Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008655

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 06380315201

Issued 02/17/06
Expires 02/17/07
Revenue Code 3157

Establishment:
PRAIRIE HOME BUILDERS INC
T9N R6E SEC 17
ROLLING MEADOWS-1ST BLK 3 LOT 2
3500 W BURGESS LN

FEES: $275.00

Permittee:
ROB CHAMPOUX
4200 SW 12 ST
LINCOLN NE 68522

TOTAL: $275.00

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

[redacted] A

Permit Number: 06380315201

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 3500 W. BURGESS LANE (no rural route) City LINCOLN NE, Zip 68523

Legal Description 1/4 1/4 Section 17 Township 9N Range 6E Subdivision ROLLING MEADOWS Addition 1ST. Block 3 Lot 2

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name _____ Signature _____

Address _____ City/State/Zip _____

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name ROB CHAMPOUX Company Name PRAIRIE HOME BUILDERS

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

☒ Check if contractor designed system Work Phone 476-6599 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 400 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 2/17/06 Date frwd 2/21/06 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 2-21-06 Date frwd 2-21-06 ACTION ☒ Approved ☐ Disapproved Signature _____

Line, tank lateral 6/15/06 DS

Installation Final Written Approval

By _____

Date 6/23/06

Business Office Use Only

Date Rec'd 2/17/06

Amt Paid #275.00

Rec'd By _____ Cash/Check No. 22328

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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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) Rolling Meadows

Address Blk 3 Lot 2 (no future plats) 3500 W. BURGESS LANE City Lincoln NE, Zip 68523

Owner Prairie Homes Addresss 2045 S. FOLSOM ST. SUITE "A"

Soil Type (SCS): SHARPSBURG SILTY CLAY LOAM Percolation Rate: 40.66 min./inch

Date of Tests 10/12-04 to 10-13-04 Weather: Precipitation 0 Temperature 60°

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	10-12	12:50	10-12	16:50	10-13	14:20	6"	10-13	13:20	30m	1/8	34.29
2	"	"	"	"	"	"	"	"	"	"	"	3/4	40
3	"	"	"	"	"	"	"	"	"	"	"	3/4	40
4	"	"	"	"	"	"	"	"	"	"	"	7/8	34.29
5	"	"	"	"	"	"	"	"	"	"	"	3/4	40
6	"	"	"	"	"	"	"	"	"	"	"	5/8	48
7	"	"	"	"	"	"	"	"	"	"	"	5/8	48

Sum of Percolation Rates: 284.58
Average of Rates: 40.66
Rate Used for Calculation: 40.66

