Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 02380245901

Issued 04/29/02
Expires 10/29/02
Revenue Code 3157

Establishment

COLLIN C CANEVA
T9N R8E SEC 19
MAGEE-S 1/2 OF SEC19 BLK 3 LOT 1
11501 MIDDLEFORK RD

FEES: $200.00

TOTAL: $200.00

Permittee

COLLIN C CANEVA
3900 WOODS BLVD
LINCOLN NE 68502

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002099

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

A

Permit Number: 023802459

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 11501 MIDDLE FORK RD (no rural route) City LINCOLN NE, Zip 68516

Legal Description S/2 (1/4) 19 (Section) 9N (Township) 8E (Range) MAGEE ADDITION (Subdivision) (Addition) 3 (Block) 1 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name COLIN C. CANEVA Signature [signature]

Address 3900 WOODS BLVD City/State/Zip LINCOLN NE 68502

☐ Check if owner designed system Home Phone (402) 420-6139 Work Phone (402) 525-6139

C. Contractor

Name COLIN C. CANEVA Company Name HARD-DRIVES CONSTRUCTION, INC.

Address P.O. BOX 22806 City/State/Zip LINCOLN NE 68542

☐ Check if contractor designed system Work Phone (402) 525-6139

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 4/29/02 Date frwd 4/30/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd 4/30 ACTION ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 4-30-02 Date frwd 4-30-02 ACTION ☐ Approved ☐ Disapproved Signature [signature]

9/24/02 Need drawing. J.C.H.
9/25/02 LATERALS TOO CLOSE TOGETHER. J.C.H.

Installation Final Written Approval

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

Date MAY 7, 2004

Business Office Use Only

Date Rec'd 04/29/02
Amt Paid 200.00
Rec'd By [signature] ~~Cash~~/Check No. 1611

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

FILE: 109844

LEGAL DESCRIPTION

Lot One (1), Block Three (3), Magee Addition, Lincoln, Lancaster County, Nebraska, except that part deeded to Lancaster County in Warranty Deed dated and filed September 14, 1994 as Inst. No. 94-40723 in the office of the Register of Deeds of Lancaster County, Nebraska, more particularly described as follows: Beginning at the Southwest corner of said Lot 1, Block 3, Magee Addition; thence Northeasterly to a point located 648.25 feet distant from the said Southwest corner as measured with the South line of said Lot 1, Block 3 and 25.00 feet Northerly from and measured perpendicular to the said South line; thence Southeasterly to a point of intersection with the East line of said Lot 1, Block 3, said point of intersection located 20.61 feet Northerly from and measured perpendicular to South line; thence Southerly with the said East line to the Southeast corner of said Lot 1, Block 3; thence Westerly with the said South line of Lot 1, Block 3, a distance of 771.29 feet to the point of beginning.

B

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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 11501 MIDDLEFORK Rd. (no rural route) City LINCOLN NE, Zip NE 68516

Owner COWN, CANEVA Address 3900 WOODS BLVD. LINCOLN NE 68502

Soil Type (SCS): Sharpsburg Silty Clay Loam Percolation Rate: 60 min./inch

Date of Tests 4/11/02 to 4/12/02 Weather: Precipitation SUNNY : NONE Temperature 60's

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"	4/11	4:45	4/12	4:59	4/12	5:10	9.25	4/12	5:40	30	.375	
2	36"	4/11	4:45	4/12	4:59	4/12	5:10	11.625	4/12	5:40	30	.5	
3	36"	4/11	4:45	4/12	4:59	4/12	5:10	14.875	4/12	5:40	30	2"	
4	36"	4/11	4:47	4/12	4:59	4/12	5:11	23.5	4/12	5:42	31	.875	
5	36"	4/11	4:47	4/12	4:59	4/12	5:11	15.75	4/12	5:42	31	1.5	
6	36"	4/11	4:47	4/12	4:59	4/12	5:11	23	4/12	5:42	31	.75	
7	36"	4/11	4:47	4/12	4:59	4/12	5:11	28	4/12	5:42	31	.25	
8	36"	4/11	4:47	4/12	4:59	4/12	5:11	29	4/12	5:42	31	.125	
9	36"	4/15	6:00	4/16	6:40	4/16	6:40	26 1/4	4/16	7:15	35	1.125"	

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation: 60

Person Conducting Percolation Tests

Name: COWN CANEVA

Phone: (402) 525-6139

Address 3900 WOODS BLVD.
LINCOLN NE 68502

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official: Gerald C. Hood R.E.H.S. Date APRIL 29, 2002

