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) Constructed wetland

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 5350 Bridle Lane (no rural route) City Lincoln NE, Zip 68516

Legal Description SE (1/4) SE (1/4) 20 (Section) 9N (Township) 7E (Range) Country Acres South (Subdivision) 1st (Addition) 1 (Block) 3 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Larry Dlugosh Signature Larry D. Dlugosh

Address 4824 Fir Hollow Lane City/State/Zip Lincoln, NE 68516

☐ Check if owner designed system Home Phone 421-8726 Work Phone 472-0975

C. Contractor

Name Robert Schultz Company Name Schultz Construction

Address 8900 South 56th City/State/Zip Lincoln, NE 68516

☐ Check if contractor designed system Work Phone 430-6020

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

Designer Name Dale Schlautman Firm EA Engineering, Science and Technology INC Work Phone 476-3766

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 5 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 _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By _____

Date _____

Business Office Use Only

Date Rec'd _____

Amt Paid _____

Rec'd By _____ Cash/Check No. _____

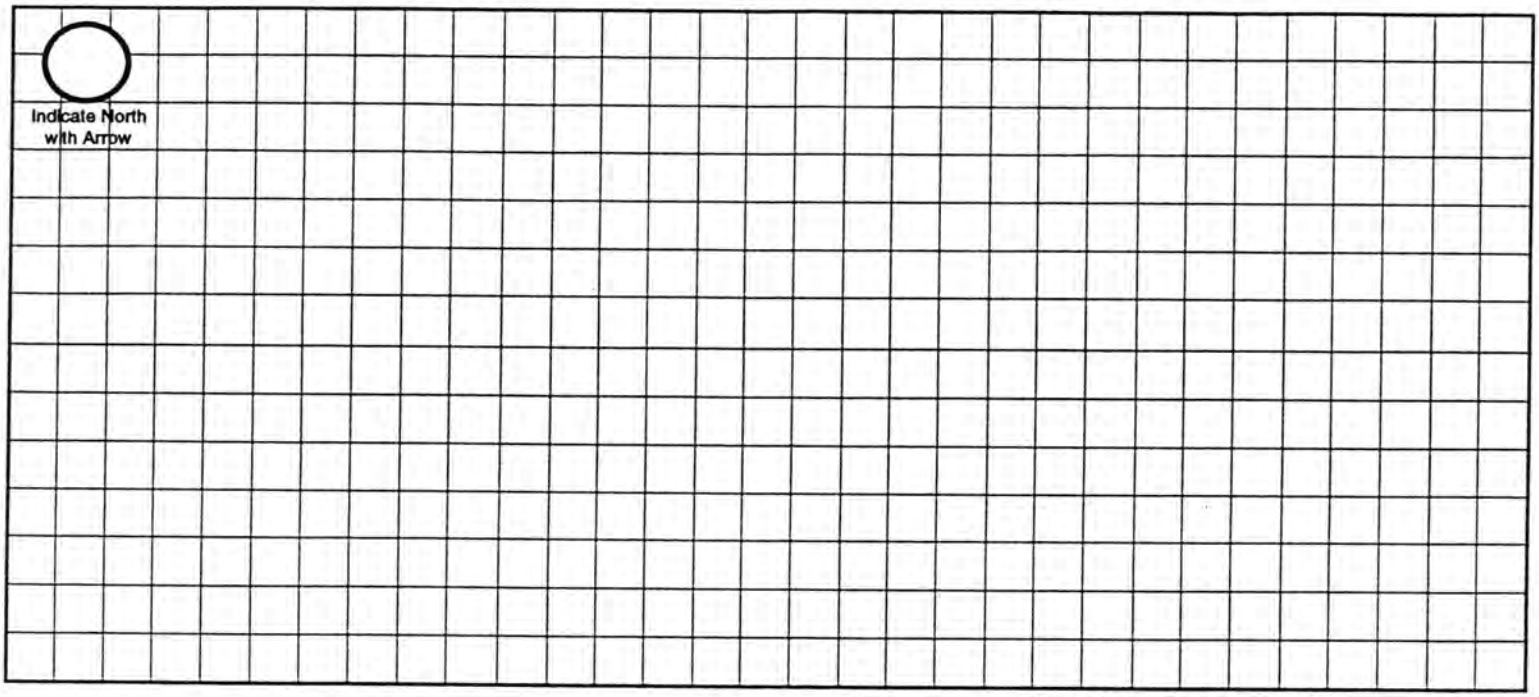
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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.



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

A. System Location (Indicate correct number and street)

Address (no rural route) 5350 Bridle Lane City LINCOLN NE, Zip 68516

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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 _____ gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

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 _____ Date _____

FOR NDEQ USE ONLY	
PERMIT NUMBER:	
APPROVED BY:	
DATE APPROVED:	

FORM B

APPLICATION FOR CONSTRUCTION / OPERATING PERMIT FOR A SEPTIC SYSTEM

(PLEASE PRINT OR TYPE)

A. Owner Information:

☐ Check here if owner designed system

Owner: Larry Dlugosh (Name)

Owner: [signature] (Signature)

4824 Fir Hollow Lane (Street, P.O. Box, or Route) — Lincoln (City) — NE (State) — 68516 (Zip) — 421-8726 (Phone Home) / 472-0975 (Work)

B. Contractor Information:

☐ Check here if contractor designed system

Contractor: Robert Schultz (Name)

Schultz Construction (Company Name)

8900 South 56th (Street, P.O. Box, or Route) — Lincoln (City) — NE (State) — 68516 (Zip) — 430-6020 (Phone Work)

C. Engineer Information:

☒ Check and complete if engineer designed system

Designer: Dale Schlautman (Name) — EA Engineering, Science, and Technology, Inc (Firm) — 476-3766 (Phone Work)

