# Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

009915

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 07380332101

Issued 04/10/07
Expires 04/10/08
Revenue Code 3157

Establishment:
TROY BUGBEE
T12N R8E SEC 2
PARCEL B
LITTLE SALT ROAD

FEES: $290.00

Permittee:
TROY BUGBEE
5901 N 27 ST
LINCOLN NE 68521

TOTAL: $290.00

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

**Lincoln-Lancaster County Health Department**
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1914
Phone: 402-441-8022

on 4/19/07

**A**

Permit Number: 07380332101

# Sewage Disposal System
## Request for Site Clearance and Permit

change to

**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 Little Salt Road (no rural route) City _____ NE, Zip _____

Legal Description LCR595I 1/4 _____ 1/4 _____ Section 2 Township 12 Range 8 Subdivision Parcel B 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 Troy Bugbee Signature _____

Address 5901 N 27th City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone 580-7339 Work Phone 580-7339

### C. Contractor

Name ~~Jess~~ Don Anderson Company Name AWS

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone 443-7161

### 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 4/12/07 Date frwd 4/12/07 **ACTION** ☑ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 4-10-07 Date frwd 4-10-07 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 4-10-07 Date frwd 4-10-07 **ACTION** ☒ Approved ☐ Disapproved Signature Jim Blouch

## Installation Final Written Approval

By _____

Date 7/16/2007

***Business Office Use Only***
Date Rec'd 4/10/07
Amt Paid 290.00
Rec'd By CW Cash/Check No 10899

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

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

**B**

Permit Number:

# Sewage Disposal System
## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

**System Location (Indicate correct number and street)**

Address 16930 Lilac Salt Road (no rural route) City _____ NE, Zip _____

Owner Bugbee Homes Address 5901 N 27TH Lincoln, NE 68521

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

Date of Tests 4-12-07 to 4-13-07 Weather: Precipitation NONE 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 | 4-12 | 9:00am | 4-13 | 9:00 | 4-13 | 9:00 | 36" | 4-13 | 10:00 | 60 | 1½ | 40 |
| 2 | " | " | " | " | " | " | " | " | " | " | " | 1" | 60 |
| 3 | " | " | " | " | " | " | " | " | " | " | " | 1 | 60 |
| 4 | " | " | " | " | " | " | " | " | " | " | " | 1½ | 40 |
| 5 | " | " | " | " | " | " | " | " | " | " | " | 1½ | 40 |
| 6 | " | " | " | " | " | " | " | " | " | " | " | 1½ | 40 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

