Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 99380205701

Issued 08/10/99
Expires 02/10/00
Revenue Code 3157

Establishment

GORDON QUITMEYER
T9N R7E SEC 32
SILVER SPRINGS BLK 5 LOT 2
5330 NEW CASTLE RD

FEES: $150.00

Permitee

GORDON QUITMEYER
4921 CRESTHAVEN DR
LINCOLN NE 68516

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010848

B 9902355
~~EXISTING WELL~~

A

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

Permit Number: 9938020570?

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 5330 New Castle Rd (no rural route) City Lincoln NE, Zip 6

Legal Description NE (1/4) 32 (1/4 Section) 9N (Township) 7E (Range) Silver Springs (Subdivision) 5 (Addition) 2 (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 Gordon Quitmeyer Signature Gordon Quitmeyer

Address 4921 Cristhaven City/State/Zip Lincoln, NE 68516

☐ Check if owner designed system Home Phone ~~483-5366~~ Work Phone N/A

C. Contractor

Name MAHRIS CONST. (TIM HARRIS) Company Name MAHRIS CONST.

Address 4110 Sheridan Blvd City/State/Zip Lincoln, NE 68506

☐ Check if contractor designed system Work Phone 440-1139

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

Designer Name Richard Blessing & Chase Firm _____ Work Phone 489-5687

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 8/10/99 Date frwd 8/10/99 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8-10-99 Date frwd 8-10-99 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 8-11-99 Date frwd 8-11-99 ACTION ☒ Approved ☐ Disapproved Signature _____

12/2/99 Sewer + tank only. J.Cliff

Installation Final Written Approval

By 12/9/99 need drawing Date 12-999

12-20-99 Drawing Submitted

Business Office Use Only
Date Rec'd 8/9/99
Amt Paid $150.00
Rec'd By CW Cash/Check No. #1093

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

B

Permit Number: 9938020 57

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 5330 New Castle Rd (no rural route) City Lincoln NE, Zip _____

Owner Quintoneyer Addresss 4921 Cristhaven Lincoln NE

Soil Type (SCS): CP-CRT Percolation Rate: 60 min./inch

Date of Tests 4-8 to 4-9-99 Weather: Precipitation T (Temperature 50s

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	30	4/8	1:30	4/9	12:30	4/9	4:00	12	4/9	4:30	30	5/8	48
2			PM		PM		PM	10½		PM		5/8	48
3								11				5/8	48
4								10¾				½	60
5								11¼				¾	40
6								12½				¾	40
7								11				5/8	48
8	↓							10⅜				¾	40

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 430-7606
Address 17201 So 72nd
Hickman, Ne 68372

Sum of Percolation Rates: 372
Average of Rates: 47
Rate Used for Calculation: 60

(20 min Differential)

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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