Person Conducting Percolation Tests

Name: Phil Nalley
Phone: 304-4296
Address 6005 W. "A" ST.
LINCOLN, NE 68532

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date FEBRUARY 17, 2006

FORM 23-101 10-96

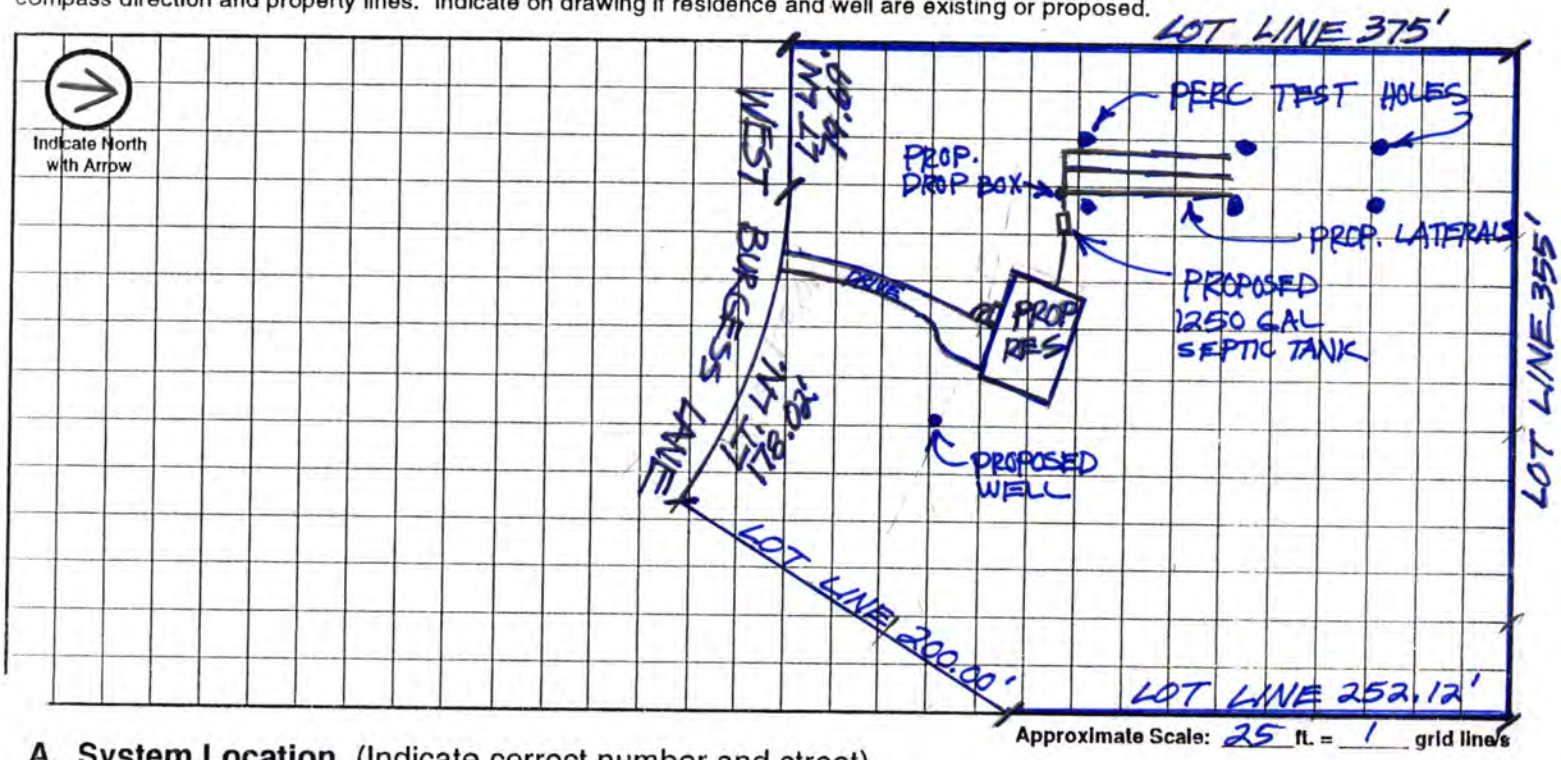
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C

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 lines

A. System Location (Indicate correct number and street)

Address (no rural route) 3500 W. BURGESS LANE 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 40.66 (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 1250 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' 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 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

—. Required Signatures

Home Building Contractor _____ Date 2-17-06

Installer Tom _____ Date 2-16-06

JUN 2 2 2006

D

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Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 06/15/06

System Location (Indicate correct number and street)

Address 3500 W BURGESS LANE (no rural route) City LINCOLN NE, Zip 68522

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: 0 in.
   or distance below basement floor: 12" in.
3. Distance between dwelling and septic tank: 100 ft.
4. Number of clean-outs: ONE
5. Distances to: well or suction line 100 + ft.
   stream Ø ft.
   pressure line ____ ft.
   property line 120 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 4 in.
   Over outlet, diameter 4 in.
   Riser: ☐ above ☐ below grade 30 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 30 in.
8. Distances to: Well or suction line ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 100 ft.

C. Distribution Box

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

D. Absorption Field

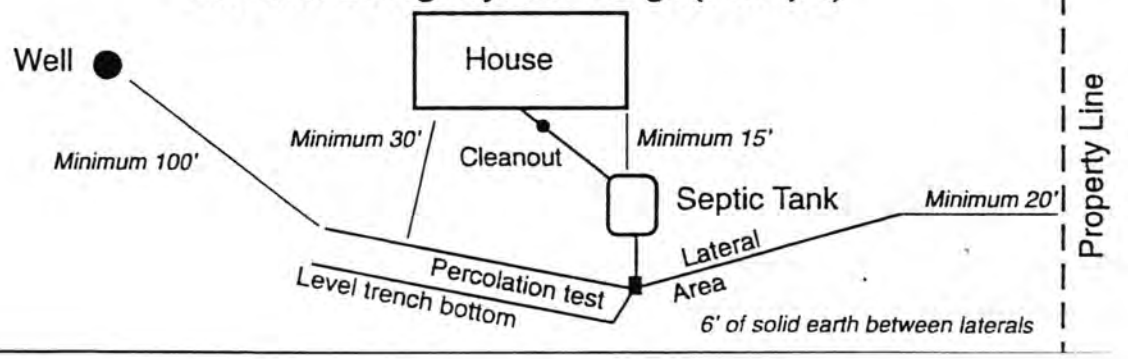
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 3"
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number ____
   Length of each line: 82.5 ft. 82.5 ft.
   82.5 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 3 ft.
   Slope ____ in/100 ft.
   Average depth 36 in
4. Filter material: DIRT
   Depth of material 24 in.
5. Distances to: Well or suction line 200 ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 25 ft.