D. System Location:

Legal Description: SE (1/4) of SE (1/4) — 20 (Section) — 9N (Township) — 7E (Range) — Country Acres South (Subdivision) — 1 (Block) — 3 (Lot#)

County: Lancaster — Is a County Permit Required: ☒ Yes ☐ No

☐ Check here if system mailing address is not the same as the owners and complete mailing information

System mailing Address: 5350 Bridle Lane (Street, P.O. Box, or Route) — Lincoln (City) — NE (State) — 68516 (Zip)

E. This System Will Serve A:

☒ Dwelling

Number of Bedrooms: 5

Is There a Whirlpool Bathtub: ☒ Yes ☐ No

☐ Establishment (name) _____

Design Flow in Gallons per day: _____

Type of Wastewater: ☐ Domestic ☐ Non-Domestic

F. Septic Tanks:

Number of Tanks in Series: 2

Tank Size (gallons): 1000 (1st) — 600 (2nd) — _____ (3rd) — _____ (4th) — _____ (5th)

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

G. Absorption system: (See Attachment C for Percolation Information)

Percolation Rate: 240 (min. per inch) — Soil Type: _____ — Land Slope: ____ %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Gravelless ☒ Other constructed wetland

Total Square Feet of Field Required: _____ (ft. sq.)

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

Number of Trenches: _____ — Number of Absorption Beds: _____

Trench Width: _____ — Number of Distribution Laterals per Bed: _____

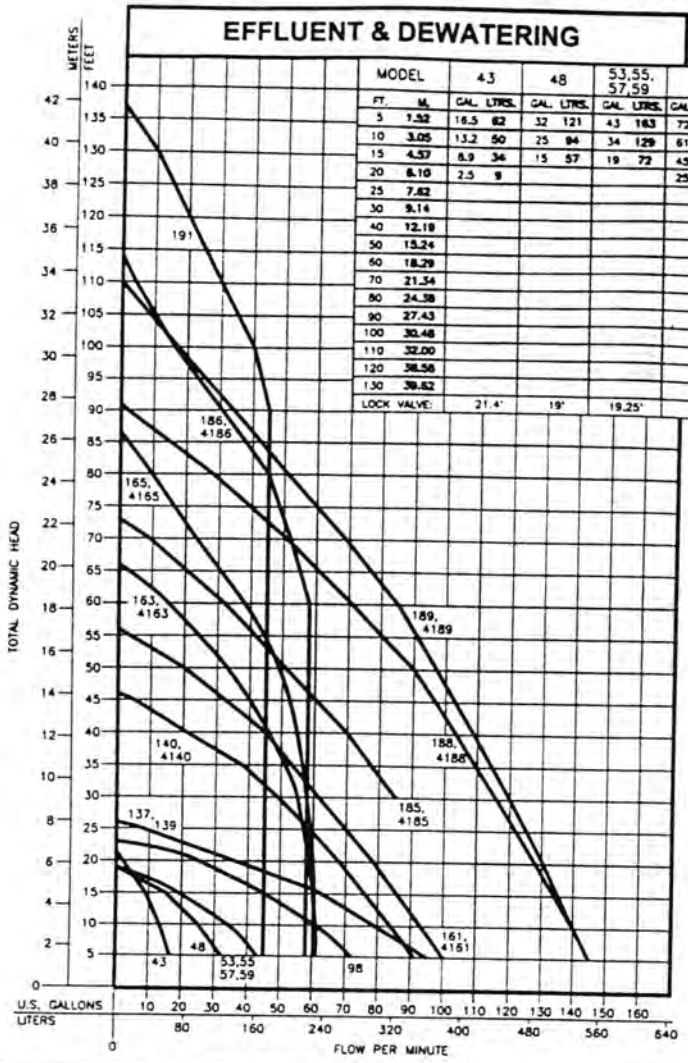
H. Setbacks: Check the Boxes Below If the Required Setback Has Been Satisfied:

Distance From	Private Well	Public Well	Surface Water	Ground Water	Pressure Water lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☐	10 ☒	10 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	10 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☒	50 ☒		25 (OVER) ☒	50 ☒	100 ☒	200 ☒	☒

Different for a Lagoon see Regs.

