LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 98380183601

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 08/25/98
Expires 02/25/99
Revenue Code 3157

Establishment

DAVID DUNCAN
T9N R6E SEC 21
BURR OAKS ADD BLK 4 LOT 3
1301 W BURR OAKS

FEES: $150.00

PAID

TOTAL $150.00

Permittee

DAVID DUNCAN
6730 PARK CREST CT
LINCOLN NE 68506-2864

Issued By Health Director
Lincoln-Lancaster County Health Department

008053

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 1301 W. Burr Oaks Rd (no rural route) City Lin NE, Zip Ne

Legal Description 21 9N 6E Burr Oaks 4 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 6730 Park Crest 68506

B. Owner

Name John + David Duncan Signature John Duncan

Address _____ City/State/Zip _____

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

C. Contractor

Name Larry Schwark Company Name Schwark Trenching Inc

Address _____ City/State/Zip Lincoln Ne

☐ Check if contractor designed system Work Phone _____

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

Designer Name SAA 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 8-24-98 Date frwd 8/25/98 **ACTION** ☒ Approved ☐ Disapproved Signature John E Mann
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8/25/98 Date frwd 8/25/98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 8-25-98 Date frwd 8-25-98 **ACTION** ☒ Approved ☐ Disapproved Signature Deanna Bartels

~~11/13/98 Need drawing. J.C.H~~

Installation Final Written Approval

By Jerrold C. Wood

Date NOVEMBER 18, 1998

Business Office Use Only

Date Rec'd 08/24/98
Amt Paid 150.00
Rec'd By _____ Cash/Check No. 4838

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

B

Permit Number:

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

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1301 W. Burr Oaks Rd. City Lincoln NE, Zip _____
(no rural route)
Duncan

Owner Stedhoff Address 1301 W. Burr Oaks Rd

Soil Type (SCS): Silty clay SHARPSBURG & WYMORE Percolation Rate: _____ min./inch

Date of Tests 5/9/98 to 5/10/98 Weather: Precipitation wet Temperature 75°

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	24	5/9	1:00	5/10	1:00	5/10	4:30	6	5/10	5:00	30	1/2	60
2	26	5/9	1:05	5/10	1:05	5/10	4:32	6	5/10	5:02	30	1/2	60
3	24	5/9	1:10	5/10	1:10	5/10	4:34	6	5/10	5:04	30	3/4	40
4	28	5/9	1:15	5/10	1:15	5/10	4:36	6	5/10	5:06	30	1/2	60
5	26	5/9	1:20	5/10	1:20	5/10	4:38	6	5/10	5:08	30	3/4	40
6	28	5/9	1:25	5/10	1:25	5/10	4:40	6	5/10	5:10	30	1/2	60

Sum of Percolation Rates: 320
Average of Rates: 53.34
Rate Used for Calculation: 60

Person Conducting Percolation Tests

Name: John Starkweather
Phone: 420-6023
Address 1667 N. 48th
Lincoln, Nebr. 68524

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks UTILIZE MAXIMUM PERC. RATE DUE TO VARIABLE SOIL, EXISTING WELL, NO WELL PERMIT REQUIRED

