Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM-MAJOR REPAIR

Permit # 99380205801

Issued 08/11/99
Expires 02/11/00
Revenue Code 3157

FEES: $150.00

TOTAL: $150.00

Establishment

JAMES E BOWER
T12N R8E SEC 29 QTR SW
W 1/2 OF SW 1/4 LOT 4IT
12240 BRANCHED OAK RD-WAVERLY

Permitee

JAMES E BOWER
12240 BRANCHED OAK RD
WAVERLY NE 68462

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010840

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

A Major Repair

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 12240 Branch Oak Rd (no rural route) City Waverly NE, Zip 68462

Legal Description Lot 4, I. T. 1N the W/2 of the SW 4 Sec 29 T 8N, R 8E of the 6th PM
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 James E Bower Signature _____

Address 12240 Branch Oak Rd City/State/Zip Waverly NE 68462

☐ Check if owner designed system Home Phone 402-786-3615 Work Phone _____

C. Contractor

Name Mike Dietze Company Name Waverly Plumbing & Well

Address PO Box 116 City/State/Zip Waverly NE 68462

☐ Check if contractor designed system Work Phone 432-2923-cel work 786 5620

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 2 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 8/11/99 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
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 _____

8-17-99, need drawing

Installation Final Written Approval

By Ron Mayfield

Date 8-20-99

Business Office Use Only

Date Rec'd 08/11/99

Amt Paid 150.00

Rec'd By _____ ~~Cash~~/Check No. 18641

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

Jim Bower

B

Permit Number:

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

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

29-12-8

System Location (Indicate correct number and street)

Address 12240 Bramble Oak Rd. (no rural route) City _____ NE, Zip _____

Owner _____ Addresss _____

Soil Type (SCS): Clay loam Shorpsburg Soil Percolation Rate: _____ min./inch

Date of Tests 4-20-99 to 4-21-99 Weather: Precipitation _____ Temperature 60

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	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	3/4"	40 min
2	36	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	3/4"	40 min
3	36	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	7/8"	34
4	36	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	3/4"	40
5	36	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	3/4"	40
6	36	4-20	6 PM	4-21	5:30	4-21	5:30	6	4-21	6 PM	30	7/8"	34

Sum of Percolation Rates: 228

Average of Rates: 38 min

Rate Used for Calculation: 38

Person Conducting Percolation Tests

Name: Dave Dietze

Phone: 786-5620

Address P.O. BOX 1116

Waverly NE 68462

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Shorbsburg soil.

Signature of Reviewing Official Ron Magnuson Date 8-10-99

FORM 23-101 10-96

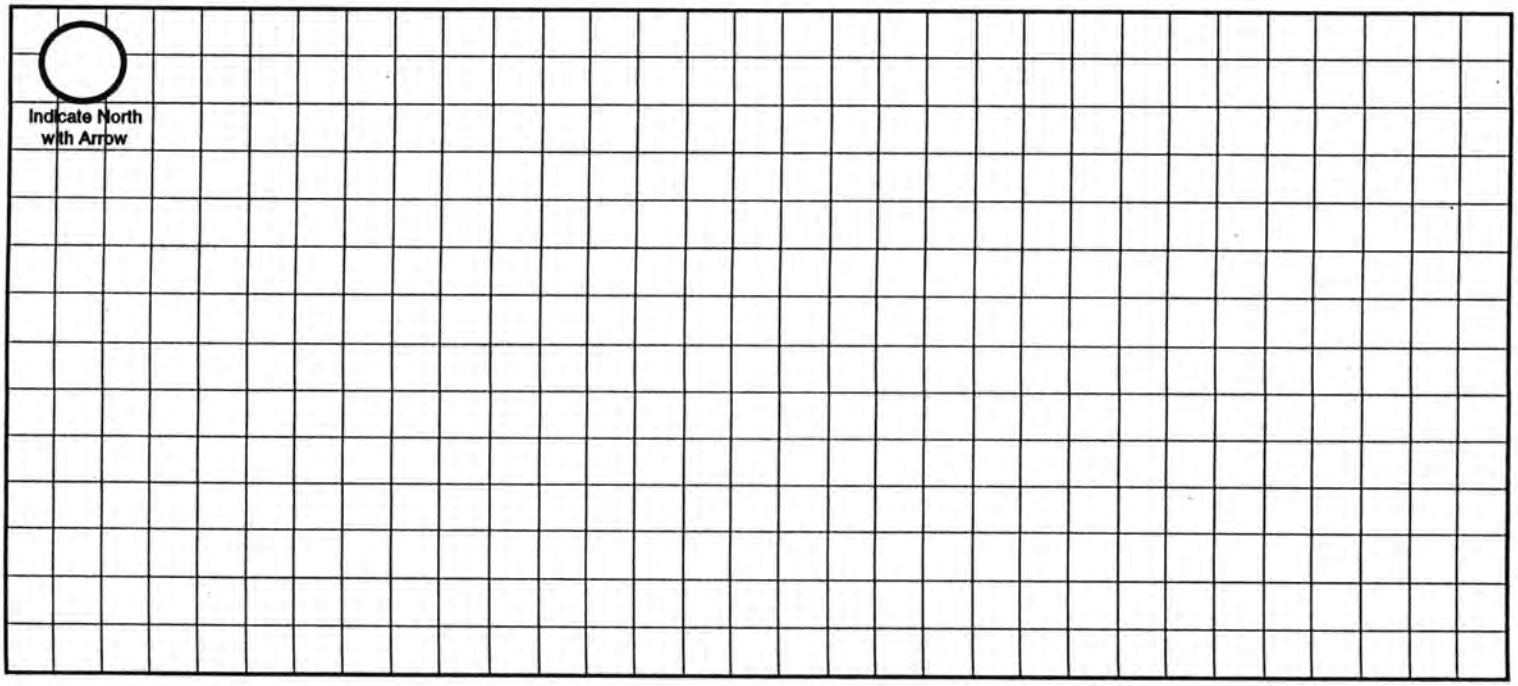
Lincoln-Lancaster County Health Department
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C