HEAD/CAPACITY CURVE

EFFLUENT & DEWATERING



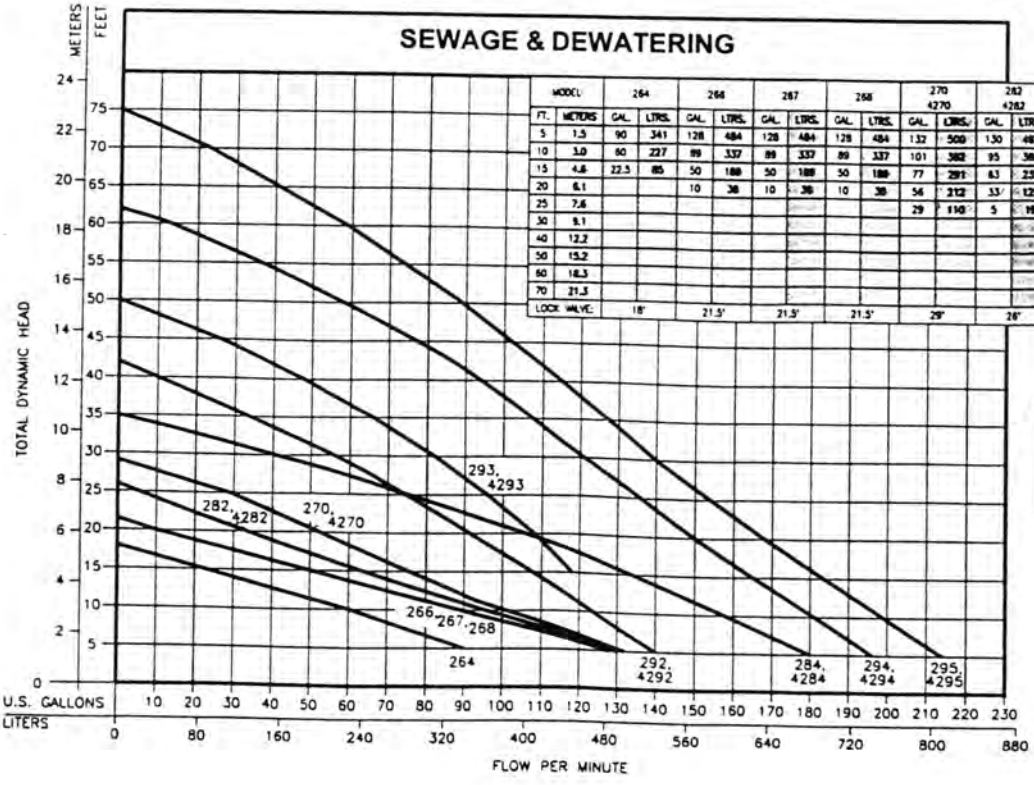
MODEL	43	48	53,55, 57,59	98	137,139	140, 4140	161, 4161	163, 4163	165, 4165	185, 4185	186, 4186	188, 4188	189, 4189	191
FT. M.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.
5 1.52	16.5 62	32 121	43 163	72 273	93 352	91 344	100 379	61 231	61 231		58 220	145 549	145 549	45 170
10 3.05	13.2 50	25 94	34 129	61 231	79 298	84 318	93 352	60.5 229	60.5 229		58 220	140 530	140 530	45 170
15 4.57	8.9 34	15 57	19 72	45 170	64 242	76 288	85 322	60 227	60.5 229		58 220	134 507	135 511	45 170
20 6.10	2.5 9			25 95	36 136	68 257	78.5 297	59 223	60 227		58 220	128 484	130.5 494	45 170
25 7.62					8 30	59 223	70 265	57 216	59 223		58 220	122 462	125 473	45 170
30 9.14						49 185	61.5 233	55 208	58 220	85 322	58 220	116 439	120 454	45 170
40 12.19						21 79	45 170	46 172	55 206	70 265	58 220	103.5 392	109 413	45 170
50 15.24							20 78	33 125	50 189	51 193	58 220	90 341	97 367	45 170
60 18.29								15 57	39 148	32 121	58 220	71 269	85 322	45 170
70 21.34									22.5 85	9 34	52 197	51 193	69 261	45 170
80 24.38									10 38		45 170	28 106	51 193	45 170
90 27.43											30.5 115	2 8	34 129	45 170
100 30.48											16 60		17 64	40 151
110 32.00											4 15			30 114
120 36.56														20 76
130 39.62														10 38
LOCK VALVE:	21.4'	19'	19.25'	23'	26'	46'	56'	66'	86.5'	73'	114'	91'	110'	137'

⚠ CAUTION Model 185/4185 should not be subjected to less than 30 feet TDH.

NOTE: For Head Capacity on Model 112, Industrial column-explosion proof pump, see FM0219.