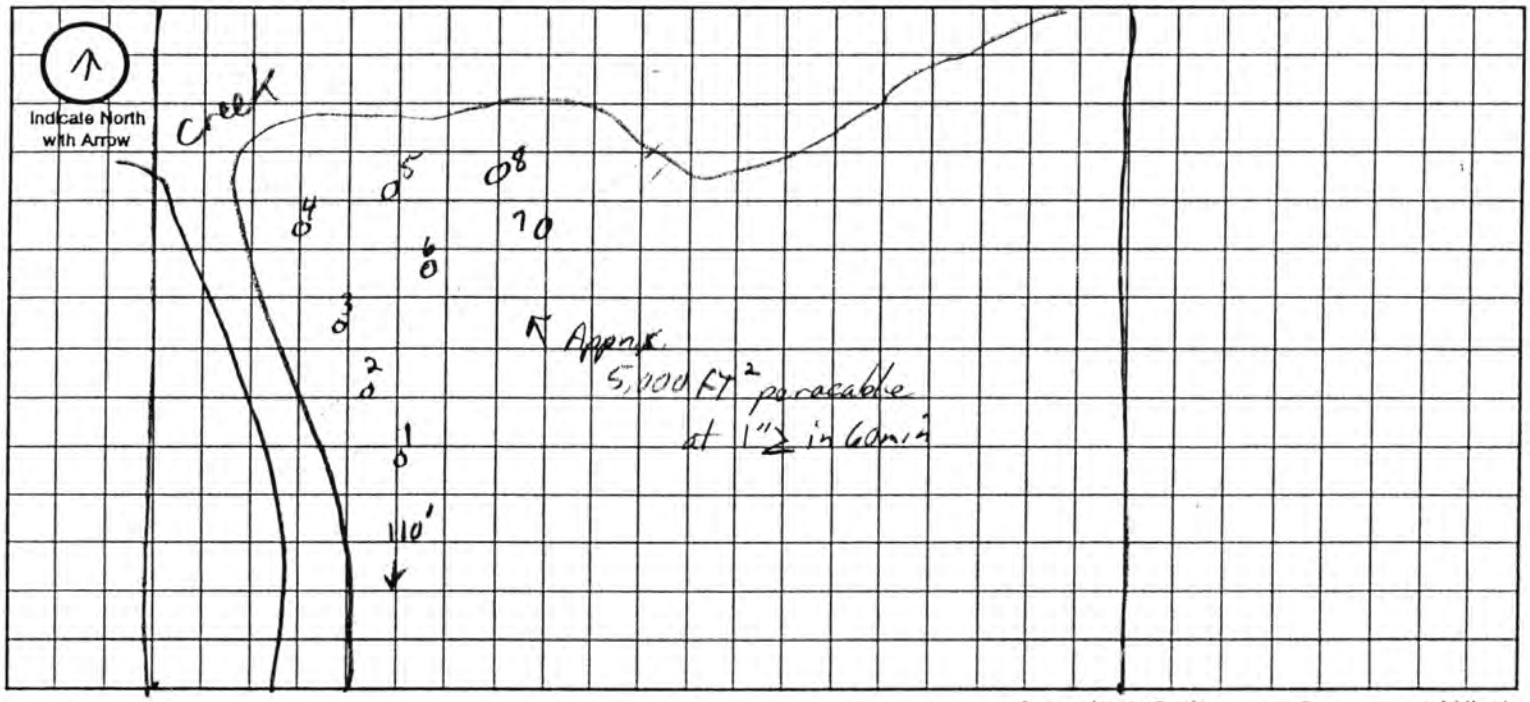
C

Permit Number: 9938020571

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) 5330 New Castle Rd City Lincoln NE, Zip NE

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other _____

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

Percolation Rate 41 (min. per inch) Soil Type: CP-URT Land Slope: _____ %

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

Total Square Feet of Field Required: 5,000 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 4 Number of Distribution Laterals per Bed _____

Total Length of Laterals 600 ft. Number of Trenches 4 Trench Width 5'

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 Amy L. Davis Date 8-10-99

Installer Brad Smith Date 4-22-99

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

D

Permit Number: 9938020 57

Sewage Disposal System

As Built Plans & Specifications

Date 12-9-99

System Location (Indicate correct number and street)

Address 5330 New Castle Rd. (no rural route) City Lincoln NE, Zip 68516

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: 48 in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 41 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line > 50 ft.
   stream > 20 ft.
   pressure line NA ft.
   property line > 5 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 6x3 in.
   Over outlet, diameter 9x11 in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 11 in.
8. Distances to: Well or suction line > 50 ft.
   Stream > 20 ft.
   Pressure line NA 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: 38 ft.

D. Absorption Field

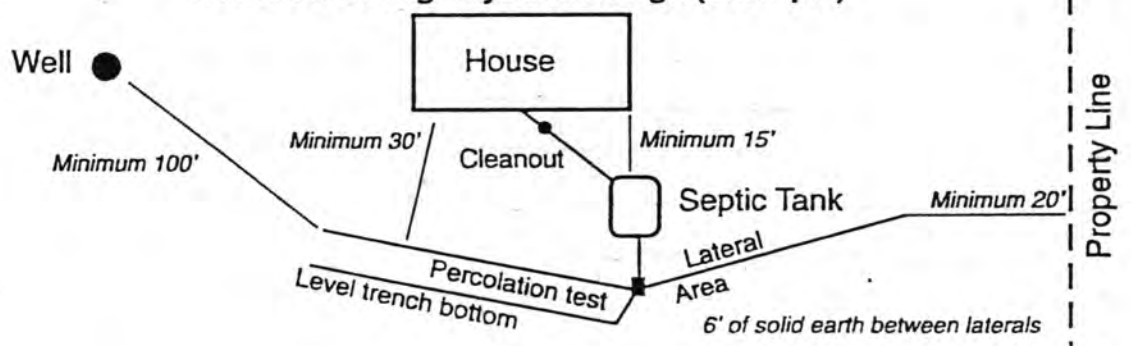
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 14
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 91 2/3 ft. 91 2/3 ft.
   83 1/3 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 4 in/100 ft.
   Average depth 30 in
4. Filter material: Road Gravel
   Depth of material 18 in.
5. Distances to: Well or suction line > 100 ft.
   Stream > 50 ft.
   Pressure line NA ft.
   Property line > 20 ft.