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) 12240 Brandt Oak Rd City Waverly NE, Zip 68462

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 38 (min. per inch) Soil Type: Shelby Land Slope: _____ %

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

Total Square Feet of Field Required: 962 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 140 ft. Number of Trenches 2 Trench Width 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 _____ Date _____

Installer Michael P Pautz Date 8-10-98

AUG 19 1999

D

Permit Number:

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Phone: 402-441-8022

Sewage Disposal System

As Built Plans & Specifications

Date 8-17-99

System Location (Indicate correct number and street)

Address 12240 Branched Oak Rd (no rural route) City Waverly NE, Zip 68462

A. Building Sewer

1. Material: 4" Pvc SDR-26
   Diameter: 4" in.
2. Distance above basement floor: 48 in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 59 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 80 ft.
   stream NA ft.
   pressure line 30 ft.
   property line 100 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 8" in.
   Over outlet, diameter 8" in.
   Riser: ☐ above ☐ below grade ~~___~~ 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 70 ft.
   Stream NA ft.
   Pressure line ~~NA~~ 70 ft.
   Property line 50 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 30' ft.

D. Absorption Field

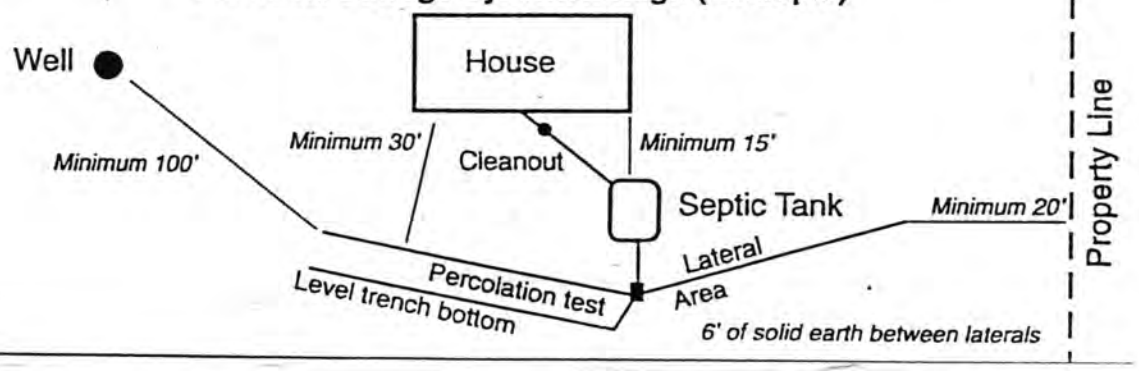
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: Infi-Tank
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 83.30 ft. 58.21 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 36 in
4. Filter material: Gravel
   Depth of material 24 in.
5. Distances to: Well or suction line 120 ft.
   Stream NA ft.
   Pressure line 120 ft.
   Property line 42 ft.

