LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit No. 98380178801

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 06/25/98
Expires 12/25/98
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment

DENNIS & SANDIE REICHENBERG
T9N R6E SEC ~~17~~ 18
ROLLING MEADOWS BLK 3 LOT 4
4200 W BUCKS DR

Permittee

DENNIS & SANDIE REICHENBERG
RR0001
BOX 00062
COLUMBUS NE 68727-9722

Issued By Health Director
Lincoln-Lancaster County Health Department

007683

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: 98380178B

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 4200 W. BUCKS DRIVE City LINCOLN NE, Zip NE

(no rural route) 18

Legal Description NW 9N 6E ~~KANKAKEE~~ ROLLING MEADOWS 3 4

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 DENNIS & SANDIE REICHENBERG Signature Dennis Reichenberg

Address RT1 BOX 62-0 City/State/Zip COLUMBUS NE

☒ Check if owner designed system Home Phone 402 563 1340 Work Phone 402 540 0564

C. Contractor

Name owner Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name owner 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 200 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 6/22/98 Date frwd 6/22/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. 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 6-22-98 Date frwd 6-22-98 ACTION ☒ Approved ☐ Disapproved Signature Dennis Bartels

5/13/99 Hood drawing J.C.H

Installation Final Written Approval

By Jerrold C. Hood

Date MAY 17, 1999

Business Office Use Only

Date Rec'd 06/19/98

Amt Paid 130.00

Rec'd By _____ Cash/~~Check~~ No. _____

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

rep 402-475-2870 Cheryl Stolecke answer

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

B

Permit Number: 983801788

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Blk 3
Lot 4
Rolling Meadows

System Location (Indicate correct number and street)

Address 4200 W Beaver Drive (no rural route) City Lincoln NE, Zip

Owner DENNIS REICHENBERG Address RT 1 BOX 62-O COLUMBUS NE 68601

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 60 min./inch

Date of Tests 5-27 to 5-28-98 Weather: Precipitation — Temperature 75

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	30	5-27	9:00	5-28	6:30	5-28	8:00	16	5-28	9:00	60	1	
2								20 1/2				1	
3								19 1/8				1	
4								19 1/4				2 1/2	
5								11				1 1/8	
6								18				2 1/4	

Person Conducting Percolation Tests

Name: Larry Schwarck Trenching
Phone: 489-7294
Address 8200 Old Cheney

Sum of Percolation Rates:
Average of Rates:
Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date JUNE 22, 1998

