LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 97380169701

Issued 12/10/97
Expires 06/10/98
Revenue Code 3157

Establishment

SUSAN PAULSEN
T9N R6E SEC 18
ROLLING MEADOWS BLK 3 LOT 5
4110 W BUCKS DR

FEES: $150.00

Permittee

SUSAN PAULSEN
3001 WILLIAMSBURG DR
LINCOLN NE 68516-6003

TOTAL $150.00

Gregg Wright MD.
Issued By ~~M. Jane Ford~~
Health Director

5546

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 4110 W. Bucks (no rural route) City Lincoln NE, Zip 68523

Legal Description 1/4 18 1/4 Section 9N Township 6E Range Rolling Meadows Subdivision 3 Addition 5 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 Susan Paulsen Signature Susan Paulsen

Address 3001 Williamsburg Dr. City/State/Zip Lincoln NEB. 68516

☐ Check if owner designed system Home Phone 420-2626 Work Phone 436-5155

C. Contractor

Name Tommy J. Art Company Name ART + Sons Custom Homes

Address 4330 So. 45th City/State/Zip Lincoln NEB 68516

☐ Check if contractor designed system Work Phone 432-1418

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

Designer Name SCHWARCK LARRY Firm ~~Engineering~~ SCHWARCK Engineering Work Phone 489-7294

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 12/8/97 Date frwd 12/8/97 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12.9.97 Date frwd 12.9.97 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** ~~4/23/98 Need drawing J. CH~~ Date rec'd 12-9-97 Date frwd 12-9-97 **ACTION** ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By Jerrold C. Hood

Date APRIL 27, 1998

Business Office Use Only

Date Rec'd 12/08/97

Amt Paid 150.00

Rec'd By _____ Cash/Check No. 5460

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

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

B

Permit Number:

~~Well Earnest~~

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Block 3 Lot 5 Rolling Meadows

System Location (Indicate correct number and street)

Address _____ (no rural route) City _____ NE, Zip _____

Owner _____ Address _____

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 52 min./inch

Date of Tests 11/21 to 11/22 Weather: Precipitation 0 Temperature 50

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	32	11/21	9:30	11/22	10:30	11/22	10:30	6	11/22	11:00	30	3/4	40 MIN/IN
2	36	"	"	"	"	"	"	"	"	"	"	5/8	48 MIN/IN
3	34	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN
4	30	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN
5	30	"	"	"	"	"	"	"	"	"	"	5/8	48 MIN/IN
6	31	"	"	"	"	"	"	"	"	"	"	1/2	60 MIN/IN

Sum of Percolation Rates: _____
Average of Rates: 52
Rate Used for Calculation: 52

Person Conducting Percolation Tests

Name: Melvin Eagner
Phone: 797-2365
Address 4510 W. Cuming
Lincoln NE 68523

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hoek R.E.H.S. Date 12/8/97

FORM 23-101 10-96

Post-it® brand fax transmittal memo 7671 # of pages ▸ 3
To Steve Tate From Doug Cowling
Co. Co.
Dept. Phone # 432-5698
Fax # 434-5040 Fax # 797-7475