Indicate North with Arrow

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

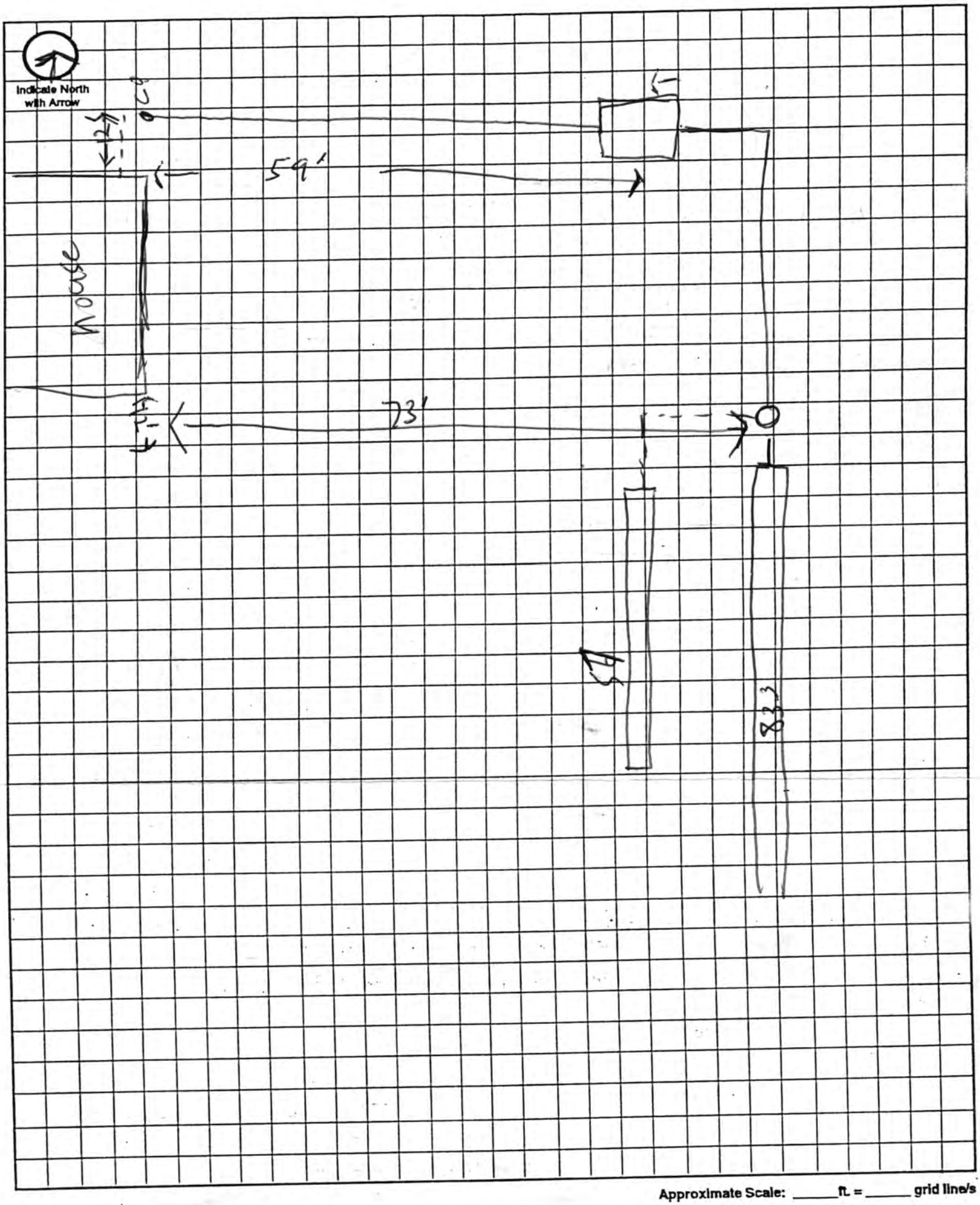
Individual Sewage System Design (Example)



FORM 23-103 10-96


112th
134th
Zoptic Range
Ranchel Oak Rd
R. 8 E.
T. 12 N.
495 000 FEET
(Joins sheet 10)
Millville
Creek
19
20
21
28
29
30
31
32
33

As Built Drawing



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