009922a

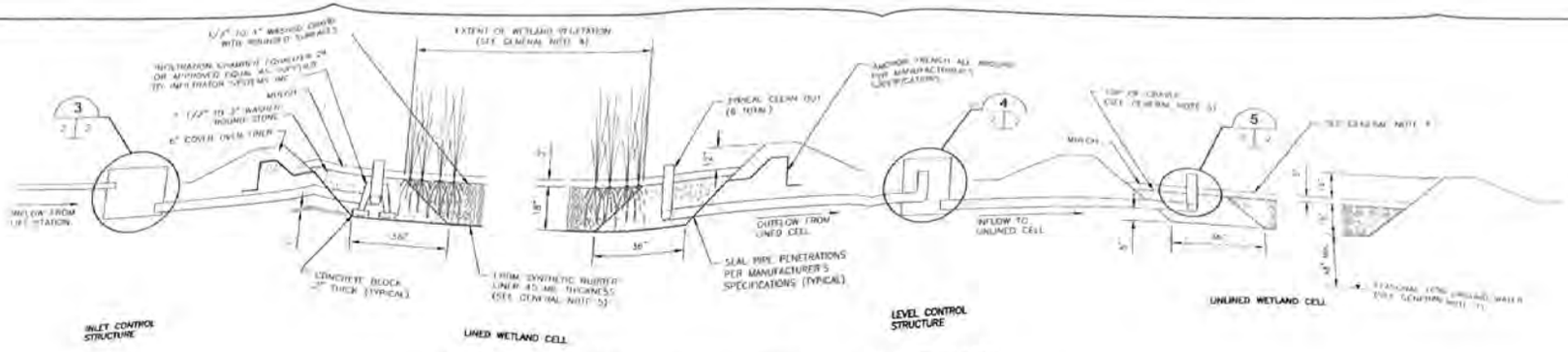
SEWAGE & DEWATERING



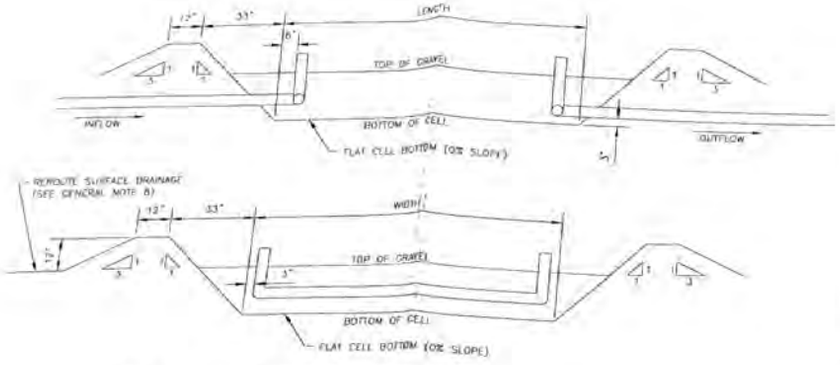
MODEL	264	266	267	268	270 4270	282 4282	284 4284	292 4292	293 4293	294 4294	295 4295
FT. METERS	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.	GAL. LTRS.
5 1.5	90 341	128 484	128 484	128 484	132 500	130 492	180 681	140 530	-- --	196 742	214 810
10 3.0	60 227	89 337	89 337	89 337	101 382	95 360	156 590	124 469	-- --	181 685	199 753
15 4.6	22.5 85	50 189	50 189	50 189	77 291	63 238	135 511	106 401	118 447	165 625	184 696
20 6.1		10 38	10 38	10 38	56 212	33 125	106 401	91 344	106 401	150 568	168 636
25 7.6					29 110	5 19	76 288	75 284	94 356	136 515	154 583
30 9.1							43 163	56 212	82 310	121 458	140 530
40 12.2								10 38	48 182	94 356	115 435
50 15.2										58 220	89 337
60 18.3										13 49	58 220
70 21.3											23 87
LOCK VALVE:	18'	21.5'	21.5'	21.5'	29'	28'	35'	42'	50'	62'	75'

⚠ CAUTION Model 293/4293 should not be subjected to less than 15 feet TDH.

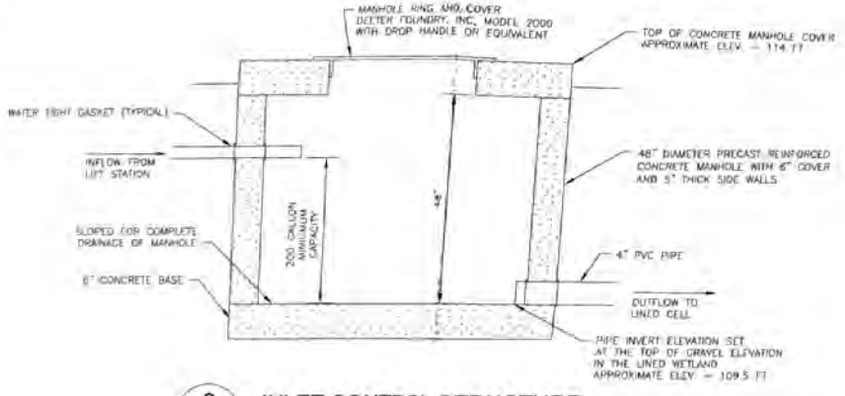
009904a



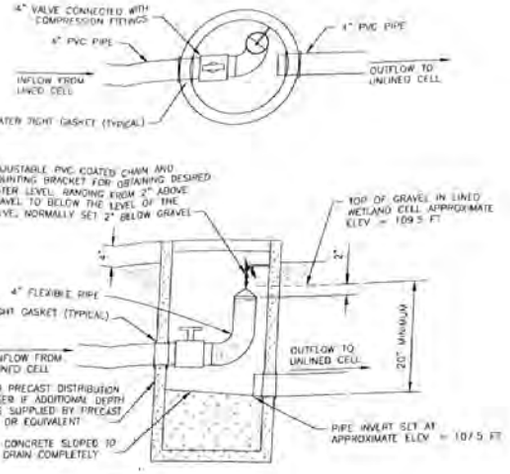
1 WETLAND SECTION WITH DIRECTION OF FLOW
NO SCALE



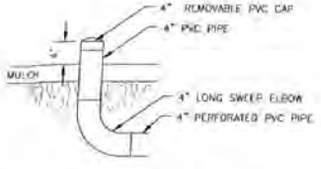
2 WETLAND DIMENSIONS
NO SCALE



3 INLET CONTROL STRUCTURE
NO SCALE



4 LEVEL CONTROL STRUCTURE
NO SCALE



5 TYPICAL CLEAN OUT
NO SCALE

GENERAL NOTES:

1. LIFT STATION SHALL BE INSTALLED IN A CONCRETE BASIN PER MANUFACTURER'S RECOMMENDATIONS. THE PUMP SHALL BE CAPABLE OF AT LEAST 25 GPM AT 28 FEET TOTAL DYNAMIC HEAD. THE PUMP SHALL BE INSTALLED WITHOUT A CHECK VALVE TO PROVIDE DRAINAGE OF THE DISCHARGE LINE BETWEEN PUMP CYCLES. PUMP CONTROLS SHALL BE SET TO PUMP NO MORE THAN 200 GALLONS PER PUMP CYCLE.
2. ALL GRAVITY FLOW PIPELINES SHALL BE INSTALLED WITH AT LEAST 1% SLOPE TO PROVIDE POSITIVE DRAINAGE.
3. THE SHAPE OF THE LINED CELL SHALL REMAIN UNCHANGED. THE SHAPE OF THE UNLINED SHALL MAY BE CHANGED TO IMPROVE AESTHETICS AND ACCOMMODATE THE EXISTING GRADE. THE BOTTOM AREA OF THE UNLINED CELL SHALL NOT BE LESS THAN 1400 SQUARE FEET. FILL MATERIAL SHALL NOT BE USED TO FORM THE BOTTOM OF THE UNLINED CELL. INSTEAD, THE BOTTOM SHALL OF THE UNLINED CELL SHALL BE EXCAVATED FROM THE EXISTING GROUND SURFACE. THE UNLINED CELL SHALL BE CONSTRUCTED TO MINIMIZE COMPACTION AND SURFACE SMEARING. THE BOTTOM OF THE UNLINED CELL CALL BE SCARIFIED TO LOOSEN THE SOIL PRIOR TO PLACEMENT OF GRAVEL.
4. INSTALLATION OF WETLAND VEGETATION SHALL BE THE RESPONSIBILITY OF THE OWNER. SUITABLE WETLAND SPECIES ARE DESCRIBED IN THE DESIGN MANUAL NUMBER 65 – GENERAL DESIGN, CONSTRUCTION AND OPERATIONS GUIDELINES (WWBLDM65) 1-800-624-8301. THE UNLINED CELL MAY BE TOO DRY TO MAINTAIN HEALTHY VEGETATION.
5. LINER INSTALLATION SHALL BE PER THE MANUFACTURER'S SPECIFICATIONS AND SHALL NOT BE PLACED OVER HOLES OR OTHER MATERIALS WHICH MAY PERFORATE THE LINER.
6. THE TOP OF GRAVEL ELEVATION IN THE UNLINED CELL SHALL BE THE SAME OR LOWER THAN THE BOTTOM OF GRAVEL ELEVATION IN THE LINED CELL.
7. THE BOTTOM OF THE UNLINED CELL SHALL MAINTAIN A MINIMUM OF 4' SEPARATION ABOVE THE SEASONAL HIGH GROUND-WATER LEVEL. THE REGIONAL GROUND-WATER LEVEL IS APPROXIMATELY 150' BELOW GROUND SURFACE BASED ON LOCAL REGISTERED WELLS. THE BOTTOM OF CELL ELEVATION IS APPROXIMATELY 15' ABOVE THE GROUND ELEVATION AT THE REEDS IN THE SOUTHEAST CORNER OF THE LOT. THE ABSENCE OF HIGHER PERCHED GROUND WATER SHALL BE VERIFIED DURING INSTALLATION OF THE SEPTIC TANKS.
8. THE SITE SHALL BE GRADED TO PREVENT SURFACE DRAINAGE FROM ENTERING EITHER OF THE WETLAND CELLS.
9. ELEVATIONS NOTED AS 'APPROXIMATE' MAY BE ADJUSTED DURING CONSTRUCTION TO BALANCE CUT AND FILL AND MATCH EXISTING GRADE, AS LONG AS THE SPECIFIED DIMENSIONS AND GENERAL NOTES ARE SATISFIED.
10. WATER LEVEL IN THE UNLINED CELL SHALL BE NORMALLY MAINTAINED ABOUT 2 INCHES BELOW THE TOP OF THE GRAVEL. THE WATER LEVEL SHOULD BE CHECKED ROUTINELY AT EACH OF THE CLEAN OUTS AND ADJUSTED AS NECESSARY USING THE LEVEL CONTROL STRUCTURE. IN THE EVENT THAT THE WATER IN THE LINED CELL DROPS TO 12 INCHES BELOW THE TOP OF THE GRAVEL, WATER SHOULD BE ADDED TO THE SYSTEM TO PREVENT VEGETATION DAMAGE. THE SYSTEM SHALL BE OPERATED AND MAINTAINED AS DESCRIBED IN DESIGN MANUAL NUMBER 65 (SEE GENERAL NOTE 4)

SEWAGE DISPOSAL SYSTEM
5350 BRIDLE LANE
LANCASTER COUNTY, NEBRASKA

WETLAND DETAILS

EA ENGINEERING, SCIENCE, AND TECHNOLOGY

DATE	24 NOVEMBER 1999
DESIGNED BY	STAFF
DRAWN BY	STAFF
CHECKED BY	DJS
PROJECT MANAGER	LMG
PROJECT NUMBER	13689.01
SCALE	AS SHOWN
FILE NAME	—
DRAWING NUMBER	—
SHEET NUMBER	2 OF 2