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

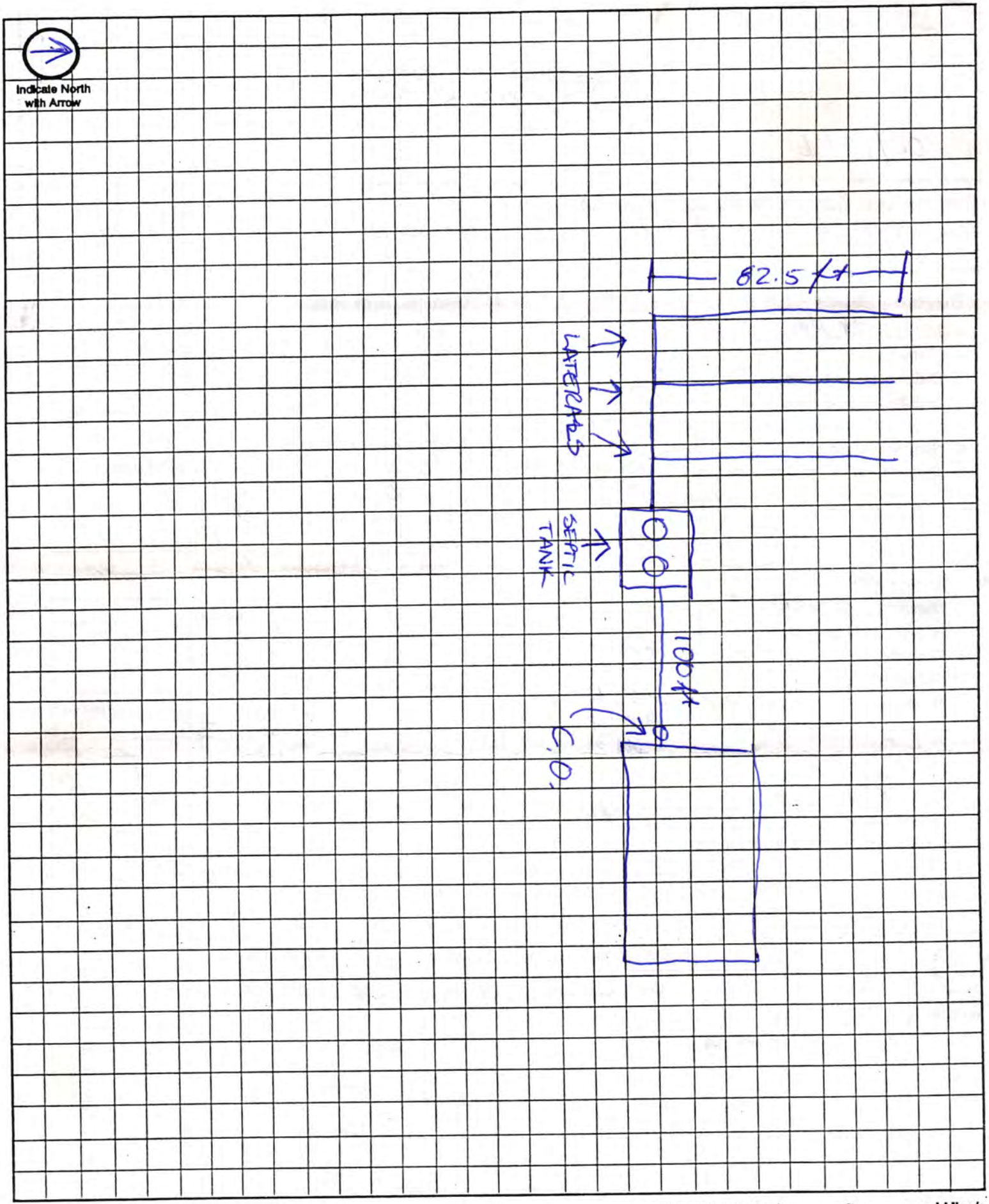
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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