Signature of Reviewing Official _____ Date 8-24-98

FORM 23-101 10-96

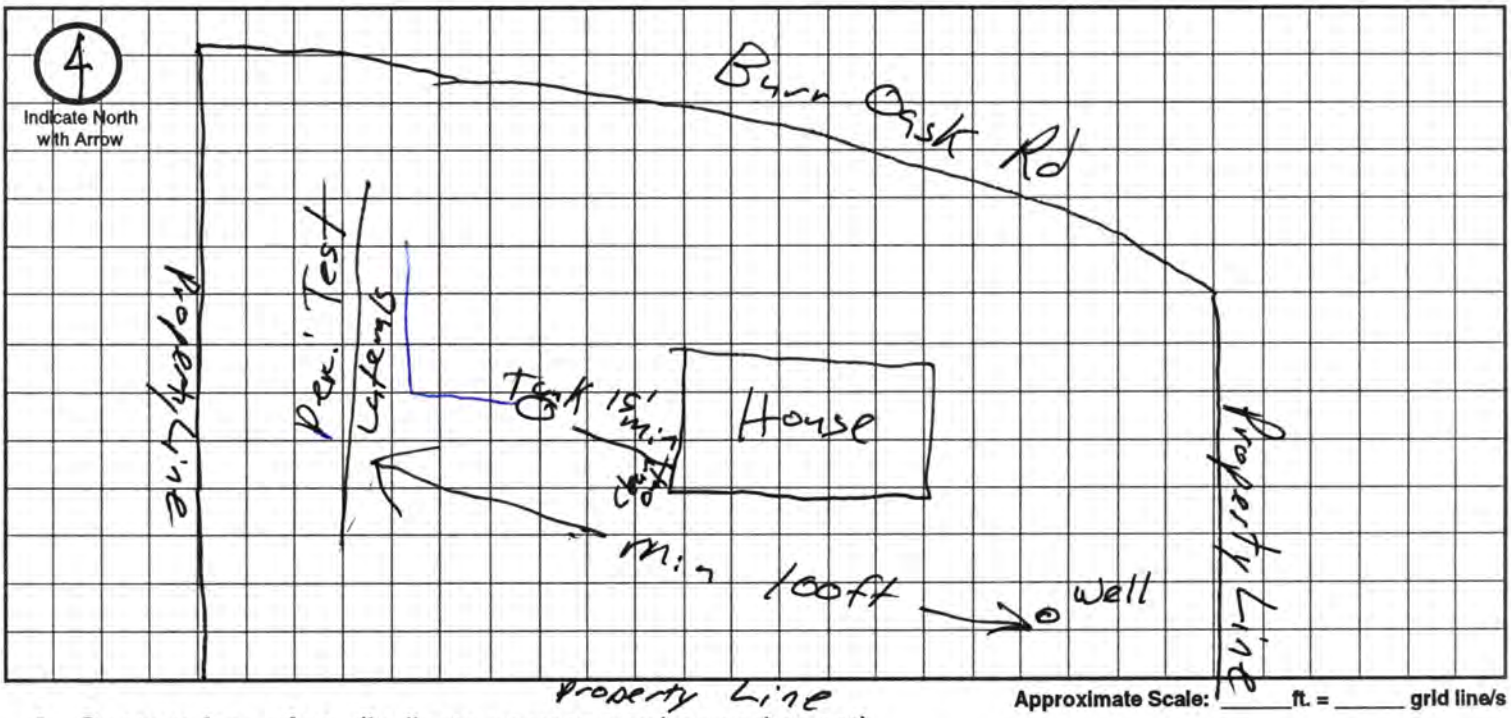
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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.



A. System Location (Indicate correct number and street)

Address (no rural route) 1301 W. Burr Oak Rd 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 53.34 (min. per inch) Soil Type: SILTY CLAY SHARPSBURG & WYMORE Land Slope: 2 %

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

Total Square Feet of Field Required: _____ 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 330 ft. Number of Trenches 4 Trench Width 3 ft
247 ft @ 4 ft 3 4 ft

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 John Gillin Date 8-24-98

Installer Larry Schunk Date 8-24-98

FORM 23-102 10-96

NOV 17 1998

D

Permit Number:

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

Sewage Disposal System

As Built Plans & Specifications

Date 11-13-98

System Location (Indicate correct number and street)

Address 1301 W Burr Oaks Rd City Lincoln 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: 78 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100'+ 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: 8" 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: 12 ft.

D. Absorption Field

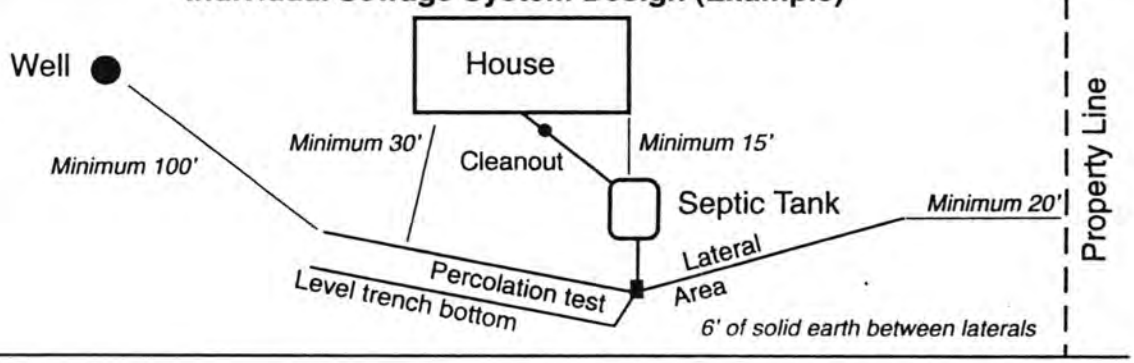
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator 15"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 102 ft. 102 ft.
   51 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope _____ in/100 ft.
   Average depth 3' in
4. Filter material: Road Gravel
   Depth of material 16 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.

