Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 00380226001

Issued 10/27/00
Expires 04/27/01
Revenue Code 3157

Establishment

KURTIS POLIVKA
T12N R8E SEC 34 QTR NW
LOT 19IT
14901 BRANCHED OAK RD-WAVERLY

FEES: $200.00

Permitee

KURTIS POLIVKA
14000 N 14 ST
RAYMOND NE 68428

TOTAL: $200.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

013869

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

A OCT 2 3 2000

Permit Number: 00380226O

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 14901 Branched Oak Rd (no rural route) City Waverly NE, Zip 68462

Legal Description I.T. NW 1/4 34 1/4 Section 12N Township 8E Range ____ Subdivision ____ Addition ____ Block 19 Lot I.T.

Geographical Location (if known): Longitude ____ Latitude ____

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

B. Owner

Name Kurtis Polivka Signature Kurtis Polivka

Address 14000 N. 14TH ST City/State/Zip Raymond NE 68428

☒ Check if owner designed system Home Phone 476-0992 Work Phone 560-7078

C. Contractor

Name owner Company Name ____

Address ____ City/State/Zip ____

☐ Check if contractor designed system Work Phone 560-7078 560-7078

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 10/24/00 Date frwd 10/24/00 ACTION ☒ Approved ☐ Disapproved Signature Gerald C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10/25/00 Date frwd 10/25/00 ACTION ☒ Approved ☐ Disapproved Signature ____
   SEPTIC SYSTEM MUST REMAIN OUT OF FLOOD PLAIN.
3. **City or County Engineer** Date rec'd 10/25/00 Date frwd 10/25/00 ACTION ☒ Approved ☐ Disapproved Signature ____

11-3-00 mn Out of floodplain

Installation Final Written Approval

By Ron Mayard

Date 7-20-01

Business Office Use Only
Date Rec'd 10/24/00
Amt Paid 200.00
Rec'd By ____ ~~Cash~~/Check No. 5964

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

OCT 2 3 2000

B

Permit Number: 003802760

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

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 14901 Branched oak Road (no rural route) City Waverly NE, Zip 68462

Owner Kurtis Poliuka Addresss 14000 North 14th 68428 Raymond

Soil Type (SCS): sandy clay DICKENSON SANDY LOAM Percolation Rate: 5inches per 30 min./inch

Date of Tests 10-16-00 to 10-17-00 Weather: Precipitation none Temperature 70

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	10-16	9:30 AM	10-17	10:00	10-17	10:00	6"	10-17	2:30	30	4 7/8	30 = 4 7/8" Drop
2	36	10-16	9:30 AM	10-17	10:02	10-17	10:02	6"	10-17	2:30	30	5"	30 = 5" drop
3	36	10-16	9:30 AM	10-17	10:04	10-17	10:04	6"	10-17	2:30	30	4 3/4	30 = 4 3/4 drop
4	36	10-16	9:30 AM	10-17	10:05	10-17	10:05	6"	10-17	2:30	30	5 1/4	30 = 5 1/4 drop
5	36	10-16	9:30 AM	10-17	10:06	10-17	10:06	6"	10-17	2:30	30	5 1/8	30 = 5 1/8 drop
6	36	10-16	9:30 AM	10-17	10:07	10-17	10:07	6"	10-17	2:30	30	5 1/2	30 = 5 1/2 drop

Person Conducting Percolation Tests

Name: Kurtis Poliuka

Phone: 476-0992

Address 14000 North 14th

Sum of Percolation Rates: 30 1/2"