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

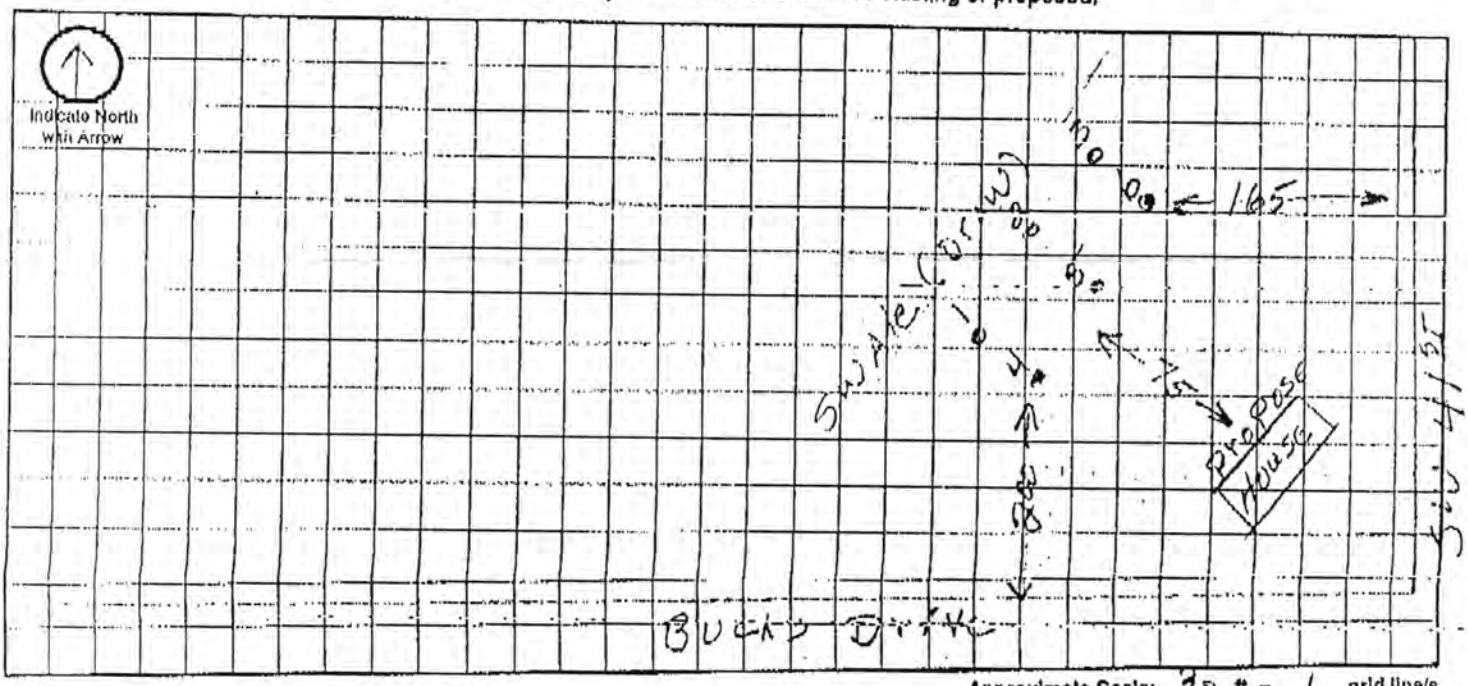
Rolling Meadows
Block 3 Lots

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) _____ City _____ NE, Zip _____

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: WYMORE SILTY CLAY LOAM 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 311 ft. Number of Trenches 4 Trench Width 3'

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 Tommy J. [illegible] Date 12/8/97

Installer _____ Date _____

FORM 23-102 10-96

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

APR 27 1998

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 4-23-98 Lot 3 Blk 5

System Location (Indicate correct number and street)

Address 4110 W Bucks Drive City NE, Zip
(no rural route)

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 104 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: 10 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: 11 ft.

D. Absorption Field

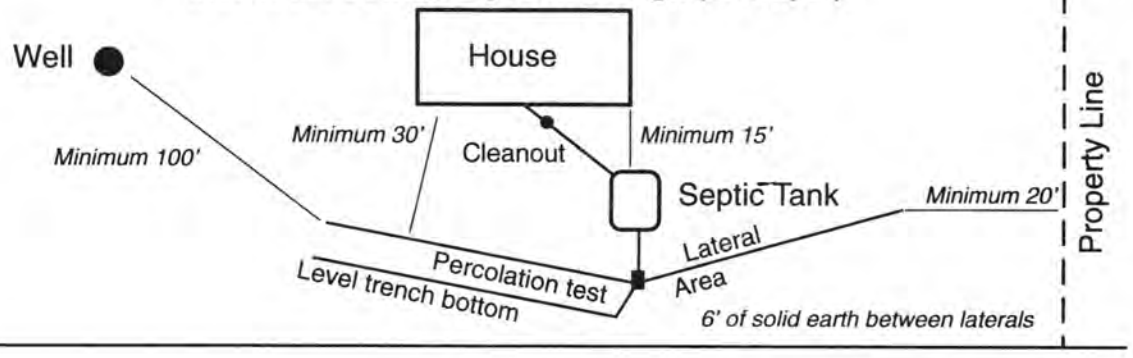
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round:
   or perforated pipe:
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 4
   Length of each line: 100 ft. 100 ft.
   100 ft. 100 ft., ft.
3. Trench dimensions: Width 3 ft.
   Slope 3 in/100 ft.
   Average depth 36 in
4. Filter material: Road Gravel
   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.

