LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380172601

Issued 03/04/98
Expires 09/04/98
Revenue Code 3157

FEES: $150.00

PAID

Establishment

DAVID BRAUER
T9N R6E SEC 21
CARDWELL WOODS LOT 3
2601 W DENTON ROAD

Permittee

DAVID BRAUER
5601 MILKWEED CIR
LINCOLN NE 68516-2008

TOTAL $150.00

Issued By Greg Wright MO
M. Jane Ford
Health Director

6201

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: 98801726

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 2601 W. Denton Road (no rural route) City Lincoln NE, Zip 68523

Legal Description 21 9N 6E Cardwell Woods 3
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 David Brauer Signature _____

Address _____ City/State/Zip _____

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor Kevin Loth & Lyle Loth

Name Shadow Brook Constr. Company Name _____

Address 2201 W. Denton Road City/State/Zip Lincoln, NE 68523

☐ Check if contractor designed system Work Phone 420-2283 560-3764 Cell

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

Designer Name Lyle L. Loth Firm E-S-P Work Phone 484-5500

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub YES NO

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day 600 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 3/4/98 Date frwd 3/5/98 **ACTION** ☒ Approved ☐ Disapproved Signature Jerold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3-5-98 Date frwd 3-5-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 3-5-98 Date frwd 3-5-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____

9-18-98 new plot drawing

Installation Final Written Approval

By Ron Mayhew

Date 10-13-98

Business Office Use Only

Date Rec'd 03/04/98

Amt Paid 150.00

Rec'd By LO Cash/Check No. 3916

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: 98380172 6

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2601 W. Denton Road (no rural route) City Lincoln NE, Zip 68523

Owner David Brayer Addresss

Soil Type (SCS): Hudson Silty Clay Loam Percolation Rate: 10.0 min./in min./inch

Date of Tests 6/16/96 to 6/18/96 Weather: Precipitation — Temperature

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)
7	36"	6/16	1:30	6/17	7:30	6/18	8:38	13 3/8	8:48	14 1/4	10	7/8	11.43 (11)
8	36"	6/16	1:35	6/17	7:35	6/18	8:39	17 3/4	8:49	19 1/4	10	1 1/2	6.67 (7)
9	36"	6/16	1:40	6/17	7:40	6/18	8:40	8 5/8	8:50	9 1/2	10	7/8	11.43 (11)
10	36"	6/16	1:45	6/17	7:45	6/18	8:41	18"	8:51	19 1/2	10	1 1/2	6.67 (7)
11	36"	6/16	1:50	6/17	7:50	6/18	8:42	12 3/4	8:52	14	10	1 1/4	8.00
12	36"	6/16	1:55	6/17	7:55	6/18	8:43	7 1/2	8:53	8 1/8	10	5/8	16

Sum of Percolation Rates: 60.2
Average of Rates: 10.0
Rate Used for Calculation: 10 min./in.

Person Conducting Percolation Tests

Name: Lyle Loth
Phone: 484-5500
Address 4910 Normal Blvd - Suite D
Lincoln, NE 68506

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date MARCH 5, 1998

FORM 23-101 10-96

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

C

Permit Number: 98380172G

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) 2601 W. Denton Road City Lincoln NE, Zip 68523

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 10 (min. per inch) Soil Type: Judson Silty Clay Loam Land Slope: _____ %

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

Total Square Feet of Field Required: 660 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 360 ft. Number of Trenches 4 @ 90' Trench Width 2'

