LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380171701

Issued 02/02/98
Expires 08/02/98
Revenue Code 3157

Establishment

MARVIN L KUNZE
T9N R6E SEC 18
ROLLING MEADOWS BLK 4 LOT 1
6700 SW 41 ST--DENTON

FEES: $150.00

rmittee

MARVIN L KUNZE
4740 S 47 ST
LINCOLN NE 68516-1719

TOTAL $150.00

Gregg Wright MD

Issued By ~~M. Jane Ford~~
Health Director

5908

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 6700 S.W. 41ST (no rural route) City DENTON NE, Zip 68339

Legal Description 1/4 18 1/4 Section 9N Township 6E Range ROLLING MEADOWS Subdivision 4 Addition 1 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 MARVIN + SANDRA KUNZE Signature Marvin & Kunze

Address 4740 S 47 City/State/Zip LINCOLN NE 68516

☒ Check if owner designed system Home Phone 402-489-8784 Work Phone 402-471-5566

C. Contractor

Name William OVERMAN Company Name B+R Pump SERVICE

Address 4337 MADISON City/State/Zip LINCOLN NE 68504

☐ Check if contractor designed system Work Phone 402-464-1745

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 _____ 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 1/29/98 Date frwd 1/29/98 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 1-29-98 Date frwd 1-29-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 1-29-98 Date frwd 1-29-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____

8/14/98 Need Drawing J.C.H.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date AUGUST 17, 1998

Business Office Use Only

Date Rec'd 01/29/98
Amt Paid 150 ck
Rec'd By _____ Cash/Check No. 7208

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

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
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)

Address 6700 S.W. 41ST (no rural route) City DENTON NE, Zip 68339

Owner MARVIN & SANDRA KUNZE Addresss 4740 So 47 LINCOLN NE 68516

Soil Type (SCS): WYMORE & SHARPSBURG Percolation Rate: 52 min./inch

Date of Tests 11-1-97 to 11-2-97 Weather: Precipitation NONE Temperature 45°

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	11-1-97	0840	11-1-97	1300	11-2-97	1300	6"	11-2-97	1330	30	1/2	60
2	30	11-1-97	0841	11-1-97	1300	11-2	1302	6"	11-2	1333	31	5/8	48
3	29	11-1-97	0842	11-1-97	1300	11-2	1304	6"	11-2	1705	3D	1/2	60
4	30	11-1-97	0843	11-1-97	1300	11-2	1306	6"	11-2	1707	3D	1/2	60
5	31	11-1-97	0844	11-1-97	1300	11-2	1308	6"	11-2	1709	30	3/4	40
6	31	11-1-97	0852	11-1-97	1300	11-2	1310	6"	11-2	1340	30	3/4	40
7	31	11-1-97	0853	11-1-97	1300	11-2	1312	6"	11-2	1342	30	5/8	48
8	30	11-1-97	0854	11-1-97	1300	11-2	1314	6"	11-2	1344	30	1/2	60

Person Conducting Percolation Tests

Name: MARVIN L. KUNZE
Phone: 402-489-8784
Address 4740 So 47
LINCOLN NE 68516

Sum of Percolation Rates: 416
Average of Rates: 52
Rate Used for Calculation:

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date JANUARY 29, 1998

FORM 23-101 10-96

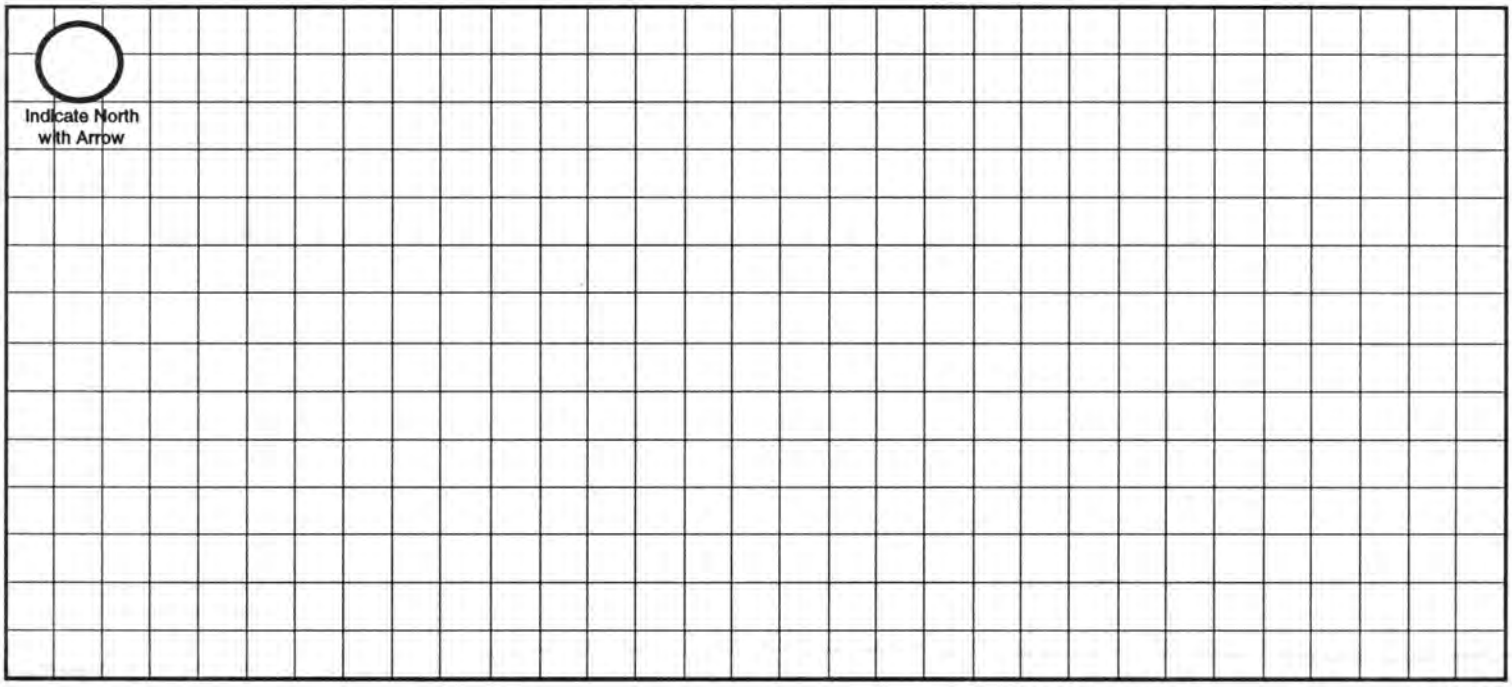
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
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C

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: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 6700 S.W 41ST City DENTON NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 52 (min. per inch) Soil Type: WYMORE and Sharpsburg Land Slope: LESS THAN 1 %

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: Equalizer 24 chambers-polyethylene

Capacity of Septic Tank 1500 gals Number of Absorption Beds: 1 Number of Distribution Laterals per Bed 4

Total Length of Laterals 320 ft. Number of Trenches 4 Trench Width 36"

