Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
LAGOON

Permit # 01380228501

Issued 02/14/01
Expires 08/14/01
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Establishment

MANZITTO BROTHERS
T9N R7E SEC 28
COUNTRY LANE EST-1ST BLK 2 LOT 3
9811 S 64 ST

Permitee

MANZITTO BROTHERS
3341 PIONEERS BLVD
LINCOLN NE 68506

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

014329

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

A

Permit Number: 013802285

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 9811 So. 69TH (no rural route) City Lincoln NE, Zip

Legal Description 28 9N 7E County Lane Estates 1ST 2 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 Manzitto Bros Signature

Address 3341 Pioneer Blvd City/State/Zip Lincoln Ne 68506

☐ Check if owner designed system Home Phone 483-2302 Work Phone

C. Contractor

Name Manzitto Bros Company Name Sam Manzitto

Address 3341 Pioneer Blvd City/State/Zip Lincoln Ne. 68506

☐ Check if contractor designed system Work Phone 483-2302

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

Designer Name 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 2/14/01 Date frwd 2/15/01 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Nood

2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2/15/01 Date frwd 2/15/01 ACTION ☒ Approved ☐ Disapproved Signature

3. **City or County Engineer** Date rec'd 2-15-01 Date frwd 2-15-01 ACTION ☒ Approved ☐ Disapproved Signature

10-29-01. 1st Rural @ Dont 1st drop in 87th
10/26/01 Sewer + Tank only. J.C.H.

Installation Final Written Approval

By Jerrold C. Nood

Date NOVEMBER 8, 2001

Business Office Use Only

Date Rec'd 2-14-01

Amt Paid 200.00

Rec'd By TW Cash/Check No. 027988

FORM 23-100 9-00 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector Also WCII

