Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

000114

(402) 441-8000

Permit SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380259301

Issued 02/03/03
Expires 08/03/03
Revenue Code 3157

Establishment TIM MCNEIL
T9N R8E SEC 1 QTR NE
LOT 6IT
18655 VAN DORN ST

FEES: $200.00

Permittee TIM MCNEIL
BOX 203
EAGLE NE 68347-0203

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 03380259301

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 18655 VanDorn St (no rural route) City Walton NE, Zip NE

Legal Description Lot 6 NE 1/4 1/4 Section 1-9-8 Township Range Lancaster County Subdivision Addition Block 6 I.T. Lot

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Tim McNeil Signature Tim McNeil

Address PO Box 203 City/State/Zip Eagle NE

☐ Check if owner designed system Home Phone 781-2295 Work Phone 432-3413

C. Contractor

Name Tim McNeil Company Name Owner

Address PO Box 203 City/State/Zip Eagle NE

☐ Check if contractor designed system Work Phone 432-3413

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

Designer Name ~~Design Associates~~ STAN KLOESE Firm DIRT WORKS PLUS LLC Work Phone ~~474-3000~~ 560-1208

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_____ 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 2/3/03 Date frwd 2/3/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2-3-03 Date frwd 2-3-03 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ ACTION ☐ Approved ☐ Disapproved Signature _____

3/18/03 Need drawing J.C.H.
3/17/03 Sewer & Lands bldg. J.C.H.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date MARCH 19, 2003

Business Office Use Only

Date Rec'd 02/03/03
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 5567

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

B

Permit Number: 033802593

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 18655 Van Dorn Street (no rural route) City _____ NE, Zip _____

Owner Tim & Kathy McNeil Address P.O. Box 203 Eagle, NE 68347

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: 40 min./inch

Date of Tests 1/20/03 to 1/21/03 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)
1	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	1 3/4	17
2	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	1 1/4	24
3	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	1 1/2	20
4	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	1	30
5	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	1	30
6	36	1/20	3:30	1/21	8:00	1/21	8:00	6	1/21	12:00	30	3/4	40

