LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380178401

Issued 06/23/98
Expires 12/23/98
Revenue Code 3157

FEES: $150.00

PAID

Establishment
GEORGE BUSS
T9N R6E SEC 18
ROLLING MEADOWS BLK 5 LOT 3
6800 W BUCKS CIRCLE

TOTAL $150.00

Permittee
GEORGE BUSS
2601 NORMAN CIR
LINCOLN NE 68512-2029

Issued By Health Director
Lincoln-Lancaster County Health Department

007658

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: 98380178A

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 6800 Bucks Circle (no rural route) City Lincoln NE, Zip 68523

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

Address 2601 Norman City/State/Zip Lincoln Neb. 68512

☐ Check if owner designed system Home Phone 423-7174 Work Phone _____

C. Contractor

Name Art & Sons Company Name _____

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

☐ Check if contractor designed system Work Phone 4321418

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

Designer Name N/A Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms ~~4~~ 3 T.A 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 6/23/98 Date frwd 6/23/98 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/23/98 Date frwd 6/23/98 **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 6-23-98 Date frwd 6-23-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____

~~9/11/98 SEWER ONLY~~ 9/15/98 J.C.H. Hood drawing

Installation Final Written Approval

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

Date OCTOBER 2, 1998

Business Office Use Only

Date Rec'd 06/23/98

Amt Paid 150.00

Rec'd By _____ Cash/Check No. 5990

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

D

Permit Number: 983801784

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 4215 W Bucks Drive (no rural route) City _____ NE, Zip _____

Owner Tom Autz Address _____

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

Date of Tests 4-22 to 4-23 Weather: Precipitation — Temperature 70°

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 Rate (Min/in)
1	30	4-22	3:00	4-23	7:05	4-23	10:05	16 3/4	4-23	10:35	30	1/2	
2								13 1/2				1/2	
3								11 3/4				3/4	
4								10 1/4				3/4	
5								12 1/4				3/4	
6								8 3/4				1/2	
7								10 1/4				1/2	

Person Conducting Percolation Tests

Name: Larry Sobieranek
Phone: 488-7294
Address 8800 old cheney

Sum of Percolation Rates: _____
Average of Rates: _____
Rate Used for Calculation: 60 min/inch