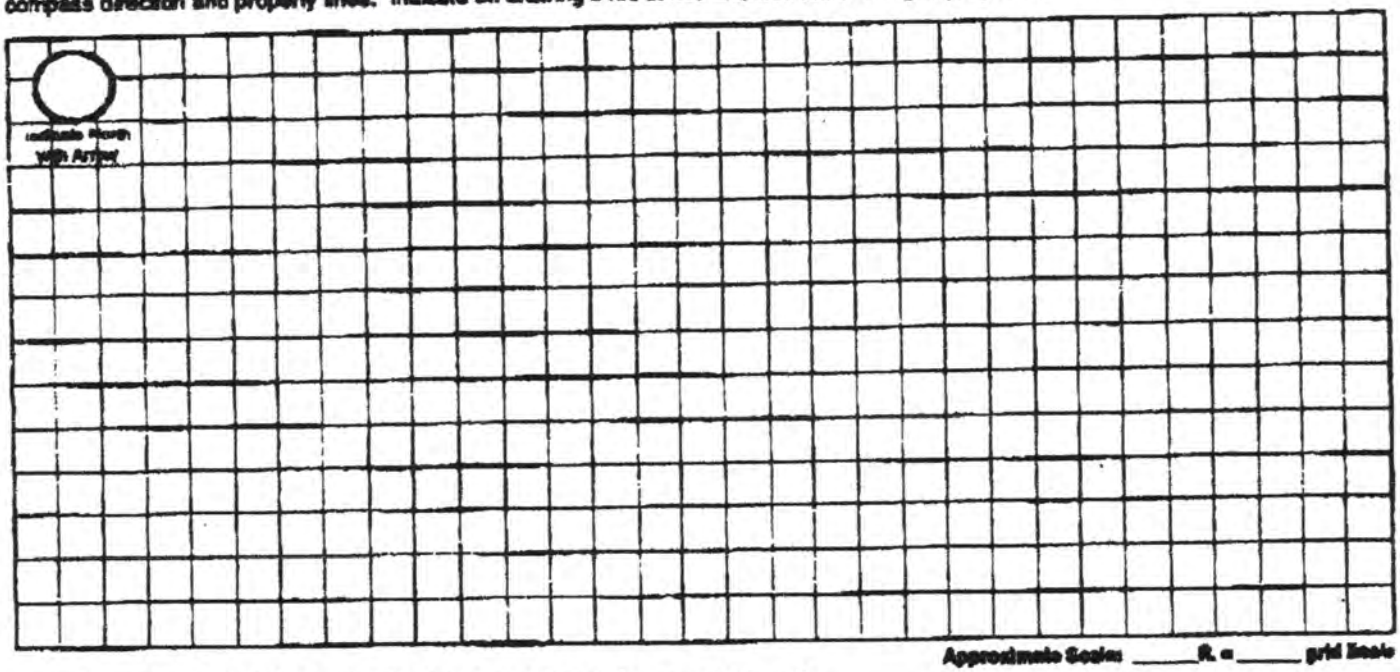
C

Lincoln-Lancaster Co[illegible] Health Department
Environmental Health D[illegible]on
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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 lines

A. System Location (Indicate correct number and street)

Address (no rural route) 9811 So 64th ST. City Lincoln NE. Zip NC

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☑ Other Lagoon

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

Percolation Rate 45 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

Total Square Feet of Field Required: 990 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 248 ft. Number of Trenches _____ Trench Width 4

D. 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 ☐	800 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	600 ☐	50 ☐	4 ☐	30 ☐	20 ☐	50 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Manzitto Inc. Signature Date 2-14-01

Installer Brad Southwick Date 2-14-01

FORM 23-149 10-95

TOTAL P.02

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 10-30-01

System Location (Indicate correct number and street)

Address _____ (no rural route) City LINCOLN NE, Zip 68516

A. Building Sewer

1. Material: PVC Sch 40
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 28" in.
3. Distance between dwelling and septic tank: 55' ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line > 100 ft.
   stream > 50 ft.
   pressure line > 35 ft.
   property line > 20 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1,000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6X9 in.
   Over outlet, diameter 6X9 in.
   Riser: ☐ above ☒ below grade 4 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 20 in.
8. Distances to: Well or suction line > 50 ft.
   Stream > 50 ft.
   Pressure line > 35 ft.
   Property line > 20 ft.

C. Distribution Box

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

D. Absorption Field

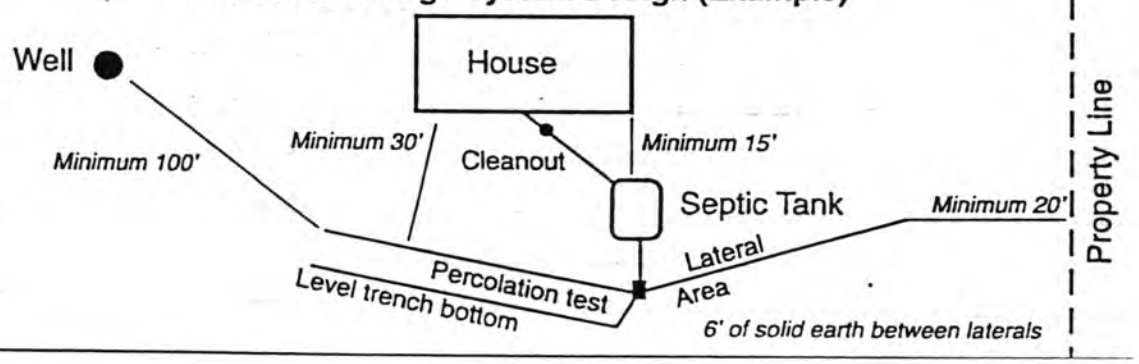
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 16
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 94 ft. 87½ ft.
   87½ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   North lateral → Slope 4 in/100 ft.
   Δ 11" Average depth 36 in
4. Filter material: Road Gravel
   Depth of material 16 in.
5. Distances to: Well or suction line > 100 ft.
   Stream > 50 ft.
   Pressure line > 35 ft.
   Property line > 20 ft.