SECTION 20, TOWNSHIP 09N, RANGE 07E
ROCA QUADRANGLE, LANCASTER COUNTY, NEBRASKA

LOCATION MAP - AERIAL PHOTO

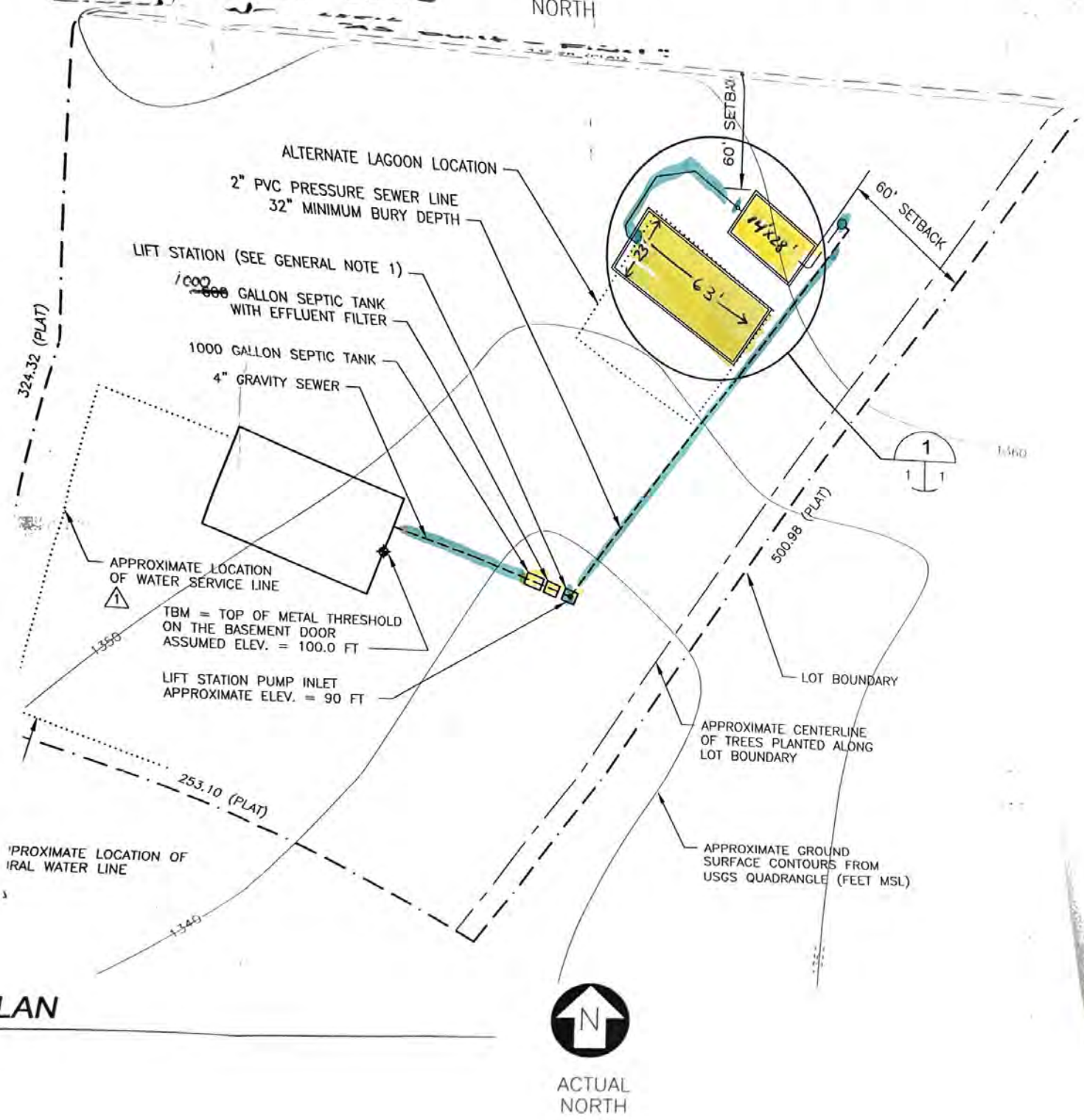
DLUGOSH RESIDENCE
5350 BRIDLE LANE

ACTUAL NORTH

SITE LOCATION MAP - USGS

FEB 29 2000

1"=1000'



PLAN

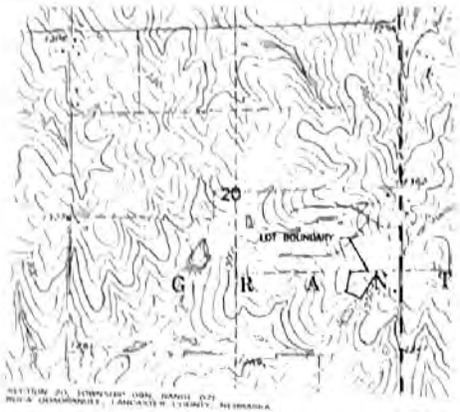
ACTUAL NORTH



SITE LOCATION MAP - AERIAL PHOTO

1"=1000'

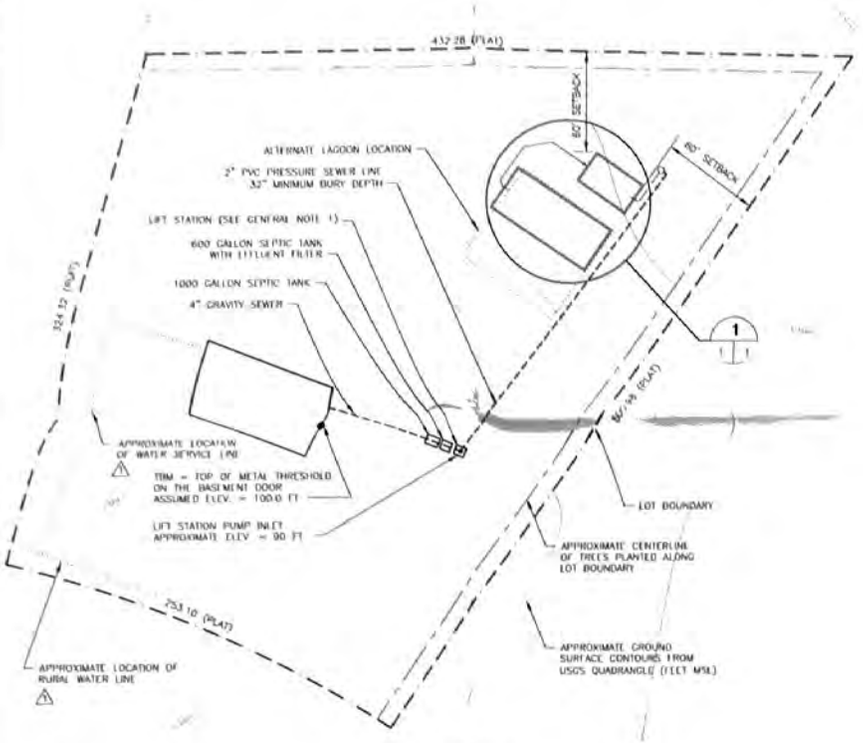
ACTUAL NORTH



SITE LOCATION MAP - USGS QUAD

1"=1000'

