LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 96380150901

Issued 10/31/96
Expires 05/01/97
Revenue Code 18754

Establishment
STEVE NELSON
T9N R6E SEC 18
ROLLING MEADOWS BLK 5 LOT 7

FEES: $150.00

Permittee
STEVE NELSON
4200 SW 112 ST
DENTON NE 68339

TOTAL $150.00

Issued By M. Jane Ford
Health Director

2763

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150.00 # 0508
10/31/96 ts

FILE NO. _____

DATE: _____

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 9N ; Range 6E ; Section S 1/2 SE 1/4 18;
   Block 5 : Lot 7 : Addition ROLLING MEADOWS
   Street Address N/A

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe RANCH STYLE W/WALKOUT

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: N/A ft.

Steve Nelson
Signature of ~~Applicant~~ (Owner or Lessee)

4200 SW 112th
Address DENTON, NE 68339

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/30/96. Date Frwd. 10/31/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 10-31-96. Date Frwd. 10-31-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]
3. City or County Engineer: Date Rec'd. 10-31-96. Date Frwd. 10-31-96. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12/12/96 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/12/96 By: Jerrold C. Hood

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED: BLOCK 5 LOT 7 ROLLING MEADOWS

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).

Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .

Dates of Tests: OCT. 24, 1996 to OCT. 25, 1996. Weather: Precip. 0 Temp. 64.

OWNER: _____

Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	24"	10/24	3:00PM	10/25	4:00PM	10/25	4:00PM	6"	4:30PM	5 3/8	30	5/8"	48 MIN/IN
2	"	"	"	"	"	"	"	"	"	5 1/4	"	5/8"	48 MIN/IN
3	"	"	"	"	"	"	"	"	"	5 1/2	"	3/4"	40 MIN/IN
4	"	"	"	"	"	"	"	"	"	5 1/2	"	1/2"	60 MIN/IN
5	"	"	"	"	"	"	"	"	"	5 3/8	"	3/4"	40 MIN/IN
6	"	"	"	"	"	"	"	"	"	5 3/8	"	5/8"	48 MIN/IN

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Randy Nhan
Signature of Person Conducting Test

Address 4200 SW 112TH DENTON, NE 68339 Phone 797-2109

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 47 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____

Soil Type (SCS): Sharpsburg Silty Clay Loam

Date: OCTOBER 30, 1996

Gerrold C. Hood
Signature of Reviewing Official

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address 6900 SW 44th. (no rural route) City Lincoln NE, Zip _____

A. Building Sewer

1. Material: Plastic
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 50 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 20+ ft.
   stream NA ft.
   pressure line 20+ ft.
   property line 20+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
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: 10-12 in.
8. Distances to: Well or suction line 20+ ft.
   Stream NA ft.
   Pressure line 20+ ft.
   Property line 20+ ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 20 ft.

D. Absorption Field

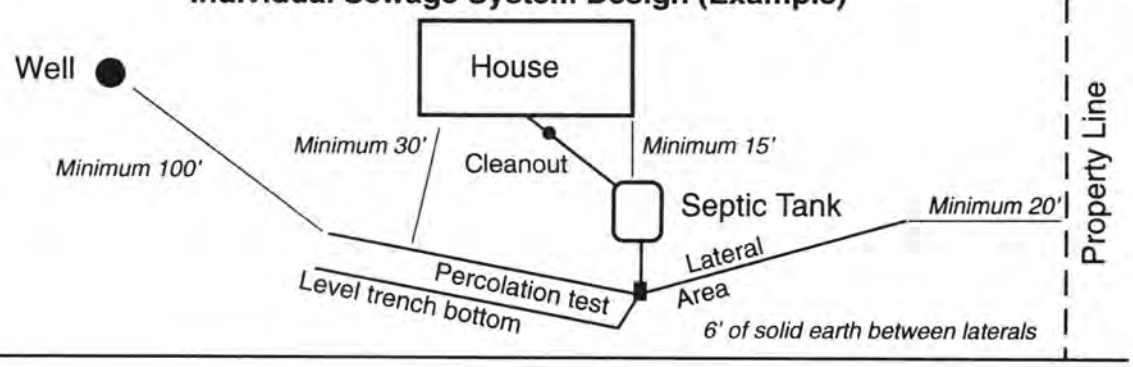
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 0 in/100 ft.
   Average depth 3 in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 100 + ft.
   Stream NA ft.
   Pressure line 100+ ft.
   Property line 20 ft.