Indicate North with Arrow

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

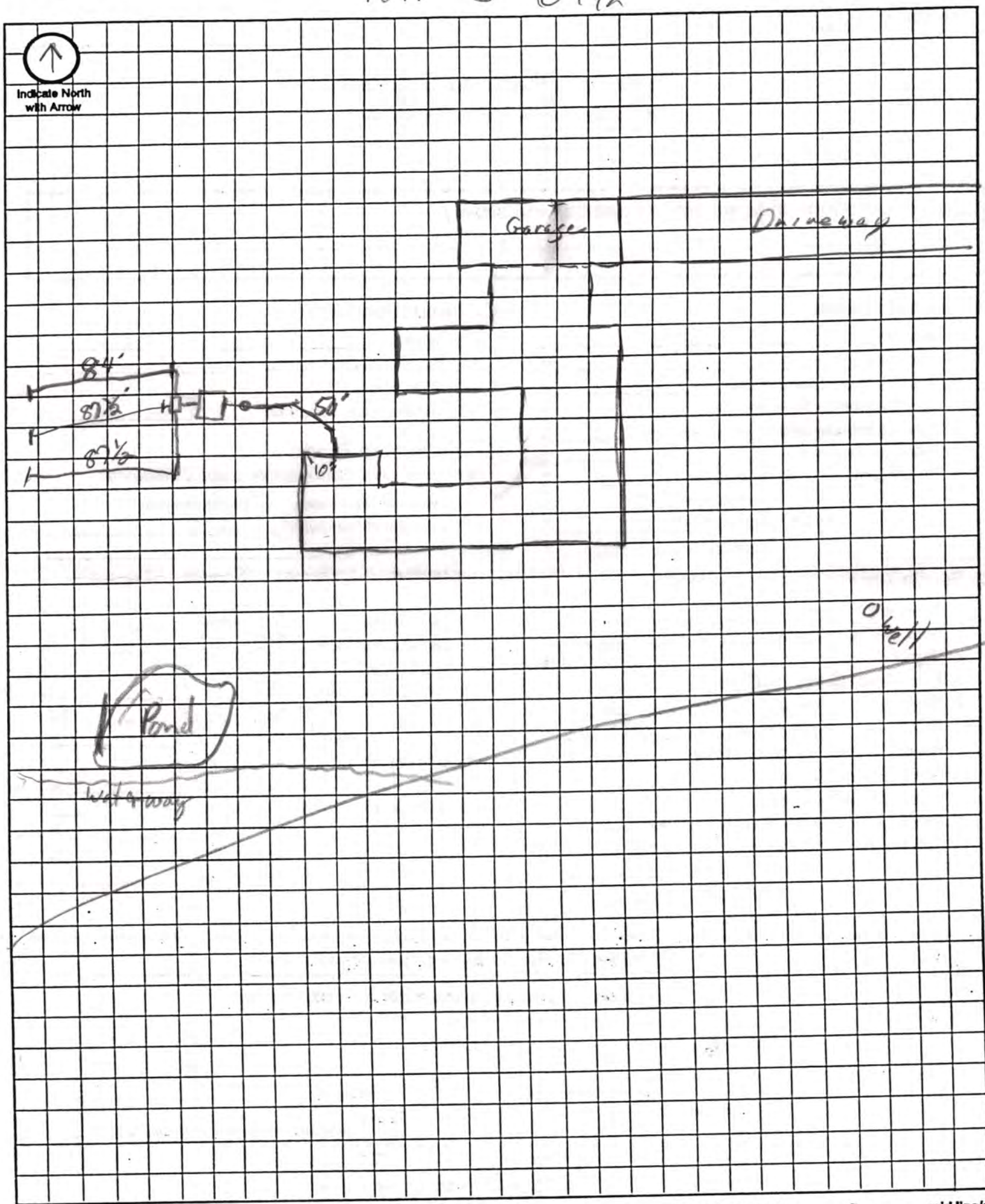
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

9811 S 64th



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

Lincoln-Lancaster County Health Department

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

Permit

WATER WELL
NEW WATER WELL CONSTRUCTION

Permit # 01400094601

Issued 02/14/01
Expires 08/14/01
Revenue Code 3162

Establishment

MANZITTO BROTHERS
T9N R7E SEC 28
COUNTRY LANE EST-1ST BLK 2 LOT 3
9811 S 64 ST

FEES: $100.00

Permitee

MANZITTO BROTHERS
3341 PIONEERS BLVD
LINCOLN NE 68506

TOTAL: $100.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

014328

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

Permit No. 0140009946

Request for Site Clearance and Permit for Individual Water Well

The undersigned hereby requests:

- ☒ Site Clearance and Permit to construct a new individual water well - $100
- ☐ Bi-Annual Permit for an existing well - $100 (Renewed every 2 years)
- ☐ Permit to repair or alter existing well involving opening of well - $50

1. Well Site Address 9811 So. 64th City Lincoln, NE Zip 68506
(No Rural Route Please)
Township 9N Range 7E Section 24 1/4 Section
Block 2 Lot 3 Addition County Lane 1st
Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)

2. Well use: ☑ Residential ☐ Commercial ☐ Other Describe

3. Distance to Public Water Supply _____ feet.

Signature of Owner [signature] Print Name Sam Manzitto
Current Address 3348 Pioneer Blvd
Current Home Phone 483-2302 Work Phone

Signature of Contractor Same Print Name
Address
Home Phone Work Phone Cellular Phone

Sewage Permit Applied for: ☑ Yes ☐ No ☐ Not applicable

Please Submit Permit Fee with This Request

Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

Approval Process: Lincoln Municipal Code 8.44

1. Health Department	Date received 2/14/01 Date forwarded 2/15/01	ACTION ☒ Approved ☐ Disapproved Signature: Jerrold C. Hood
2. Building & Safety	Date received 2/15/01 Date forwarded 2/15/01	ACTION ☒ Approved ☐ Disapproved Signature: [signature]
3. City Engineer	Date received 2/15/01 Date forwarded 2/15/01	ACTION ☒ Approved ☐ Disapproved Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL:

Site Visits
Date: 11/05/01 By Jerrold Hood
Date: ___/___/___ By
Date: ___/___/___ By

Nitrate Level 0.8 mg/L
Chloride Level ____ mg/L
Bacteriological Analysis Satisfactory X Yes ____ No
Other

Installation Final Written Approval
Date: 11/7/01 By Jerry Hood

Business Office Use Only
Received: Date: 02/14/00 Amount 100 Check No. 027988 Initials

Also Sewage

Distribution: White - Health Department Lt. Green - Engineer Lt. Blue - Building Inspector

JUN 2 6 2001

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PREMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. 20136022285

LINCOLN-LANCASTER COUNTY
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELL

Legal Description: Sec. 28 T. 9 R. 7 Block ____ Lot ____ Addition 9811 S. 64th, Lincoln, NE Country View Estates

Owner Manzitto Bros., Construction Address Suite 1 - 3341 Pioneers Blvd, Lincoln, NE 68506

LOG OF WELL	
Depth Ft to:	Description
0- 15	RED/BROWN CLAY
15- 35	YELLOW & BROWN CLAY
35- 40	BLUE CLAY
40- 80	RED & WHITE SHALE
80-120	BLUE SHALE
120-150	TAN & LIGHT YELLOW SHALE
150-175	TINE TAN SANDSTONE
175-180	COARSE SANDSTONE
180-212	MEDIUM YELLOW SANDSTONE
212-218	RED SHALE
218-255	MEDIUM LIGHT YELLOW SS

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level). Ft. 253'

Date Completed 4/25/01

Casing: Length, Ft. 238' Dia. In. 4"

Wall Thickness, Inc. .214" Type PVC

Screen: Length, Ft. 15' Dia. In. 4"

Type PVC WOP & SLOTTED Slot Size .025

Drop Pipe: Length, Ft. 160' Dia. In. 1 1/4"

Water Level, Surface to top of water, Ft.:

Static 130' M , Pumping 140' EST

Yield: 20 gpm, Measured XX . Est. ____

Chlorination Completed Yes XX No ____

The above informatioin including "Log of Well" is a true record of the job performed by me.

