LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 99380194701

Issued 03/19/99
Expires 09/19/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment
DOUGLAS DUIS
T9N R6E SEC 17
SOUTH FORTY BLK 4 LOT 2
SW 34 ST CT

Permittee
DOUGLAS DUIS
4921 S 57 ST
LINCOLN NE 68516

Issued By Health Director
Lincoln-Lancaster County Health Department

008985

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

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 [redacted] 6930 SW 84 ST City Lincoln NE, Zip 68533
(no rural route)

Legal Description 17 9N 6E THE South 40 4 2
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 Doug Duis Signature _____

Address 4921 S 57th City/State/Zip Lincoln Neb 68516

☐ Check if owner designed system Home Phone 483-6673 Work Phone _____

C. Contractor (General)

Name Kent Aphorpe DBA Company Name Aphorpe Homes

Address 2925 RA City/State/Zip Lincoln Nebr 68516

☐ Check if contractor designed system Work Phone 423-0313

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

Designer Name Glen Wellman Firm Wellman Plumbing Work Phone 434-2400

FAX 434-2402

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 2/2/99 Date frwd 2/3/99 ACTION ☒ Approved ☐ Disapproved Signature Jerold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2-3-99 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 2-3-99 Date frwd 2-3-99 ACTION ☒ Approved ☐ Disapproved Signature _____