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

Indicate North with Arrow

Individual Sewage System Design (Example)



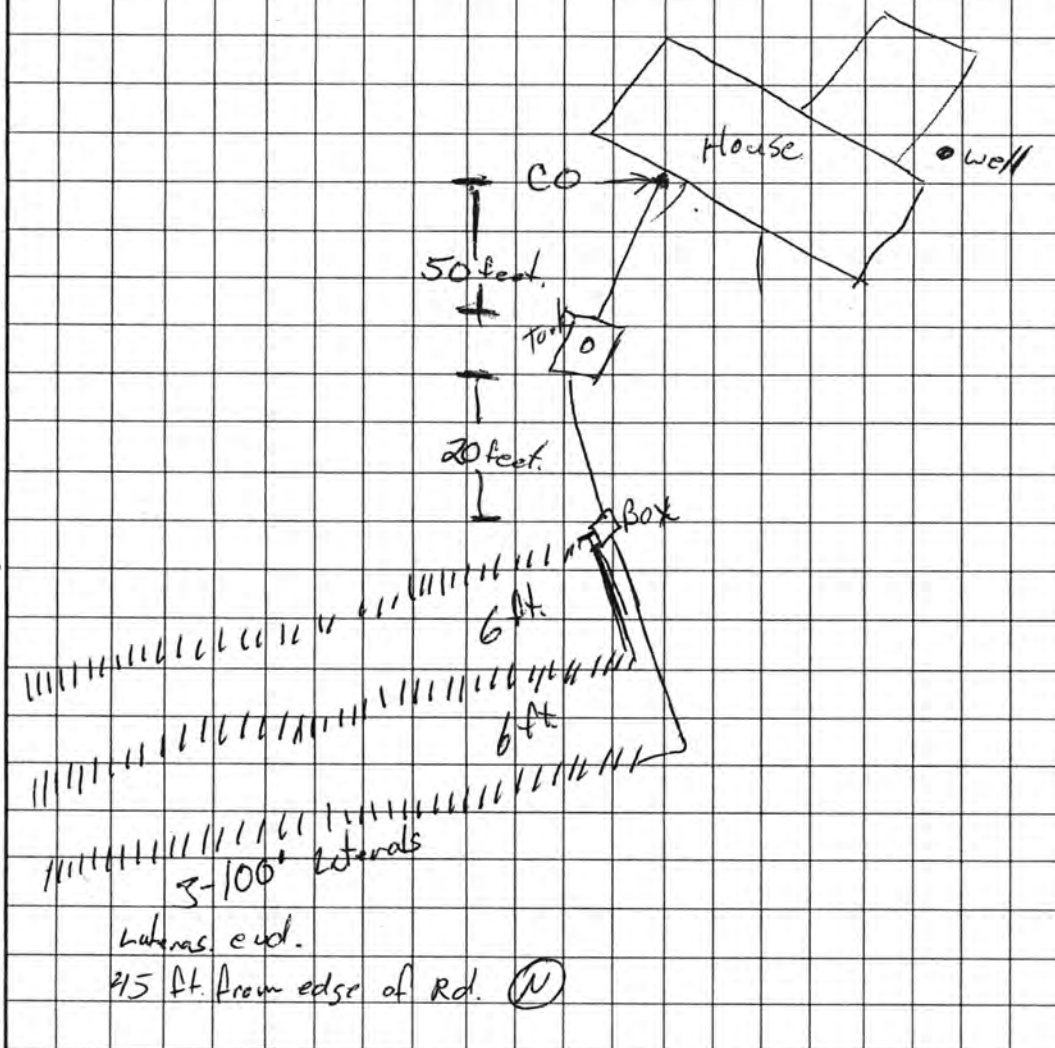
FORM 23-103 10-96

As Built Drawing

SW 44 →

N →

Indicate North with Arrow



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