**Person Conducting Percolation Tests**

Name: Don Anderson

Phone: 402-624-3305

Address PO Box 246

Mead NE 68041

Sum of Percolation Rates: 280

Average of Rates: 46.6

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

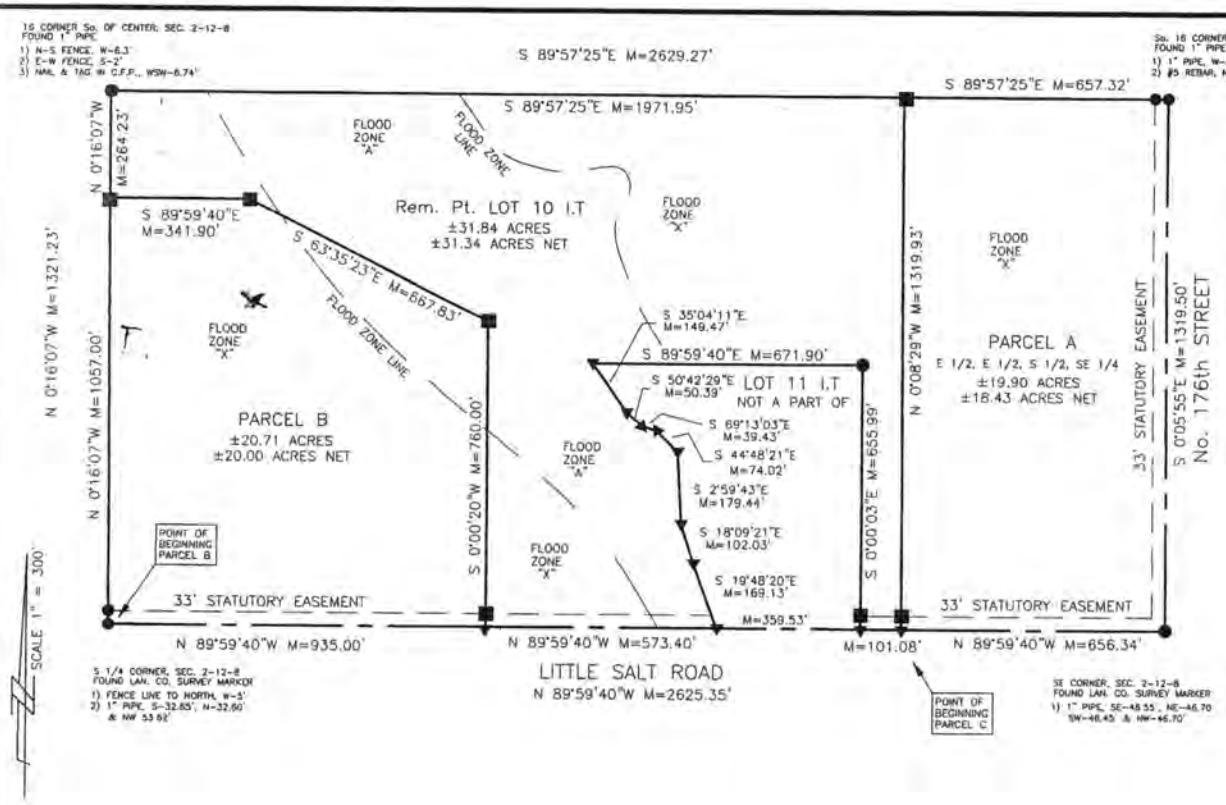
**Reviewing Action**

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

Dept Roads




# BOUNDARY SURVEY

LOT 10 I.T., IN THE S 1/2, SE 1/4
SEC. 2, T 12 N, R 8 E
LANCASTER COUNTY, NEBRASKA

## LEGAL DESCRIPTION

PARCEL A
THE EAST HALF OF THE EAST HALF OF THE SOUTH HALF OF THE SOUTHEAST QUARTER OF SECTION 2, TOWNSHIP 12 NORTH, RANGE 8 EAST OF THE 6th P.M., LANCASTER COUNTY, NEBRASKA

PARCEL B
THAT PART OF LOT 10 IRREGULAR TRACT LOCATED IN THE SOUTH HALF OF THE SOUTHEAST QUARTER OF SECTION 2, TOWNSHIP 12 NORTH, RANGE 8 EAST OF THE 6th P.M., LANCASTER COUNTY, NEBRASKA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE SOUTHWEST CORNER OF THE SOUTH HALF OF THE SOUTHEAST QUARTER OF SAID SECTION 2; THENCE NORTHERLY ON THE WEST LINE OF SAID SOUTHEAST QUARTER, ON AN ASSIGNED BEARING OF N 0°16'07"W A DISTANCE OF 1057.00'; THENCE EASTERLY, S 89°59'40"E 341.90'; THENCE SOUTHEASTERLY, S 63°35'23"E 667.83'; THENCE SOUTHERLY, S 0°00'20"W 760.00', TO A POINT ON THE SOUTH LINE OF SAID SOUTHEAST QUARTER; THENCE WESTERLY ON SAID SOUTH LINE, N 89°59'40"W 935.00', TO THE POINT OF BEGINNING, SAID TRACT CONTAINING AN AREA OF 20.71 ACRES, MORE OR LESS.

## SURVEYOR'S CERTIFICATE

I, THE UNDERSIGNED, A DULY REGISTERED LAND SURVEYOR IN AND FOR THE STATE OF NEBRASKA, DO HEREBY CERTIFY THAT I CAUSED A SURVEY TO BE MADE OF THE FORGOING DESCRIBED PROPERTY, AND THAT THE RESULTS OF SAID SURVEY ARE TRULY AND ACCURATELY DEPICTED HEREON, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

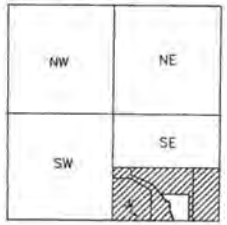
IN TESTIMONY WHEREOF WITNESS MY HAND AND SEAL THIS 5th DAY OF APRIL, 2007.