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

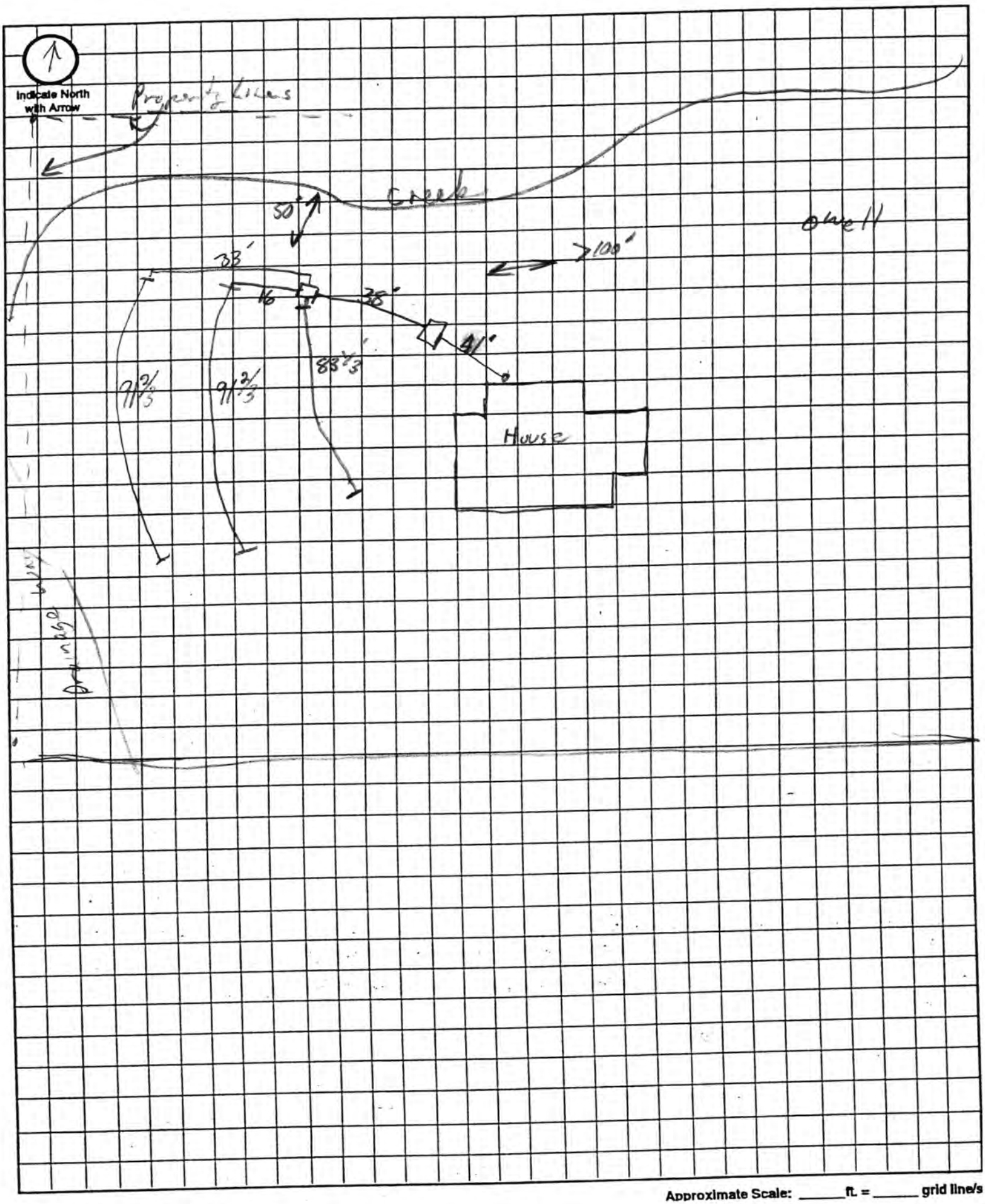
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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

Moser Well Drilling and Service Inc.

Marvin Moser
Hickman, NE

Bill Moser
Roca, NE

Allen Moser
Hickman, NE

Chris Thornton
Hickman, NE

Hickman, Nebraska 68372
Phone: (402) 792-2515
Lincoln: 477-7291

Pumps & Well Supplies - Trenching - Drilling

Date: 10/27/99 Well #: 130-99 Driller: Bill

Owner/Builder: Gordon Quitmeyer, 4921 Cresthaven Drive, Lincoln, Ne 68516 Phone #483-5366

Location: Silver Springs - at 5330 Newcastle Road on lot #5which is basically on West side of S. 56th &I Rokeby Road

Depth: 190' Elevation:

0- 40 Black clay
40- 50 Red and white marbled shale
50- 60 Red and yellow shale
60- 75 Sandy yellow shale
75- 90 Fine yellow sandstone
90-105 Medium fine yellow sandstone
105-135 Medium fine tan sanstone
135-170 Medium sandstone turning medium coarse to very coarse
170-194 Medium fine to medium yellow sandstone
194- Red shale

Casing Information

Type: pvc Thickness: 200#
Length: 160' Diameter: 4"
Bore Size: 8.5" SWL: 78' M
PWL: GPM: 100 w/air

Filler Pack: 30-155'
Grout: 6-30'

Screen

Length: 10' + 20' Diameter: 4"
Type: pvc wop; slotted Slot: .030; .025
Area of:
Screen(s): 160-190'
Pack: 155-191'
Type of Pack: "B"

Chemical Analysis

Total Chlorides: 160
Hardness:
Nitrates:
Bacteria:
Iron:

STATE & CTY SENT 12/8/99

Lancaster/Grant

T.N. 9 R.E. 7 SEC. 32

REG# G-103367 1/4/00

130-99.max