FORM 23-101 10-96

FROM : Panasonic FAX SYSTEM PHONE NO. : Jun. 01 1998 07:10AM P2

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

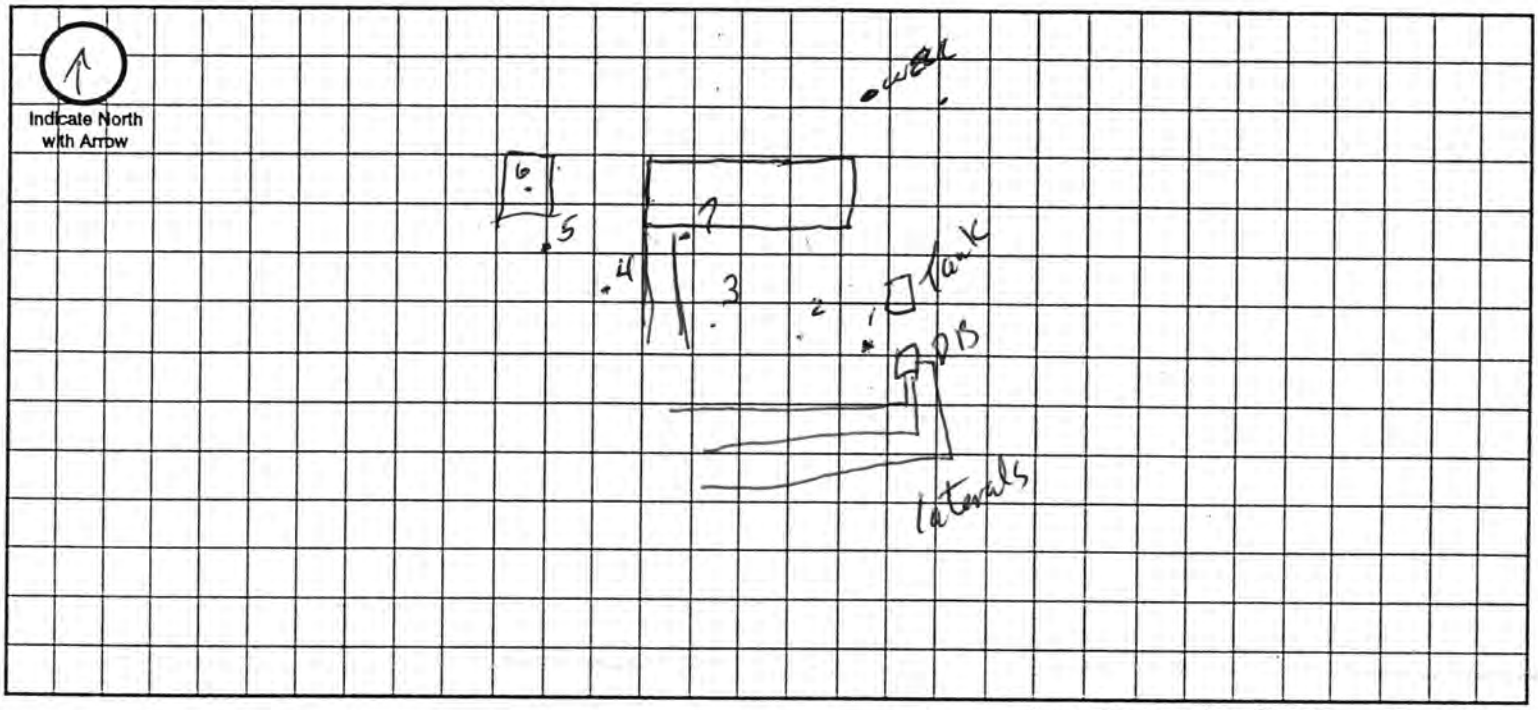
C

Permit Number: 9838017 08

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) 4200 W BUCKS DRIVE City LINCOLN NE, Zip NE 6866

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 60 (min. per inch) Soil Type: WYMORE 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: _____

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals ~~330~~ 247 ft. Number of Trenches 3 Trench Width ~~36~~ 48"

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 Dennis Kaufmann Date 6-18-98

Installer Dennis Kaufmann Date 6-18-98

FORM 23-102 10-96

MAY 1 7 1999

D

Permit Number: 98380176B

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

Sewage Disposal System

As Built Plans & Specifications

Date 5-13-99

System Location (Indicate correct number and street)

Address 4200 (w) Beacks (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 20 in.
3. Distance between dwelling and septic tank: 44 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Precast
   Number of compartments: _____
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: Precast
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8 ft.

D. Absorption Field

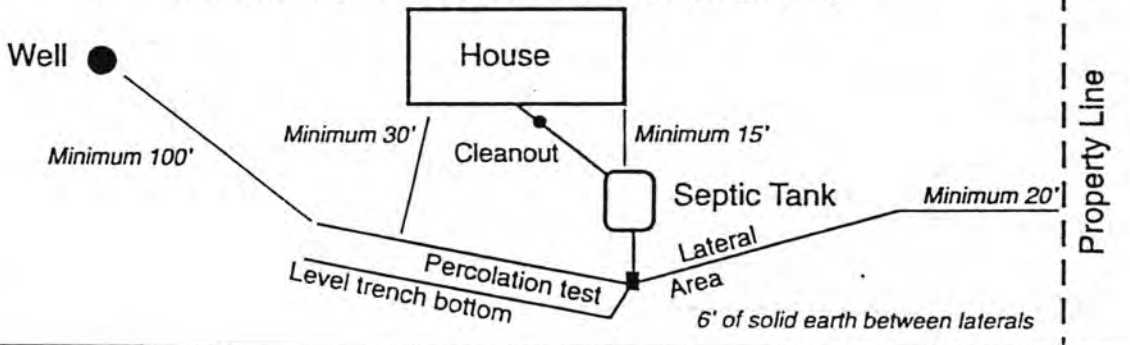
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator 15
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 76 ft.
   68 ft. 68 ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 38" in
4. Filter material: Road Gravel
   66 ton Depth of material 16 in.
5. Distances to: Well or suction line 100' + 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)

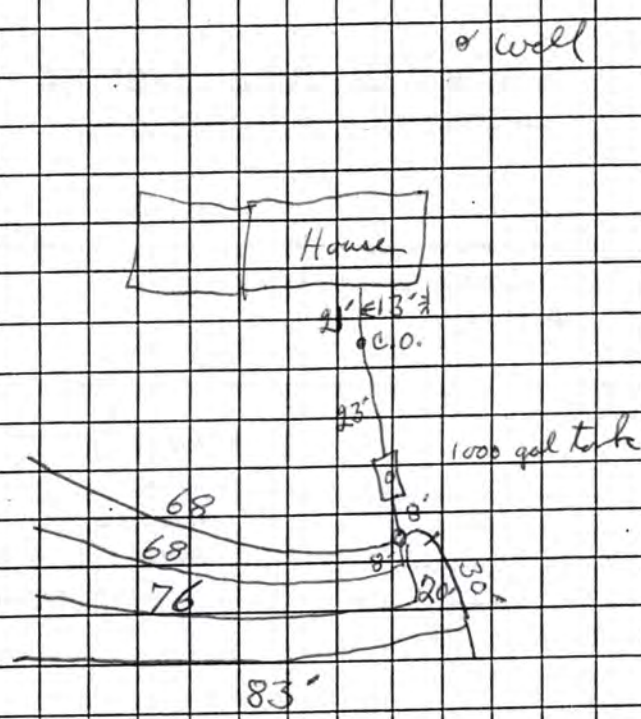


FORM 23-103 10-96

As Built Drawing

4200 W. Bucker

Indicate North with Arrow



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