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

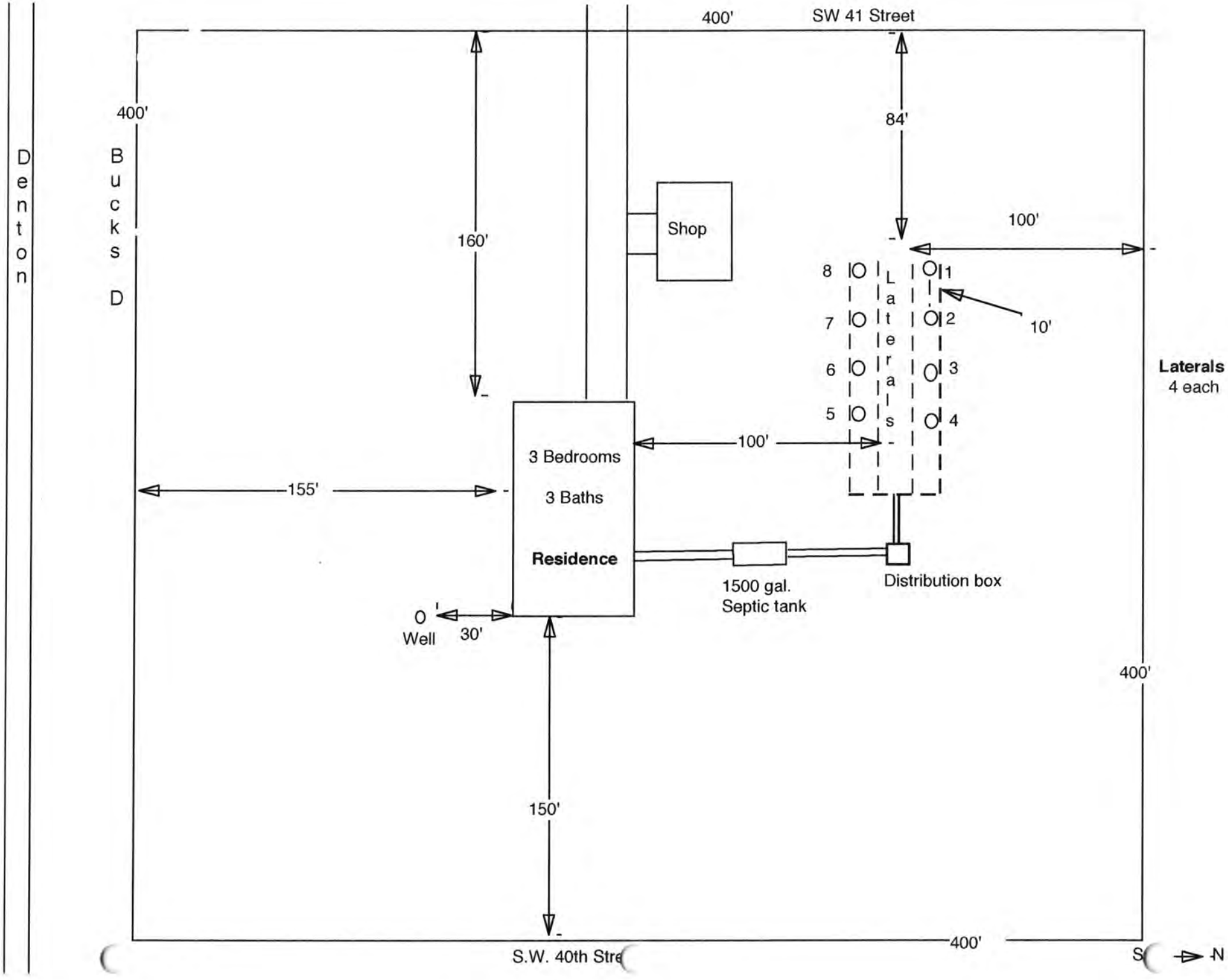
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☐
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Marven L Kunze Date 1-22-98

Installer Bill Overman B & R Pump Service Date 1-22-98

Larry Schwarte 8-14-98


Denton
Bucks D
400'
SW 41 Street
400'
84'
160'
Shop
100'
8
7
6
5
Laterals
1
2
3
4
10'
Laterals
4 each
3 Bedrooms
3 Baths
Residence
100'
155'
1500 gal.
Septic tank
Distribution box
Well
30'
400'
150'
400'
S.W. 40th Stre
S
N

AUG 17 1998

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 8-14-98

System Location (Indicate correct number and street)

Address 6700 SW 41st (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: abs 160
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 80 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: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☒ above ☐ below grade 1" in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 4' in.
8. Distances to: Well or suction line 100'+ 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: 18' ft.

D. Absorption Field

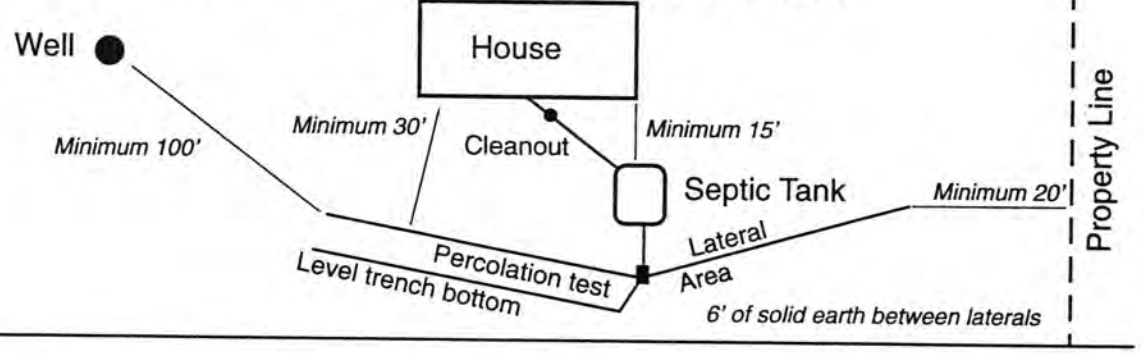
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator 16"
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 100 ft.
   100 ft. 16 ft., ____ ft.
3. Trench dimensions: Width 3 ft.
   Slope — in/100 ft.
   Average depth 5' to 4' in
4. Filter material: Road Gravel
   Depth of material 18-20" in.
5. Distances to: Well or suction line 120'+ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