FORM 23-101 10-98

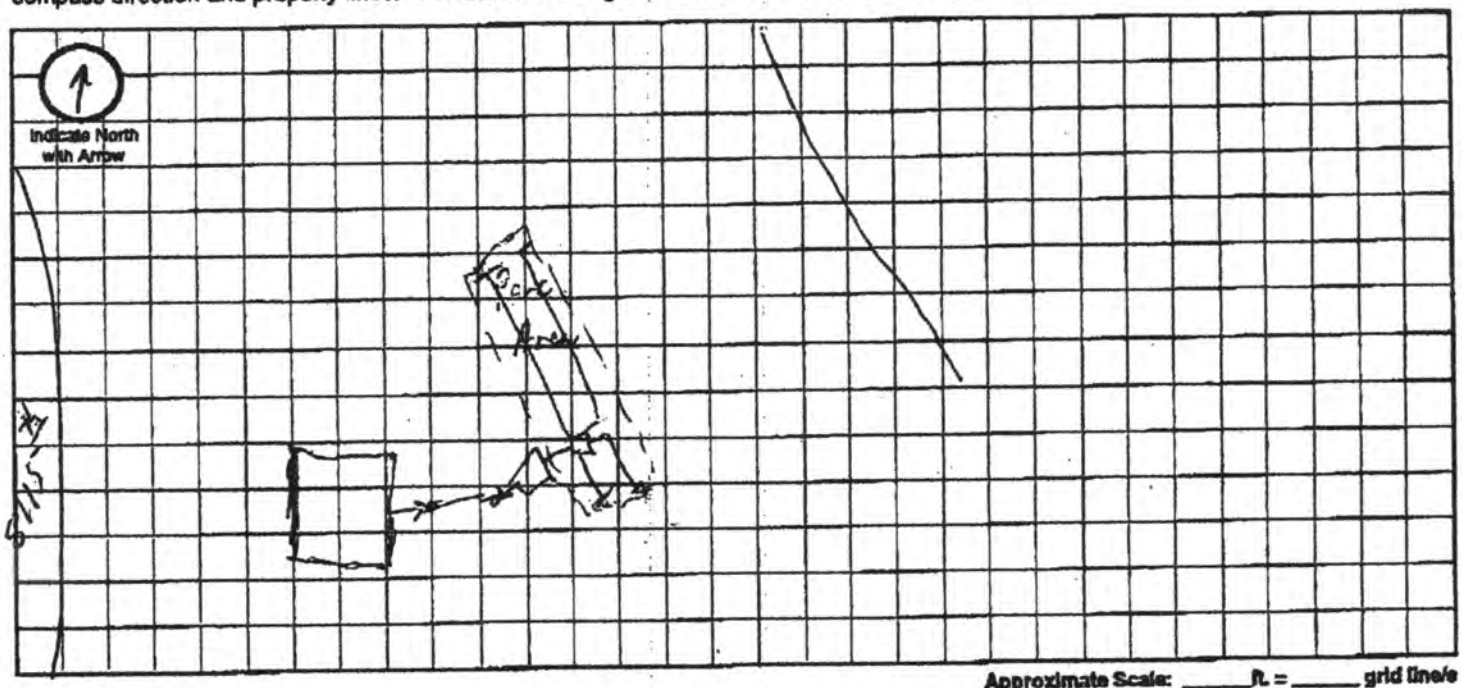
C

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Permit Number: 023802459

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) 11501 Middle Fork Rd. City Lincoln NE. Zip 68526

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM. Land Slope: _____ %

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

Total Square Feet of Field Required: 1050 sq. ft.

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

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

Total Length of Laterals 263 ft. Number of Trenches _____ 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 _____ Date _____

Installer _____ Date 4-13-02

FORM 23-102 10-95

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D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date 5-6-04

System Location (Indicate correct number and street)

Address 11501 MIDDLE FORK RD (no rural route) City LINCOLN NE, Zip 68526

A. Building Sewer

1. Material: PLASTIC
   Diameter: 4 in.
2. Distance above basement floor: N/A in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and septic tank: ____ ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 200 ft.
   stream N/A ft.
   pressure line 100 ft.
   property line 200 ft.

B. Septic Tank

1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter N/A in.
   Over outlet, diameter N/A in.
   Riser: ☐ above ☐ below grade 6 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line 200 ft.
   Stream N/A ft.
   Pressure line 100 ft.
   Property line 200 ft.

C. Distribution Box

1. Material: PLASTIC
   Number available outlets: 6
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 15 ft.

D. Absorption Field

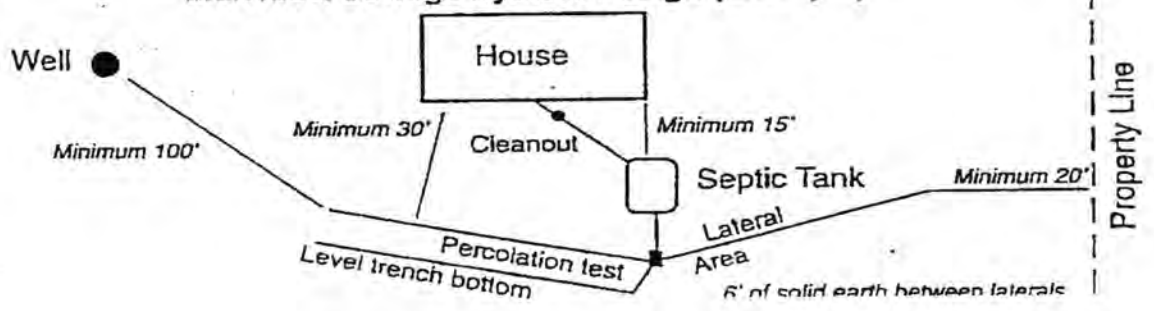
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 32"
   or perforated pipe: ____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 88 ft. 88 ft.
   88 ft. ____ ft., ____ ft.
3. Trench dimensions: Width ____ ft.
   Slope 2% in/100 ft.
   Average depth 36 in
4. Filter material: NONE
   Depth of material ____ in.
5. Distances to: Well or suction line 220 ft.
   Stream N/A ft.
   Pressure line 120 ft.
   Property line 200 ft.

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

Indicate North with Arrow

Individual Sewage System Design (Example)



As Built Drawing

