Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

006102

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM -MUST BE CONSTRUCTED ABOVE FLOOD PLAIN

Permit # 05380294601

Issued 12/30/04
Expires 06/30/05
Revenue Code 3157

Establishment

EDWIN & LYNN BOWES
T12N R6E SEC 35 QTR SE
LOT 35IT
15401 N 14 ST-RAYMOND

FEES: $200.00

Permittee

EDWIN & LYNN BOWES
2301 IRVING ST
LINCOLN NE 68521

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: 0538029401

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 15401 N. 14TH STREET (no rural route) City RAYMOND NE, Zip 68428

Legal Description SE 35 12N 6E 35 I.T.
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 EDWIN & LYNN BOWES Signature X [signature]

Address 2301 IRVING City/State/Zip LINCOLN NE 68521

☐ Check if owner designed system Home Phone 402 477 2966 Work Phone _____

C. Contractor

Name LYNN BOWES Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Scott Haes Firm HAES CONTRACTING Work Phone 402-423-3553

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 12-29-04 Date frwd 12-29-04 **ACTION** ☒ Approved ☐ Disapproved Signature [signature]
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12-30-04 Date frwd _____ **ACTION** ☒ Approved ☐ Disapproved Signature [signature]
3. **City or County Engineer** Date rec'd 12/30/2004 Date frwd _____ **ACTION** ☒ Approved ☐ Disapproved Signature [signature]

Approved Provided Septic is Constructed outside of Flood Plain

Installation Final Written Approval

By [signature]

Date 9-23-05

Business Office Use Only

Date Rec'd 12-30-04
Amt Paid 200.00
Rec'd By TW Cash/Check No. 5130

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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B

Permit Number: 053802946

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 15401 N. 14TH STREET City RAYMOND NE, Zip 68428
(no rural route)

Owner Ed & Lynn BOWES Addresss 2301 IRVING

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

Date of Tests 12-20 to 12-21 Weather: Precipitation _____ Temperature 45°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Pre-Saturation Period				Percolation Readings					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"	12-20	1000	12-21	1030	12-21	1030	63	12-21	230	30	3/4	40
2	↓	↓	↓	↓	↓	↓	↓	61	↓	↓	30	3/4	40
3	↓	↓	↓	↓	↓	↓	↓	37	↓	↓	30	1/2	60
4	↓	↓	↓	↓	↓	↓	↓	58.5	↓	↓	30	1	30
5	↓	↓	↓	↓	↓	↓	↓	41.5	↓	↓	30	1/2	60
6	↓	↓	↓	↓	↓	↓	↓	40	↓	↓	30	3/4	40

Person Conducting Percolation Tests

Name: Scott Haes
Phone: 402-423-3553
Address: 4760 UNION HILL RD

Sum of Percolation Rates: _____
Average of Rates: 720 ÷ 12 Reviews
Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