Average of Rates: 5.083

Rate Used for Calculation: Instruction Rule .5.b

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

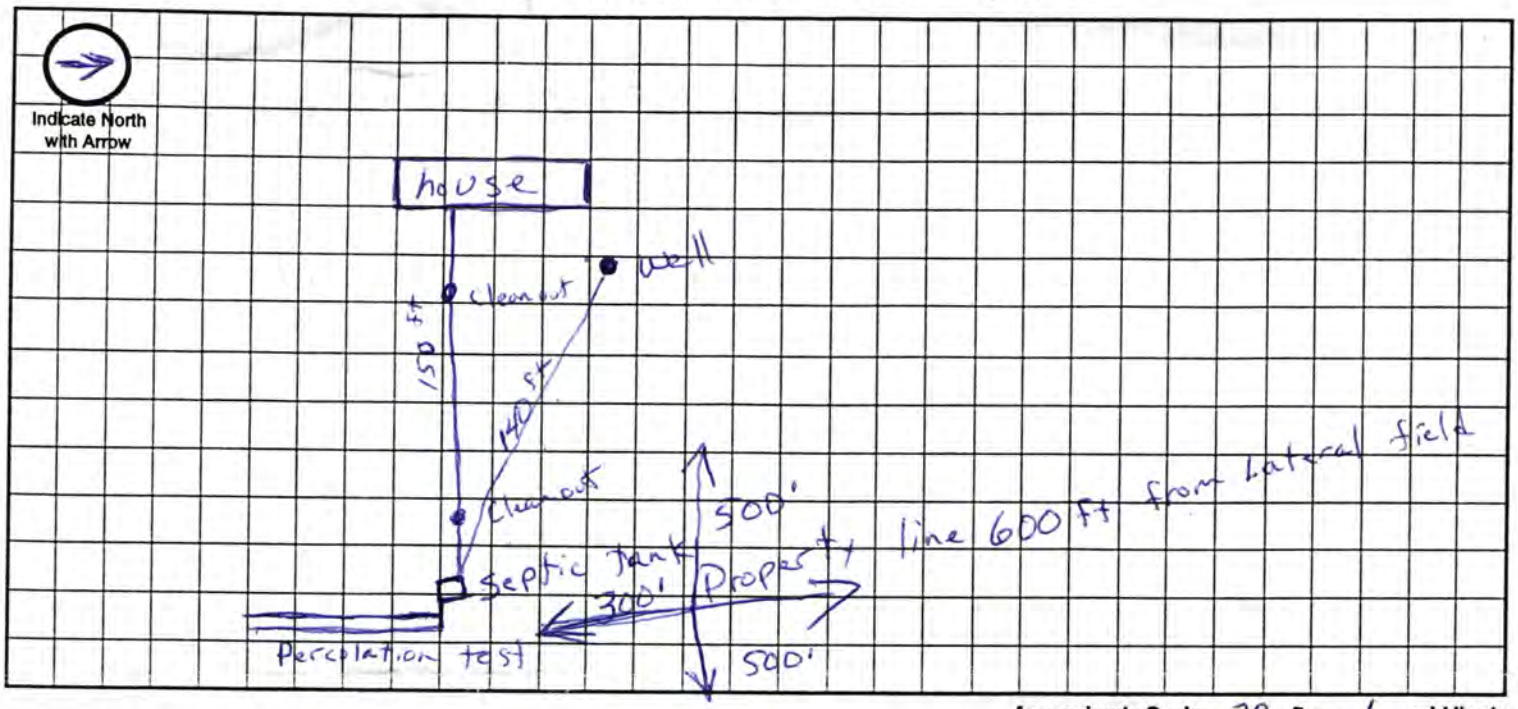
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

OCT 2 3 2000

Permit Number: 00380226e0

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 14901 Branched oak Road 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 6 (min. per inch) Soil Type: DICKENSON SANDY LOAM. Sandy Clay Land Slope: 3 %

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

Total Square Feet of Field Required: 495 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: Equalizer 24 Chamber

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 124 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 Kurtis Polivka Date 10-20-00

Installer Kurtis Polivka Date 10-20-00

FORM 23-102 10-96

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

D

Permit Number:

33/34, 12, 8

Sewage Disposal System

As Built Plans & Specifications

Date 10-3-00

System Location (Indicate correct number and street)

Address 14901 Branched oak RD (no rural route) City Waverly NE, Zip ~~68~~ 68624

A. Building Sewer

1. Material: Plastic
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 150 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 50 ft.
   stream 800 ft.
   pressure line 20 ft.
   property line 260 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 1 5X10 in.
   Over outlet, diameter 1 5X10 in.
   Riser: ☐ above ☒ below grade 16 in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 16 in.
8. Distances to: Well or suction line 120 ft.
   Stream 800 ft.
   Pressure line 120 ft.
   Property line 300 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 6
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10' ft.

D. Absorption Field

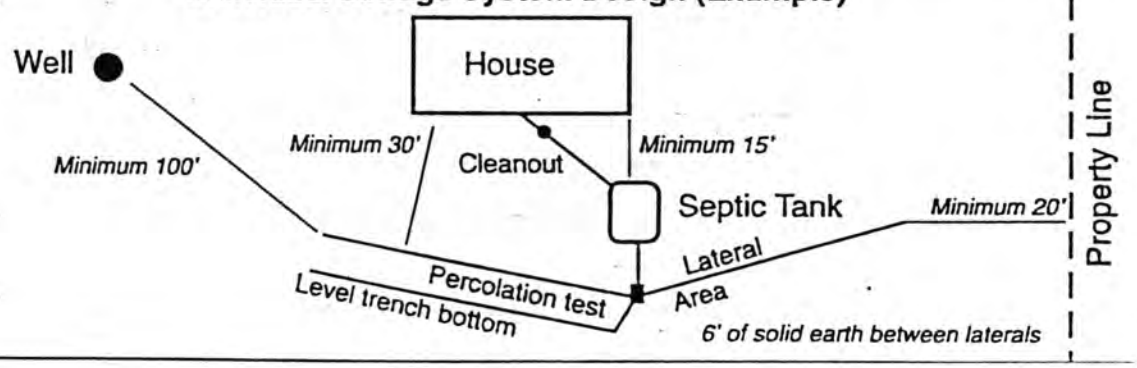
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: Equlizer 24
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 128
   Length of each line: 60 ft. 68 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope 4" in/100 ft.
   Average depth 30 in
4. Filter material: gravel
   Depth of material 14 in.
5. Distances to: Well or suction line 150 ft.
   Stream 800 ft.
   Pressure line 120 ft.
   Property line ~~150~~ ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