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

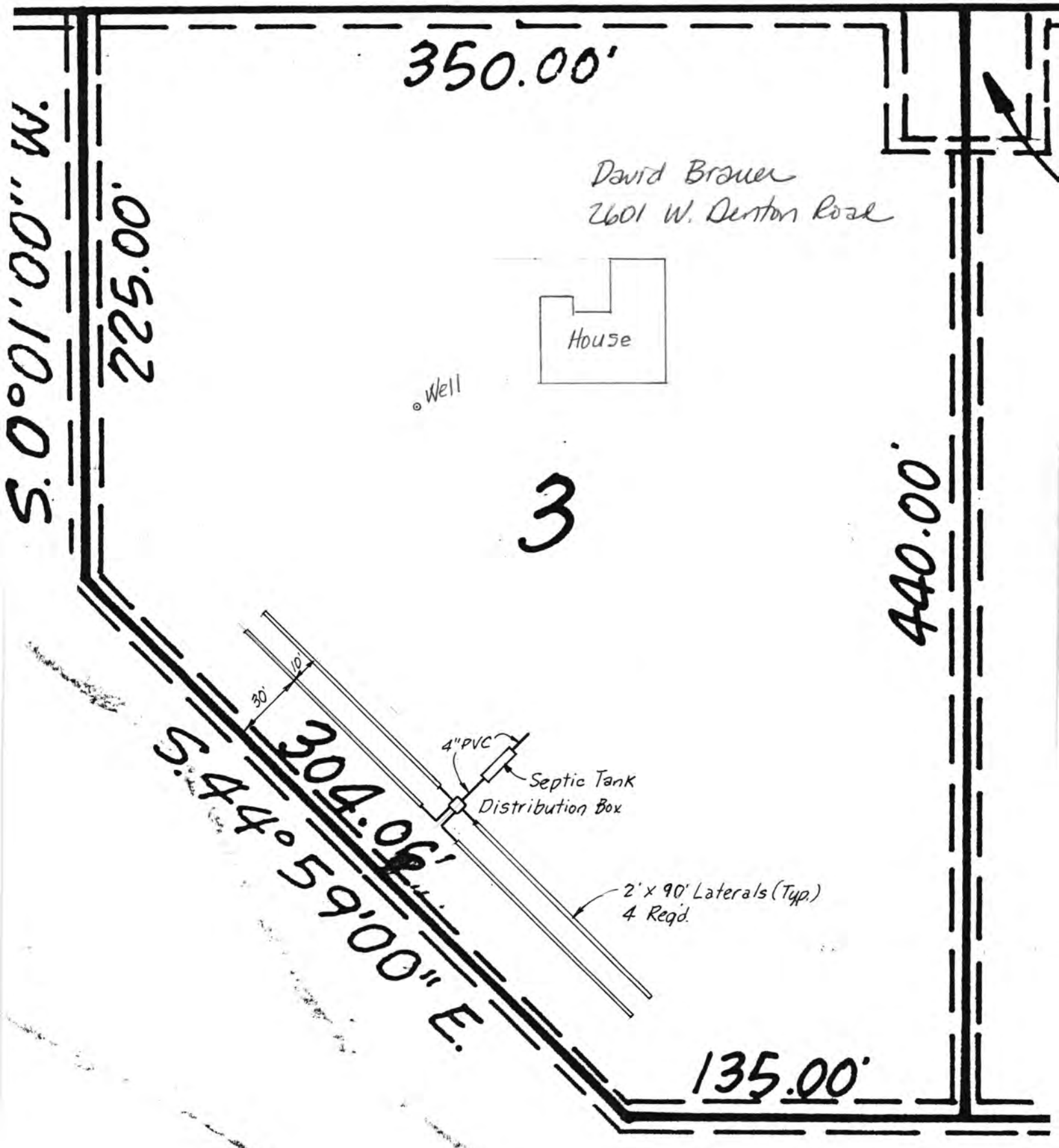
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐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

E. Required Signatures

Home Building Contractor _____ Date _____

Installer Tyler L. Loth Date _____

FORM 23-102 10-96


350.00'
David Brauer
2601 W. Denton Road
House
Well
3
S. 0°01'00" W.
225.00'
440.00'
30'
10'
304.06'
S. 44°59'00" E.
4" PVC
Septic Tank
Distribution Box
2' x 90' Laterals (Typ.)
4 Req'd.
135.00'
S. 89

OCT 6 1998

D

Lincoln-Lancaster County Health Department
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Permit Number: 98380172601

Sewage Disposal System

As Built Plans & Specifications

Date 9-25-98

System Location (Indicate correct number and street)

Address 2601 W. Denton Road (no rural route) City Lincoln NE, Zip 68523

A. Building Sewer

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

B. Septic Tank

1. Material: Concrete
   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: 18 in.
8. Distances to: Well or suction line 100 ft.
   Stream — ft.
   Pressure line — ft.
   Property line 60 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 17 ft.

D. Absorption Field

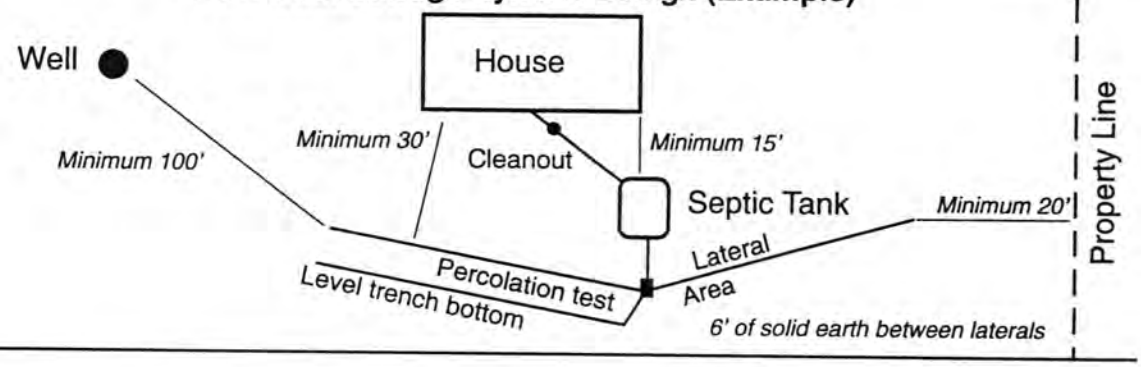
(Provide as-built drawings on back of this form)

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. 60 ft., _____ ft.
3. Trench dimensions: Width 2 ft.
   Slope 3" - 6" in/100 ft.
   Average depth 24 in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 110 ft.
   Stream — ft.
   Pressure line — ft.
   Property line 30 ft.