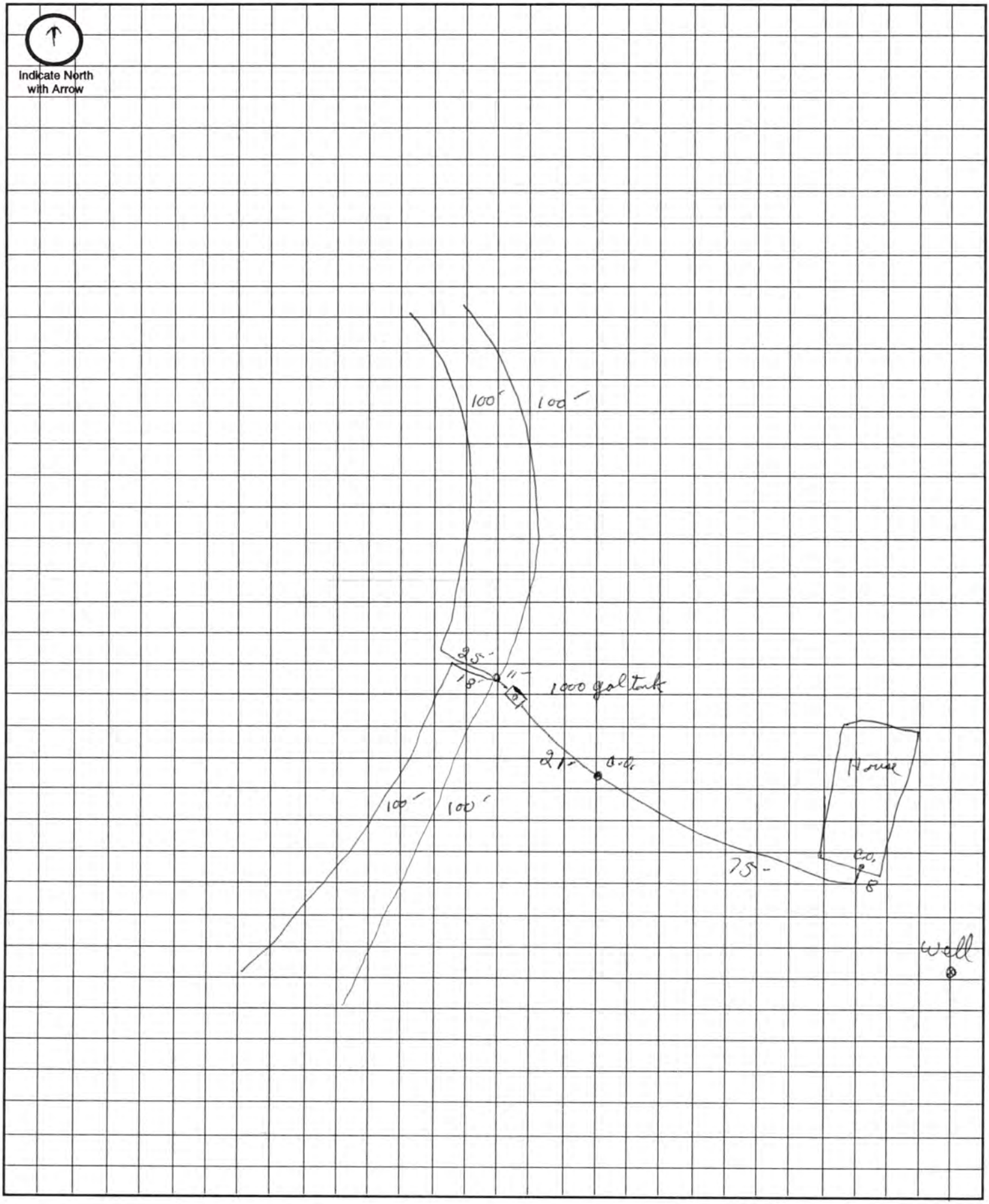
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing by Larry Schwanck for Tom Artz Const.



Approximate Scale: _____ft. = _____ grid line/s