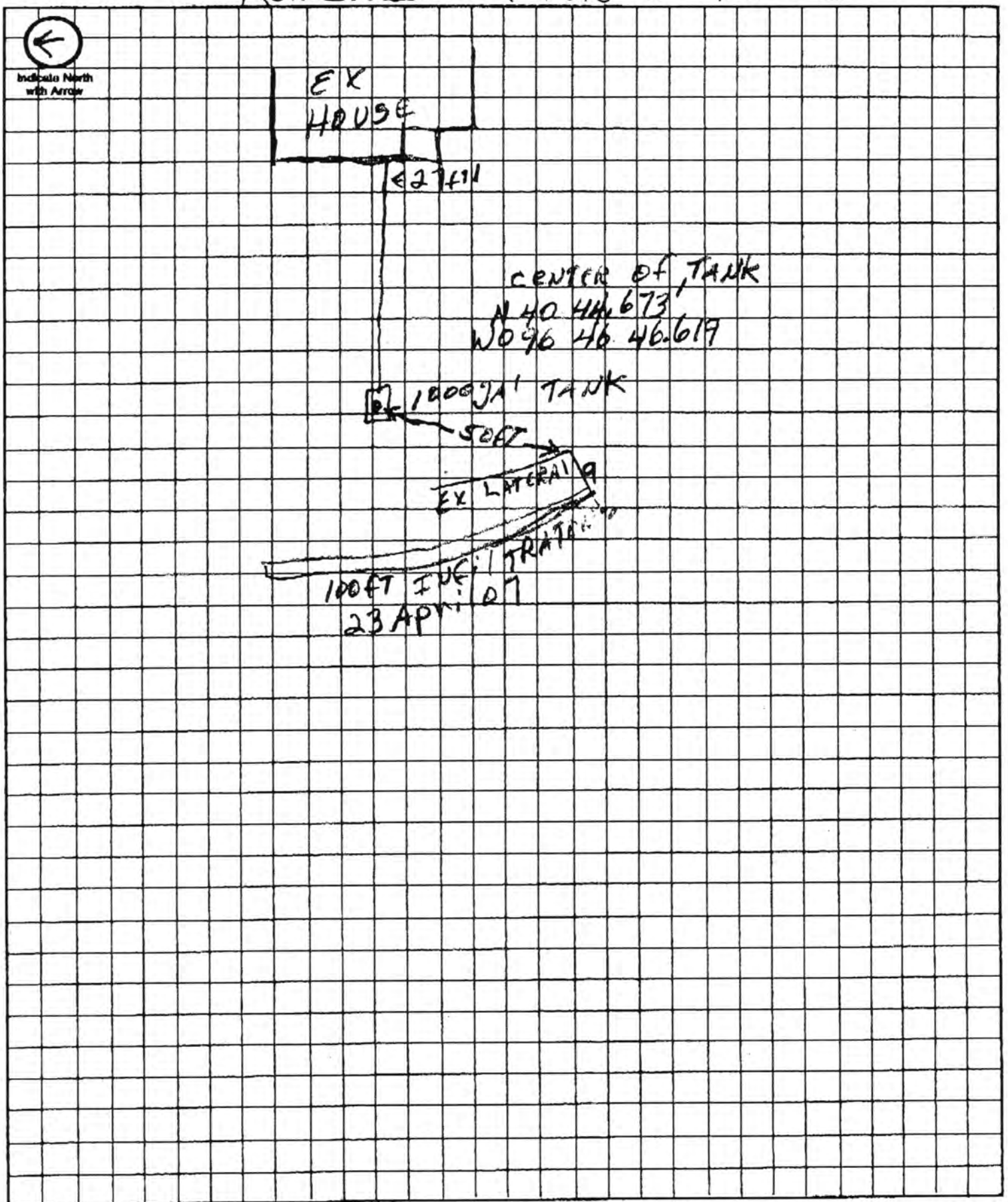


FORM 23-103 10-00

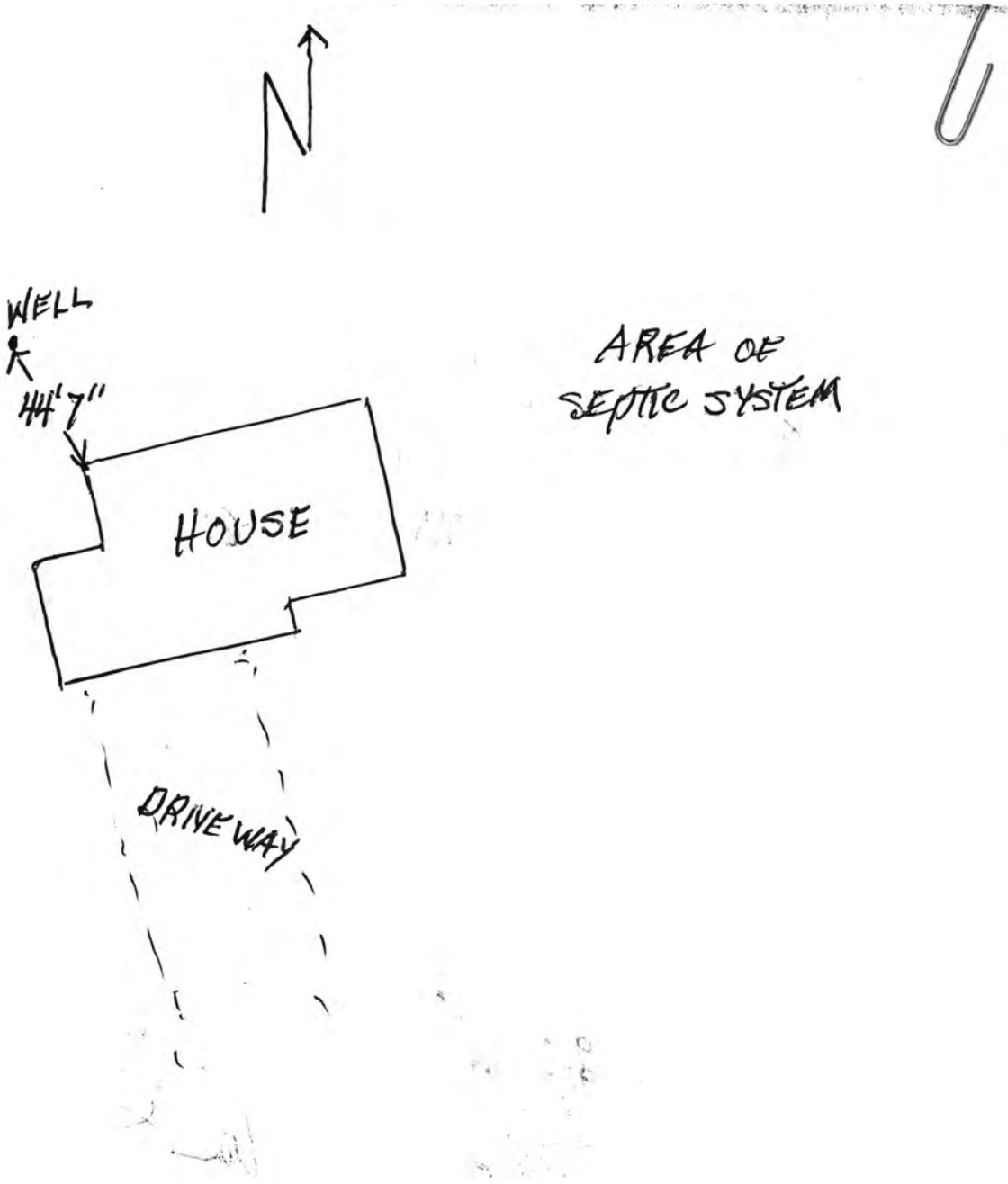
04/23/2007 21:14 14027977475 GAGNER PAGE 02

As Built Drawing

Kim Souvie 6720 SW 40 TR



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


N
WELL
44'7"
HOUSE
DRIVEWAY
AREA OF
SEPTIC SYSTEM