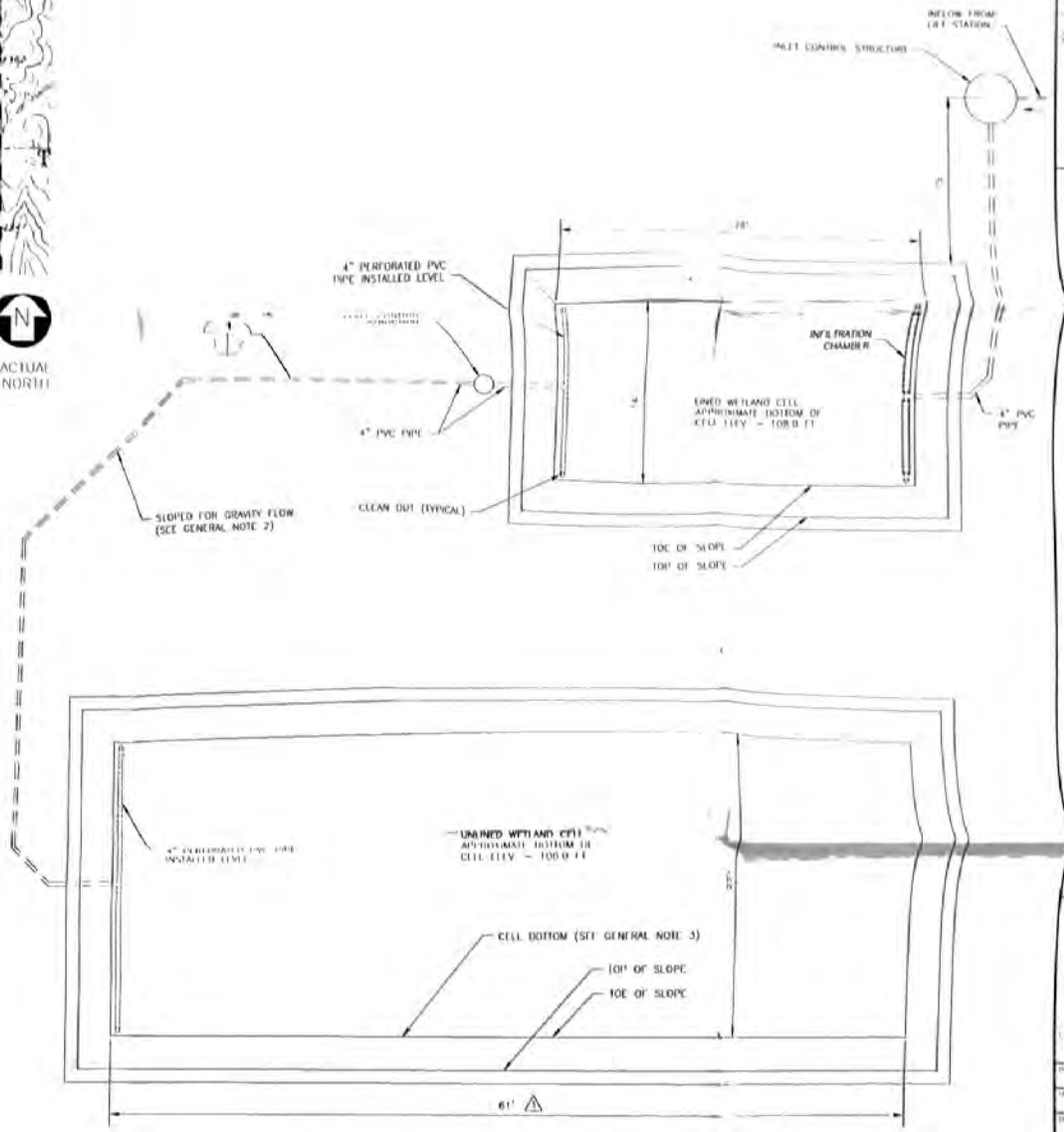
ACTUAL NORTH



SITE PLAN

1" = 40'-0"