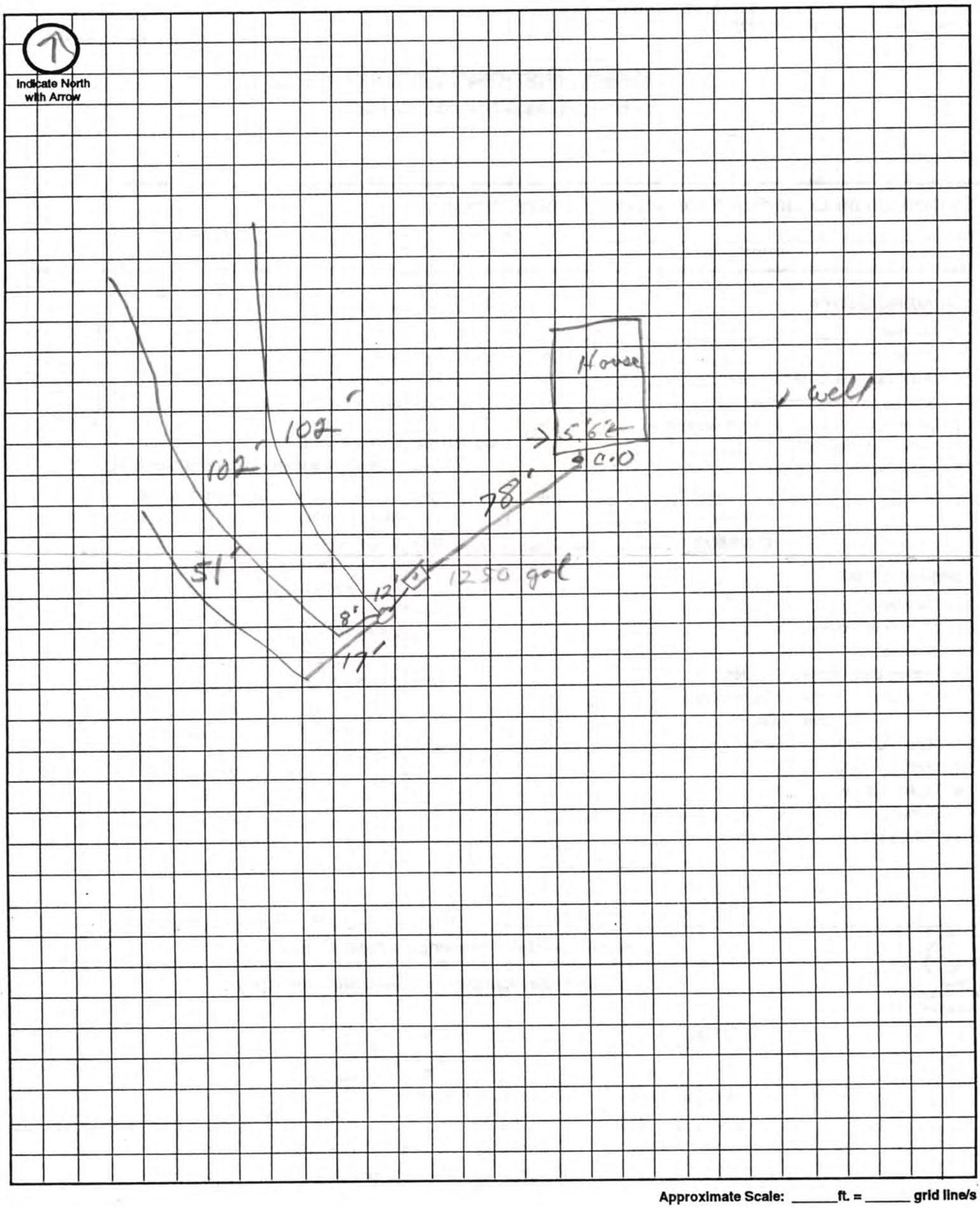
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing by Larry Schwarck



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