DO NOT WRITE BELOW THIS LINE Faxed to Atty 6/23/98

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date JUNE 23, 1998

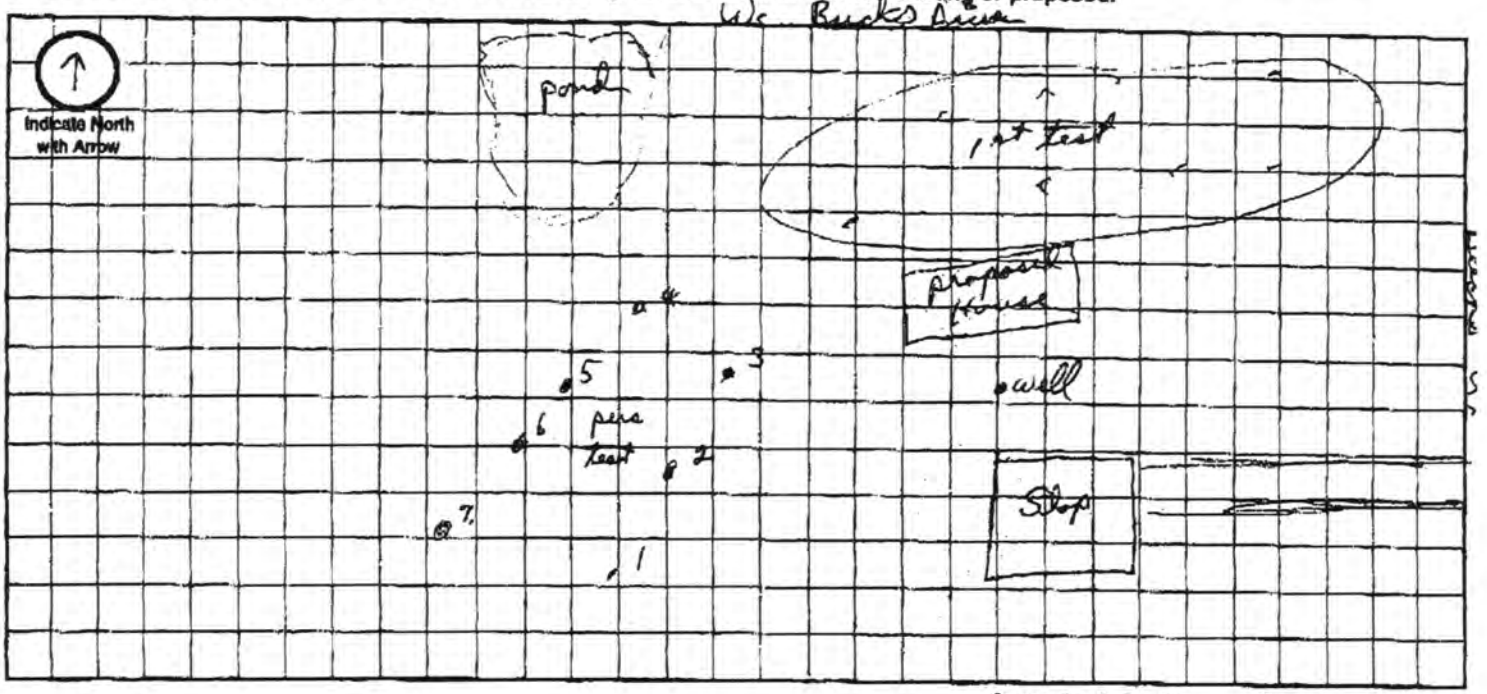
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 9838 01784

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) 4215 W Bucks Drive City _____ NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other Clay Liner

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

Percolation Rate 60 (min. per inch) Soil Type: WYMORE & SHARPSBURG SILTY CLAY LOAM Land Slope: 1 % %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: 1320 sq. ft.

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: Infiltrator

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

Total Length of Laterals 340 ft. Number of Trenches 4 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 _____ Date _____

Installer Larry Schmaltz Date 4-23-98

FORM 23-102 10-96

Dom Artz

SEP 1 7 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 9-15-98

System Location (Indicate correct number and street)

Address Bucks Ct. (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: ____ in.
3. Distance between dwelling and septic tank: 91' ft.
4. Number of clean-outs: 3 (Shed 131')
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: 1250 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: 15 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: 16' ft.

D. Absorption Field

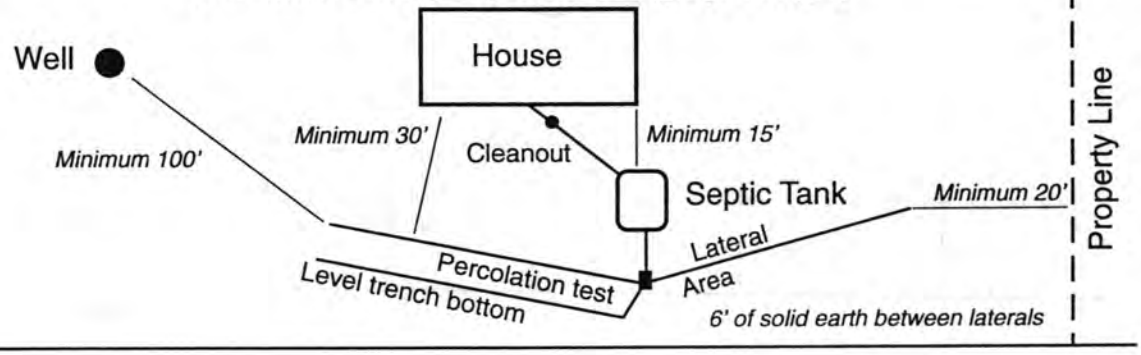
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: 16 Infiltrator
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: 348' Number 4
   Length of each line: 100 ft. 94 ft.
   80 ft. 72 ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 2 in/100 ft.
   Average depth 36 in
4. Filter material: Road Gravel
   Depth of material 16 in.
5. Distances to: Well or suction line 100 ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line 20 ft.