ACTUAL NORTH



1 WETLAND PLAN

NO SCALE

ACTUAL NORTH

SEWAGE DISPOSAL SYSTEM
5350 BRIDLE LANE
LANCASTER COUNTY, NEBRASKA

SITE LOCATION MAPS, SITE PLAN, AND WETLAND PLAN

EA ENGINEERING, SCIENCE, AND TECHNOLOGY

24 NOVEMBER 1999

STAFF

STAFF

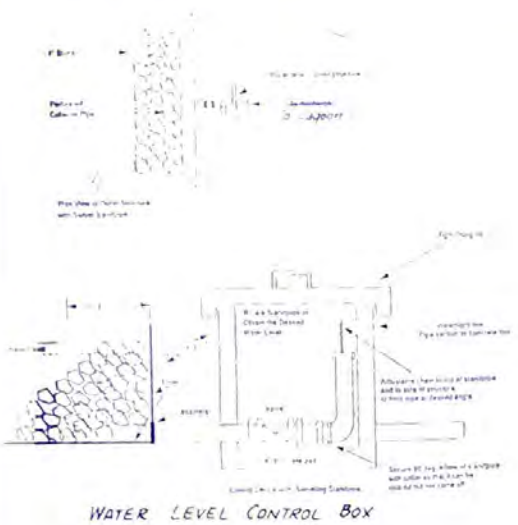
DJS

LNC

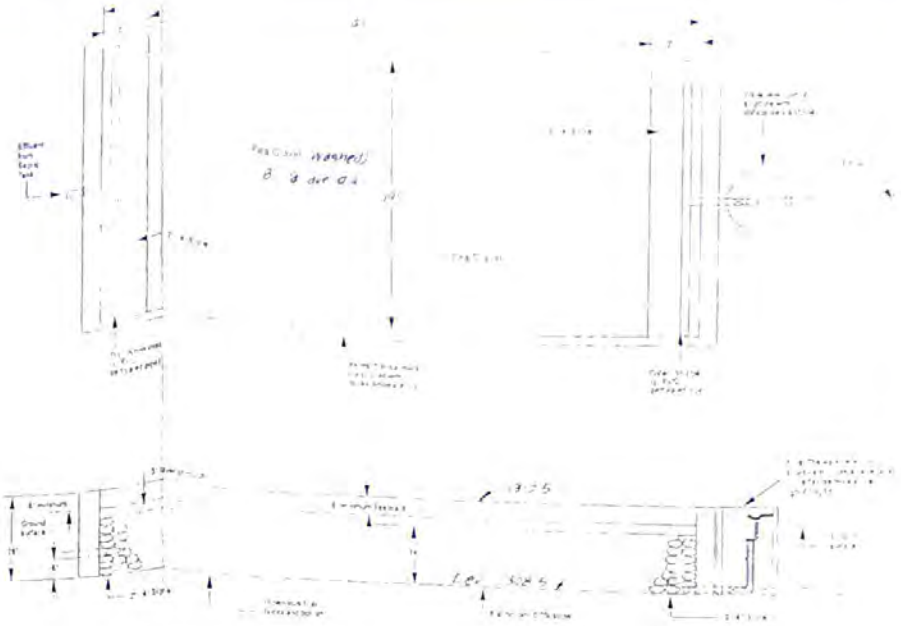
L3699.01

AS SHOWN

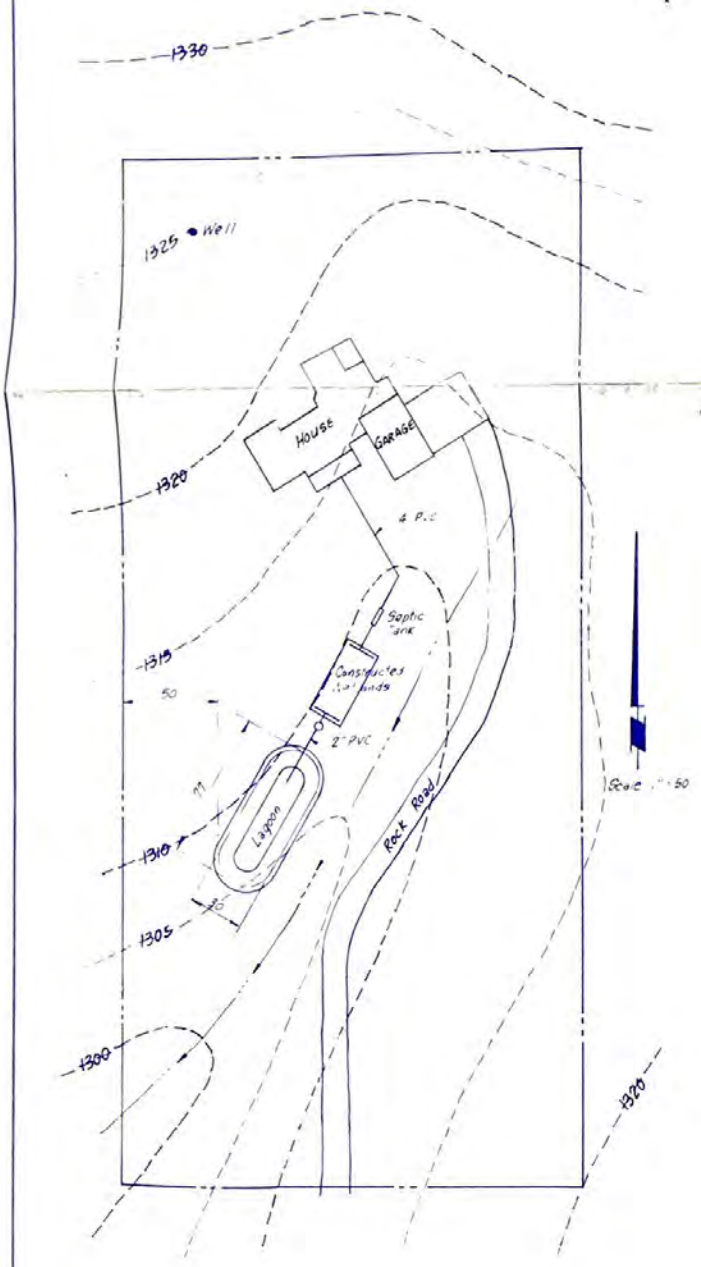
1 OF 2



WATER LEVEL CONTROL BOX



Single Cell Constructed Wetlands



1. Septic tank to be 1500 gal (Compartmented) & shall have an effluent filter - ZABEL Model A100, CRESCO Model F1260 or equal
2. Constructed wetland cell is to be surrounded with an earthen berm or retaining wall of Concrete blocks, landscape timbers, or pressure treated wood, to divert surface runoff from entering the system
3. Exterior Slopes shall be 4H:1V
4. Plantings should be done during Spring or early Summer
5. Typical wetland vegetation includes Cattails, Bulrushes, Canna Lilies, ? Elephant Ear, Arrowhead, Water Iris (Use plants w/ 6" to 8" stalk)
6. Plantings shall be spaced on no less than a one foot grid pattern
7. Lagoon shall be 5' Deep from Floor to Top Dike
   Min Water Depth 2'
   Max Water Depth - 3'

   Lagoon Floor Elev 1306.0
   Top of Dike Elev 1311.0
8. Provide 2 signs at the Lagoon indicating that it contains treated effluent
9. Flush cleanouts are required on all 90° bends (may be 45° in lieu of 1 90° bend) and at both ends of the system
10. Line control box with the insulation on sides and top with 1" thick insulation



	CONSTRUCTED WETLANDS FOR KLASEK RESIDENCE Lot 2, Block 1, COUNTRY ACRES SOUTH - LLCN	E-S-P ENGINEERING	Drawing No.
		Scale 1" = 50'	Date Oct 4, 1996