8-6-99 rem tank drop brass + 100ft + 220 wire Approved

Installation Final Written Approval

By Ron Maynard

Date 8-10-99

Business Office Use Only

Date Rec'd 01/29/99
Amt Paid 150
Rec'd By _____ Cash/Check No. 8985

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

Also well

THE SOUTH FORTY

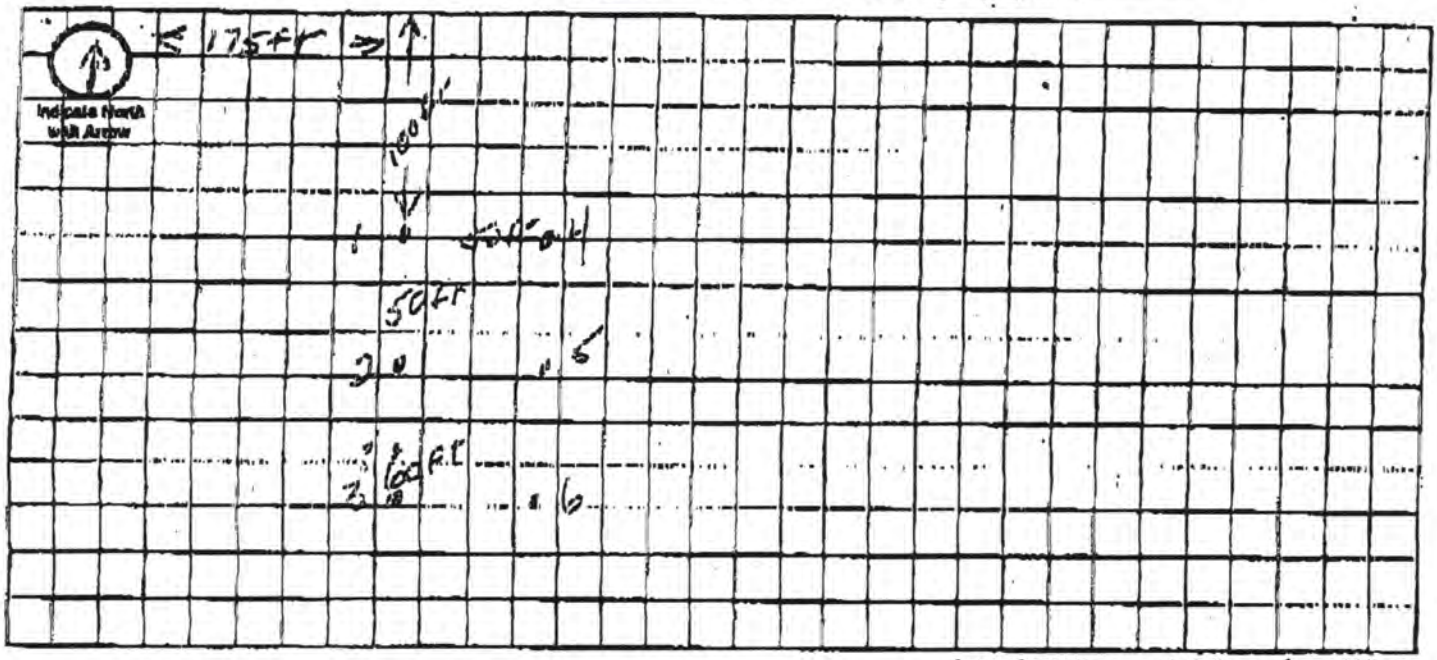
C

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

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: 20 ft. = 1 grid lines

A. System Location (Indicate correct number and street)

Address (no rural route) 6930 SOUTH 34TH ST. C.T. 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 58 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

Total Square Feet of Field Required: 933 sq. ft.

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

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

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Ground Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	600 ☐	50 ☐	N/A ☐	25 ☐	20 ☐	16 ☐	25 ☐	☐
Field (ft)	100 ☐	600 ☐	50 ☐	4 ☐	50 ☐	50 ☐	66 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	600 ☐	50 ☐	N/A ☐	50 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Kent Gethman Date 1-28-99

Installer [signature] (Res) Date 2-02-99

FORM 33-102 10-96

Attn: Ron

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 8-10-99

System Location (Indicate correct number and street)
Address 6930 SW 34th (no rural route) City Lincoln NE, Zip

A. Building Sewer
1. Material: 4" CI 160
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 10 in.
3. Distance between dwelling and septic tank: 95' ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 50+ ft.
   stream 10+ ft.
   pressure line 3+ ft.
   property line 20+ ft.

B. Septic Tank
1. Material: Concrete
   Number of compartments: 2
2. Capacity: 1000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter — in.
   Over outlet, diameter — in.
   Riser: ☑ above ☐ below grade 2 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 50+ ft.
   Stream 25+ ft.
   Pressure line 25+ ft.
   Property line 20+ ft.

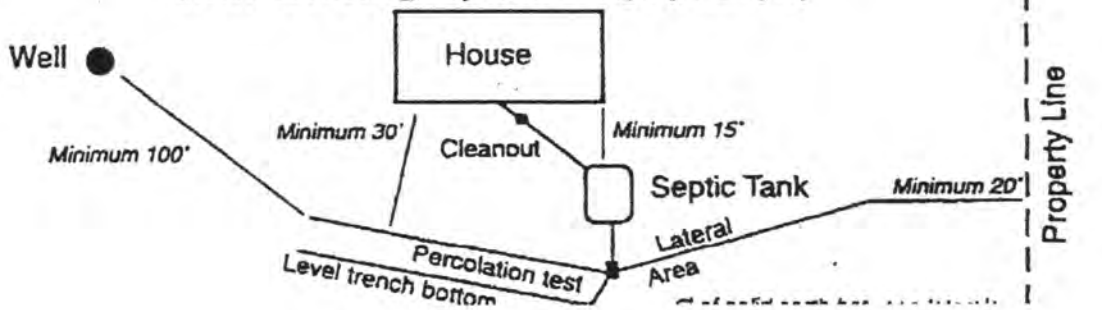
C. Distribution Box — Drop Boxes
1. Material: Plastic
   Number available outlets: 1st - 3 2nd - 2
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 1st - 20' 2nd - 27'

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: 4"
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 100 ft.
   100 ft. 20 ft., ____ ft.
3. Trench dimensions: Width 3 ft.
   Slope less than 6 in/100 ft.
   Average depth 25 in
4. Filter material: Gravel
   Depth of material 16 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 50+ ft.
   Pressure line 30+ ft.
   Property line 20+ ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)

