Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003030

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380270201

Issued 08/20/03
Expires 02/20/04
Revenue Code 3157

Establishment

PRAIRIE HOME BUILDERS INC
T9N R6E SEC 17
ROLLING MEADOWS 1ST BLK 1 LOT 2
3801 W BURGESS LN

FEES: $200.00

Permittee

ROB CHAMPOUX
4200 SW 12 ST
LINCOLN NE 68522

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: 03380270201

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 3801 WEST BURGESS LANE (no rural route) City LINCOLN NE, Zip 68523

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

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name SPECULATION Signature _____

Address _____ City/State/Zip _____

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

C. Contractor

Name ROB CHAMPOUX Company Name PRAIRIE HOME BUILDERS INC.

Address 4200 SW 12TH ST. HM OFF 2045 S. FOLSOM ST. 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 Gordon Lukes Firm G+A Backhoe Service Work Phone (402) 450-2409

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 8/28/03 Date frwd 8/29/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8/29/03 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 8-29-03 Date frwd 8-29-03 ACTION ☐ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By Doug Amack

Date 3/10/04

Business Office Use Only

Date Rec'd 08/28/03

Amt Paid 200.00

Rec'd By _____ Cash/Check No. 16889

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

B

Permit Number: 033802702

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

3801 W. BURGESS LANE
~~6001 SW 38TH ST.~~

System Location (Indicate correct number and street)

Address Rolling Meadows 1st Block 1 (no rural route) City Lincoln NE, Zip NE

Lot 2

Owner PRAIRIE HOME BUILDERS Addresss 2045 S FOLSOM ST. LINC. NE 68522

Soil Type (SCS): Clay Loam Percolation Rate: 49.33 min./inch

Date of Tests 7-20-03 to 7-21-03 Weather: Precipitation .30 Temperature 90's humid

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
	6"	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 60 (Min/in)
1	30"	7/20	13:00	7/21	12:00	7/21	12:0	6"	7/21	16:00	30m	3/4	~~40.0~~
2	30"	7/20	13:00	7/21	12:00	7/21	12:00	6"	7/21	16:00	30m	5/8	~~48.0~~
3	30"	7/20	13:00	7/21	12:00	7/21	12:00	6"	7/21	16:00	30m	5/8	~~48.0~~
4	30"	7/20	13:00	7/21	12:00	7/21	12:00	6"	7/21	16:00	30m	3/4	~~40.0~~
5	30"	7/20	13:00	7/21	12:00	7/21	12:00	6"	7/21	16:00	30m	1/2	60
6	30"	7/20	1300	7/21	12:00	7/21	12:00	6"	7/21	16:00	30m	1/2	60

Sum of Percolation Rates: 296
Average of Rates: 49.33
Rate Used for Calculation: 49.33

Person Conducting Percolation Tests

Name: Phil Nalley
Phone: 304-4296
Address 6005 WEST A
LINCOLN, NE 68532

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

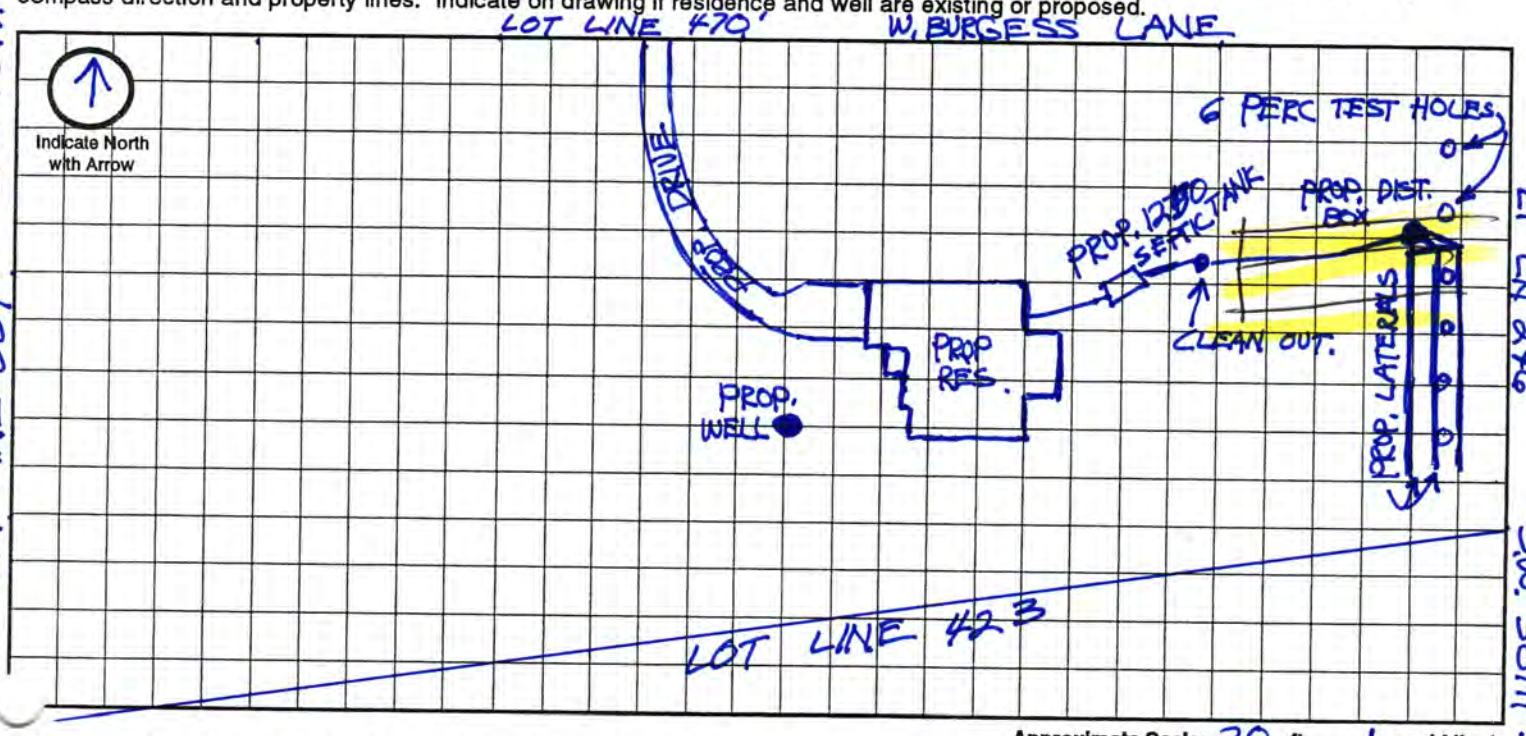
As built
Field note

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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 line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 3801 WEST 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 49.33 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: 2 %

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 248 ft. Number of Trenches 3 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 ☐	☐

E. Required Signatures

Home Building Contractor Rob Sharp Date 8-27-03

Installer Gordon Sukup G&A Backhoe Service Date 8-28-03

FORM 23-102 10-96