Indicate North with Arrow

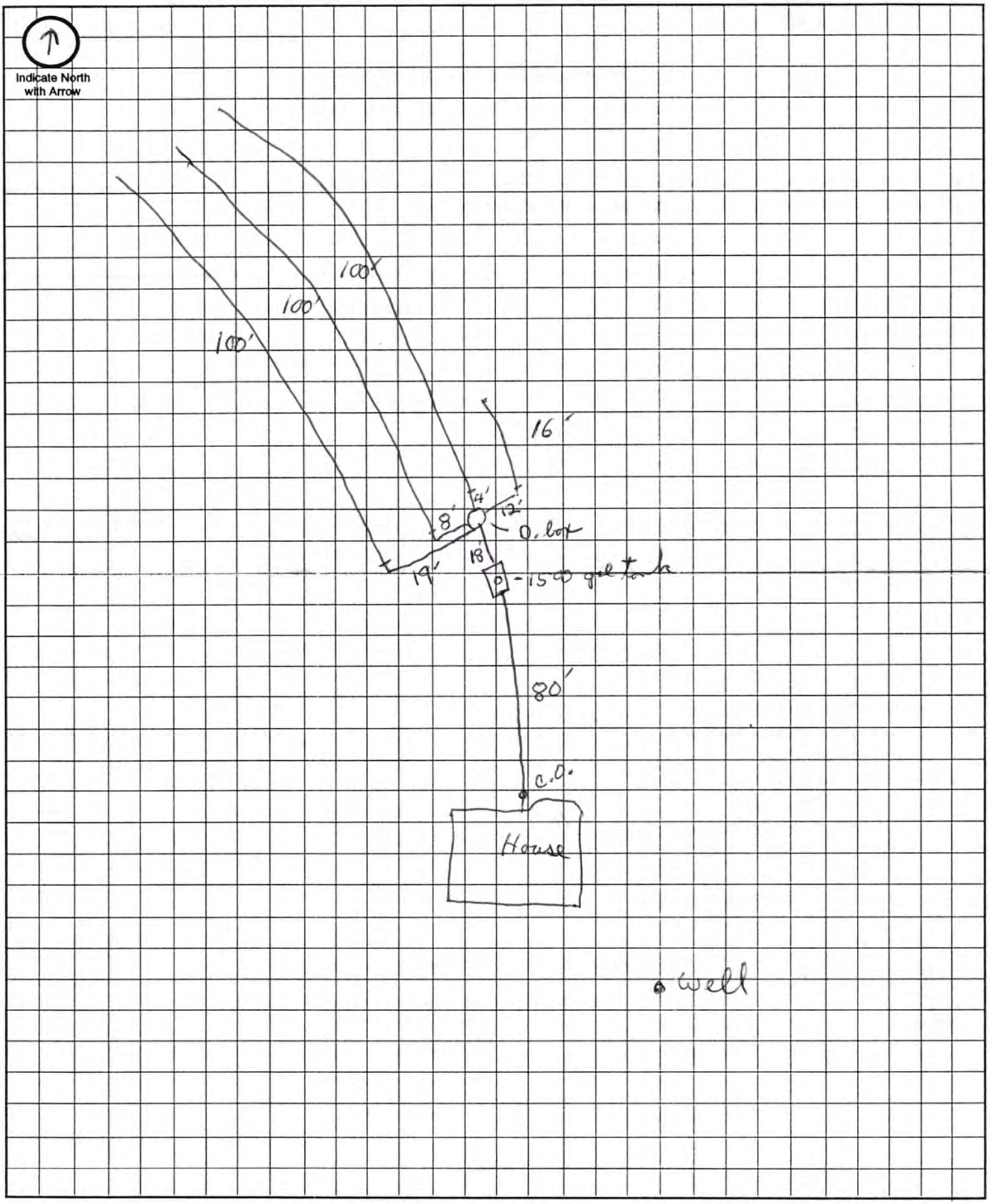
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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