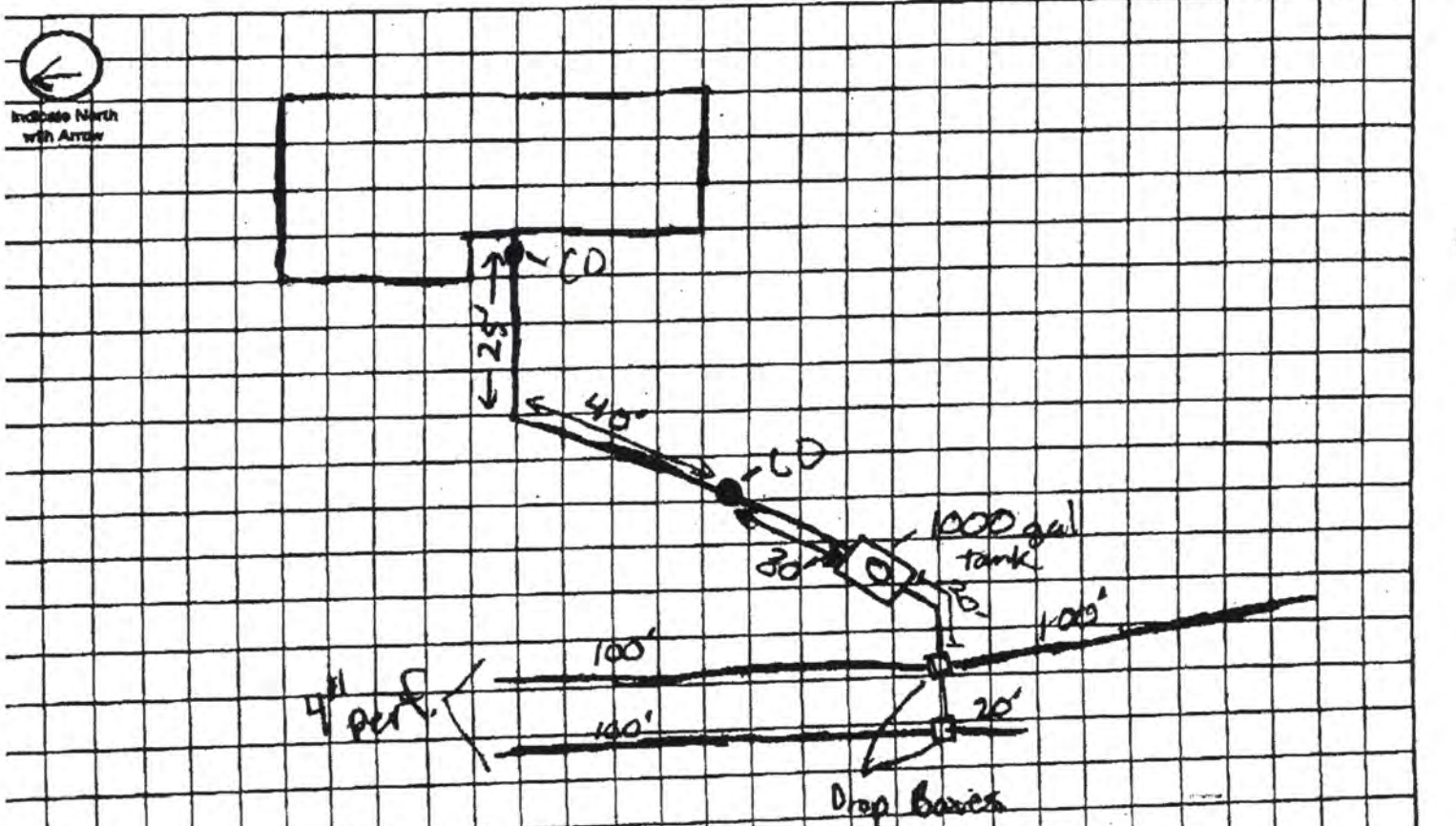


FORM 22-103 10-96

Attn: Ron

As Built Drawing

6930 S.W. 34th Ct



08/10/1999 07:46 4024342402 WELLMANN PLBG HTG PAGE 01