Sum of Percolation Rates: greater than 20

Average of Rates: Difference 40 used

Rate Used for Calculation: 40

Person Conducting Percolation Tests

Name: Tom Burt - Design Associates

Phone: 474-3000

Address 1609 'N' Street Lincoln, NE 68508

4 bedroom 1100 sq. ft.
tank size 1250 gallon
No whirlpool

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date 2/3/03

FORM 23-101 10-95

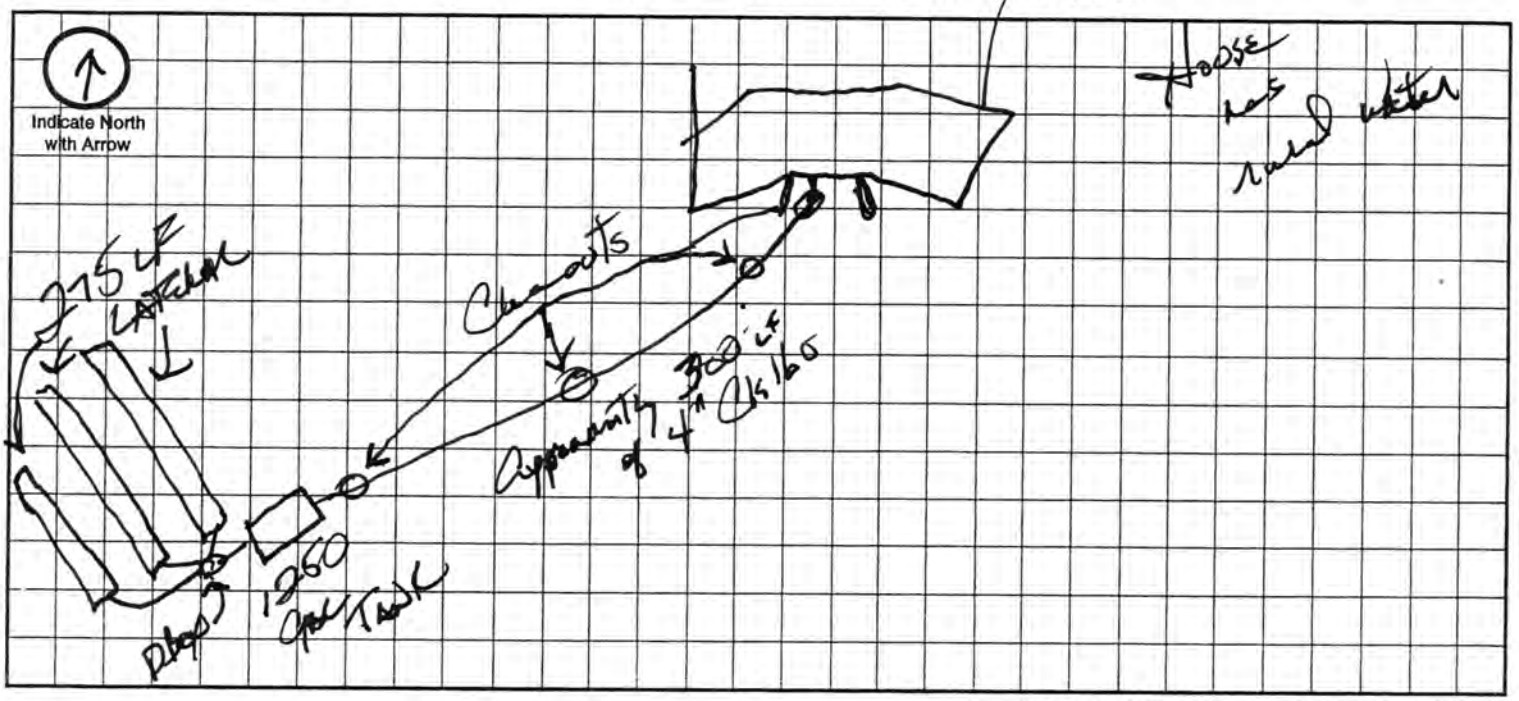
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Phone: 402-441-8022

C

Permit Number: 03380293

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) 18655 VanDorn City Walton NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 40 (min. per inch) Soil Type: WYMORE SILTY CLAY LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 1100 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☑ Other Lateral Material: Gravel less Infiltrator

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

Total Length of Laterals 275 ft. Number of Trenches 3 Trench Width 4

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 [signature] Date 2-1-03

Installer [signature] Date 2/3/03

FORM 23-102 10-96

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D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date 3/18/03

TIM McNEIL

System Location (Indicate correct number and street)

Address 18655 HANDORF (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: CLS 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 40 in.
3. Distance between dwelling and septic tank: 207 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 100+ ft.
   stream 75 ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: CONC
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☑ above ☐ below grade 3 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 75 ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: CONC
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 10 ft.

D. Absorption Field

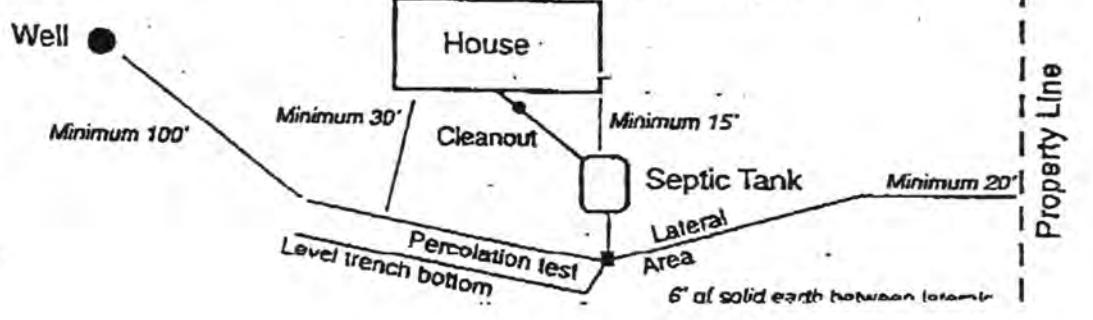
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☑ other INFILTRATOR
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   75 ft. _____ ft. 4 ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 27 in
4. Filter material: GRAVEL-LESS
   Depth of material _____ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 50 ft.
   Pressure line 100+ ft.
   Property line 100 ft.

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

de North
Arrow

Individual Sewage System Design (Example)



As Built Drawing