Indicate North with Arrow

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

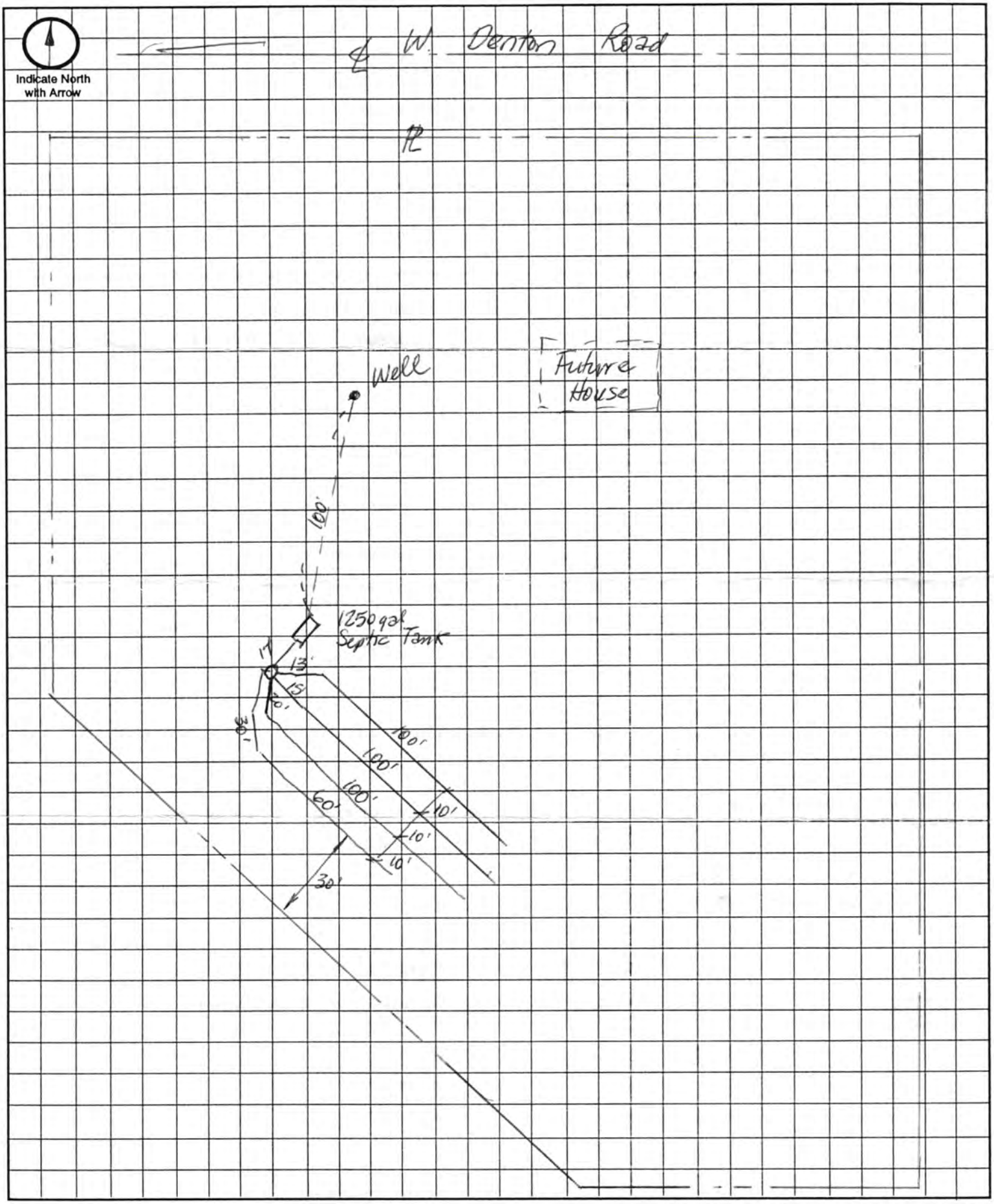
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

FAT 435-3241



Approximate Scale: _____ft. = _____ grid line/s