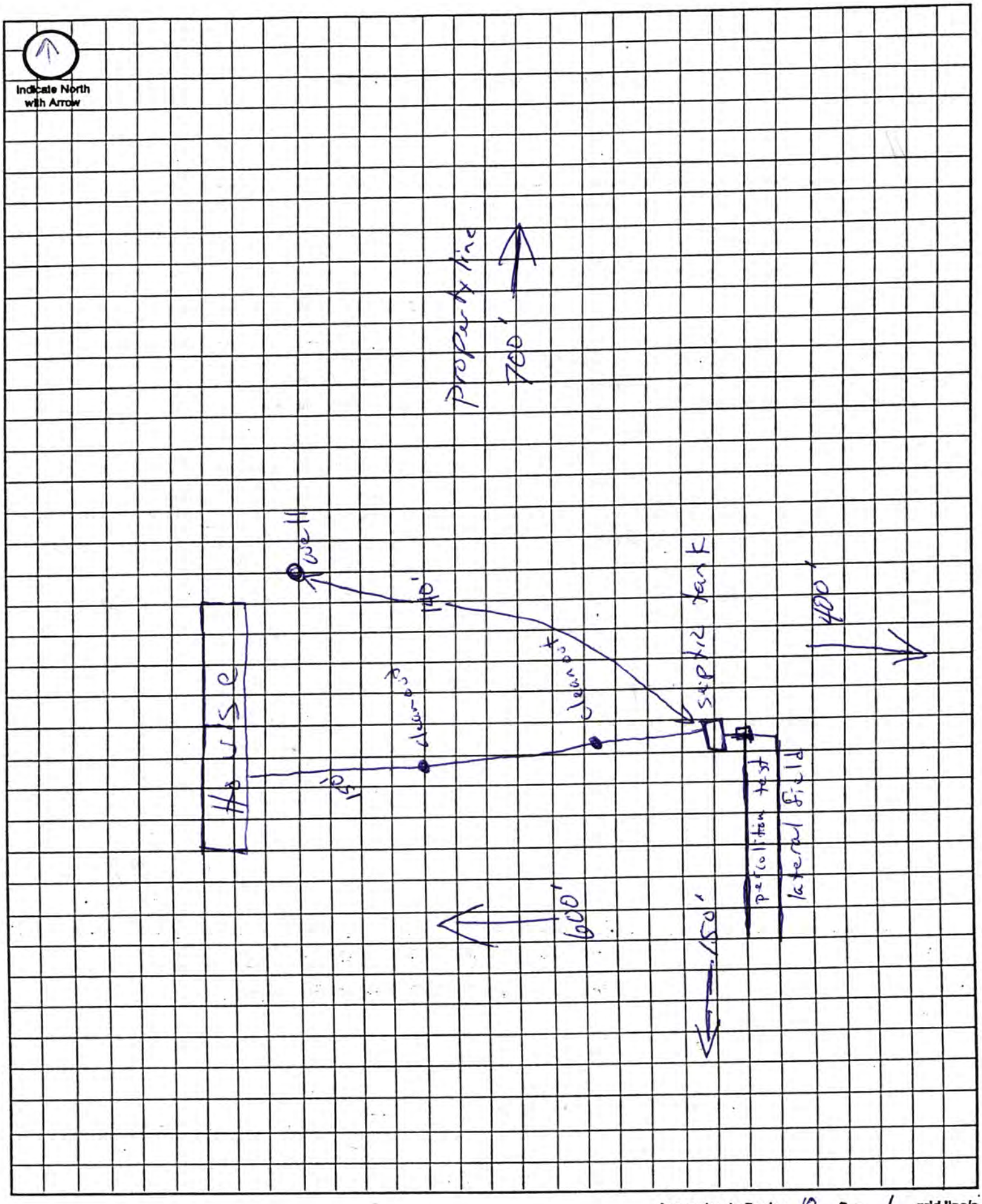
FORM 23-103 10-96

— SHEET NUMBER 11




27
ZONE C
ZONE A
ZONE A
ZONE C
BRANCHED
1000'
700'
Rock
600'
Creek
34
RM14
35
Rock
ZONE C
ZONE A
Creek
RAYMOND
ROAD
ZONE B
RM15
1108
ZONE A7
1109
STREET

As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s