Driller [signature] (Signed)

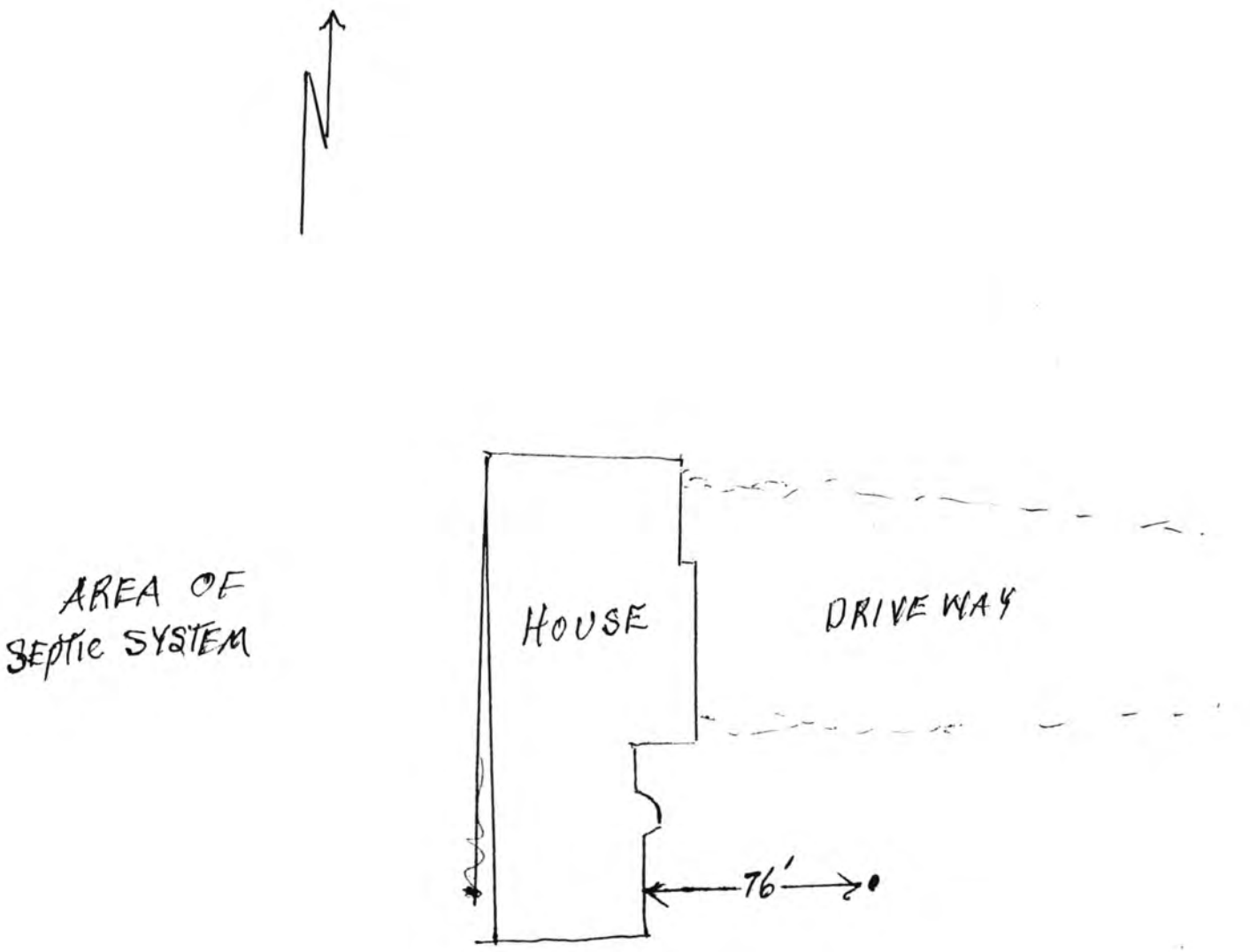
Address: P. O. BOX 308 HICKMAN, NE 68372

Date: 25 JUNE 01

Remarks NITRATE NITROGEN 0.8ppm. BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LIN

Health Department forwarded copy of record to Nebraska Conservatioin and Survey Department for Scientific Record ____


AREA OF
SEPTIC SYSTEM
HOUSE
DRIVE WAY
76'
POND