Billy Joe Kerr

BILLY JOE KERR, LS #483

NEBRASKA REGISTERED LS-483 LAND SURVEYOR BILLY JOE KERR

LOCATION SKETCH
NOT TO SCALE

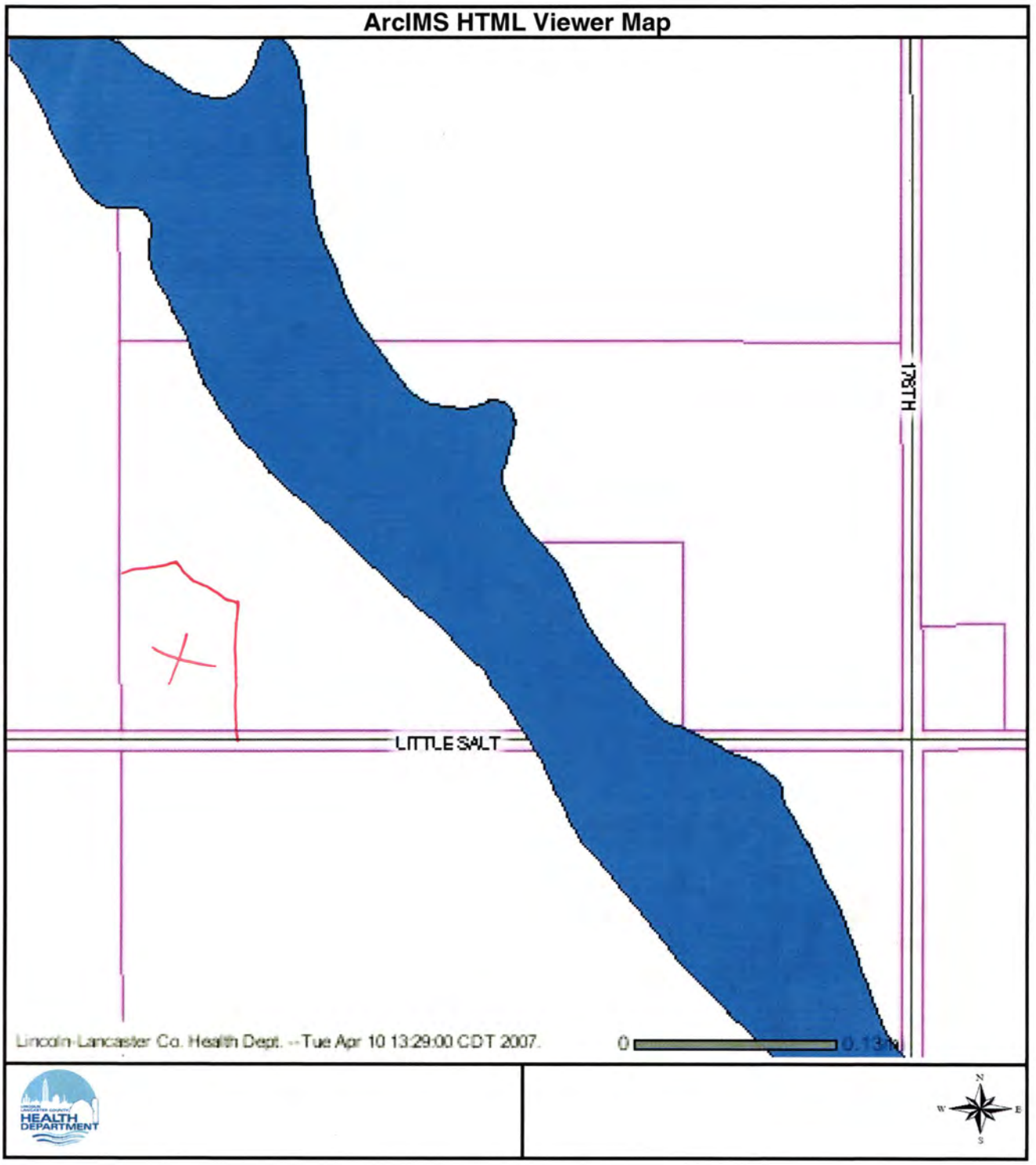


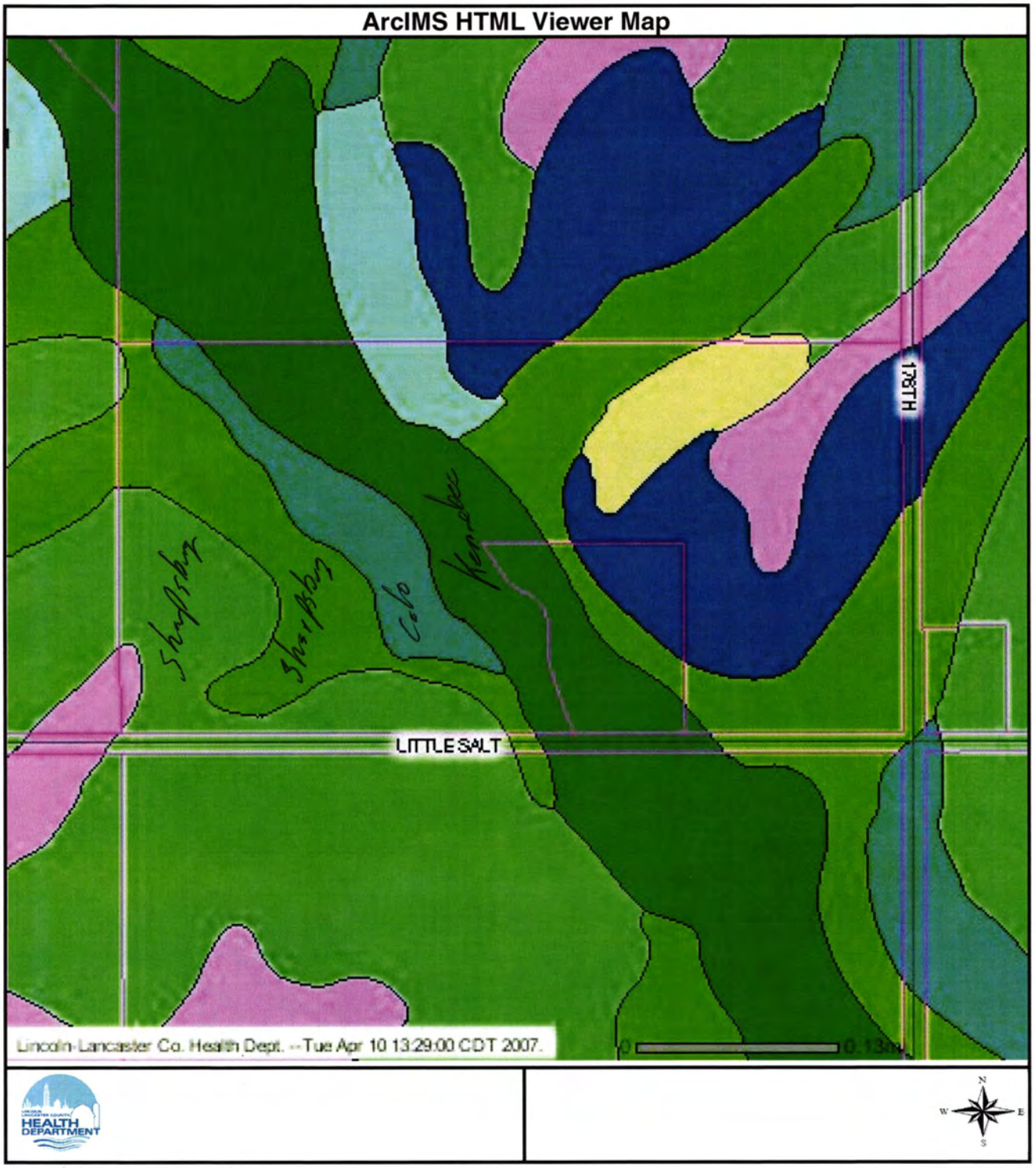

LEGEND

- P = PLATTED DISTANCE
- M = MEASURED DISTANCE
- ● = FOUND MONUMENT AS NOTED
- ■ = SET MONUMENT ( #5 REBAR & CAP )
- ▲ = SET TEMP. POINT

PROJ. # 070305

K & M INC.
LAND SURVEYING
540 W. INDUSTRIAL LAKE DR. #1
LINCOLN, NE 68528
(402) 476-3020
(402) 476-3138 FAX


ArcIMS HTML Viewer Map
178TH
LITTLE SALT
Lincoln-Lancaster Co. Health Dept. -- Tue Apr 10 13:29:00 CDT 2007.
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HEALTH DEPARTMENT
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ArcIMS HTML Viewer Map
178TH
LITTLE SALT
Lincoln-Lancaster Co. Health Dept. -- Tue Apr 10 13:29:00 CDT 2007.
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