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

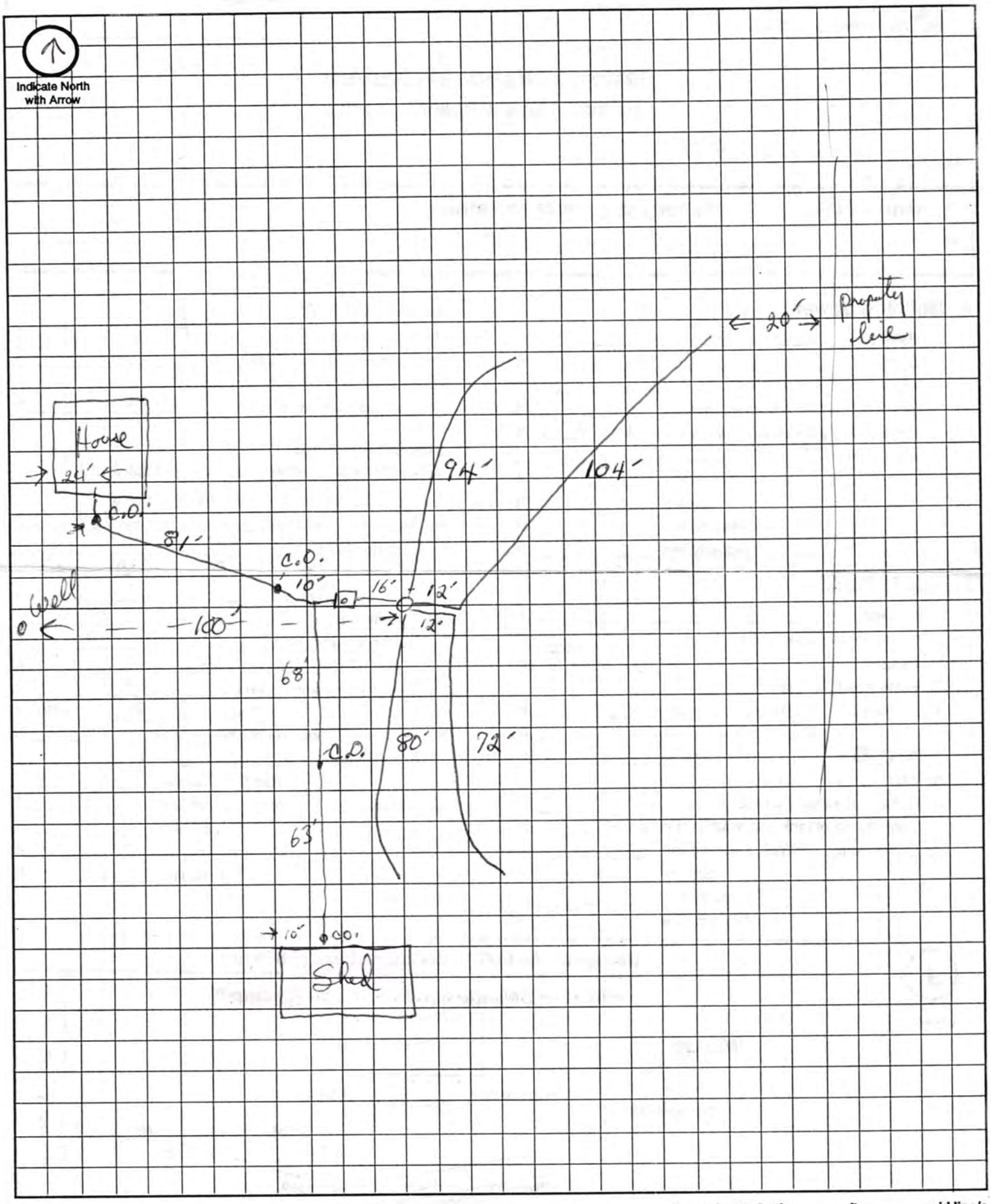
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing by Larry Schubeck



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