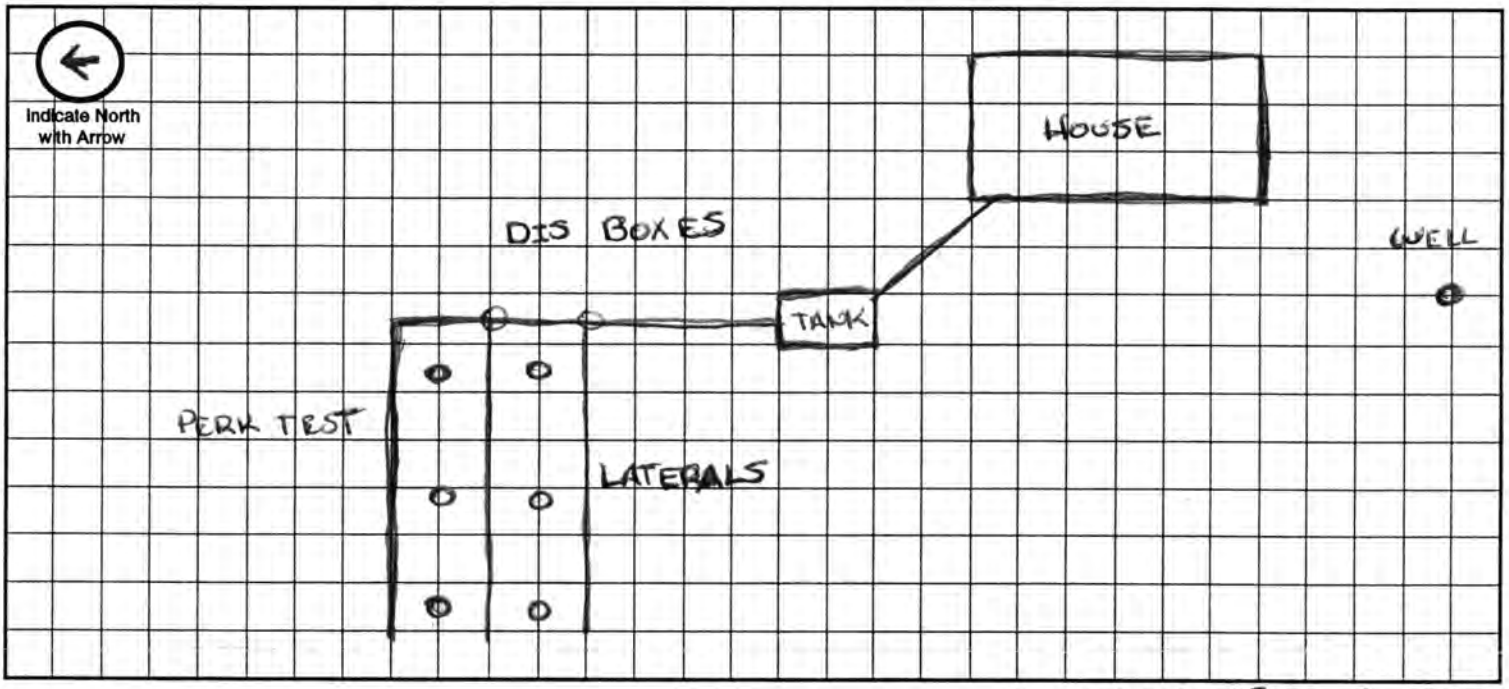
Lincoln-Lancaster County Health Department
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3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 053802946

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: 15 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 15401 N 14th ST City RAYMOND NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: 1 %

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

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

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: 1,050 sq. ft.

Capacity of Septic Tank 1500 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed 1

Total Length of Laterals 340 ft. Number of Trenches 3 Trench Width 3FT in filtrocel
COUNTS OF 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 X _____ Date _____

Installer _____ Date 12-28-04

FORM 23-102 10-96

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

D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date 9-23-04

System Location (Indicate correct number and street)

Address 15401 N 14 (no rural route) City RAYMOND NE, Zip 68428

A. Building Sewer

1. Material: PLASTIC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 55 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 110 ft.
   stream ____ ft.
   pressure line 35 ft.
   property line 130 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 18 in.
   Over outlet, diameter 18 in.
   Riser: ☐ above ☒ below grade 19 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line 150 ft.
   Stream ____ ft.
   Pressure line 80 ft.
   Property line 165 ft.

C. Distribution Box

1. Material: PLASTIC
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 45 ft.

D. Absorption Field

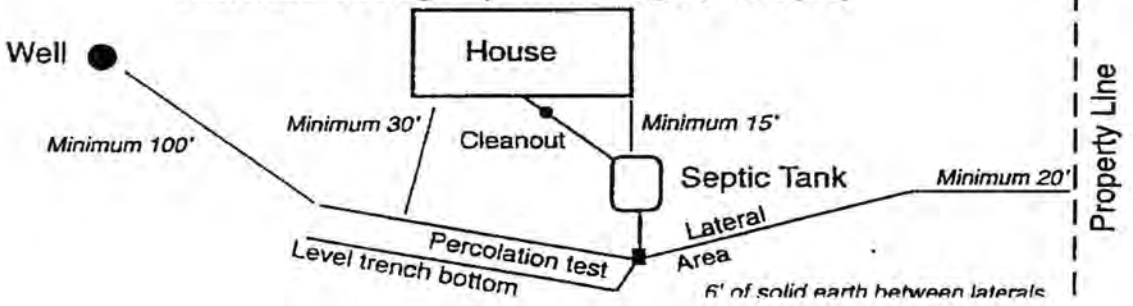
(Provide as-built drawings on back of this form)

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: 114 ft. 114 ft.
   114 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 1 in/100 ft.
   Average depth 30 in
4. Filter material: GRAVEL
   Depth of material 18 in.
5. Distances to: Well or suction line 155 ft.
   Stream ____ ft.
   Pressure line 105 ft.
   Property line 150 ft.

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

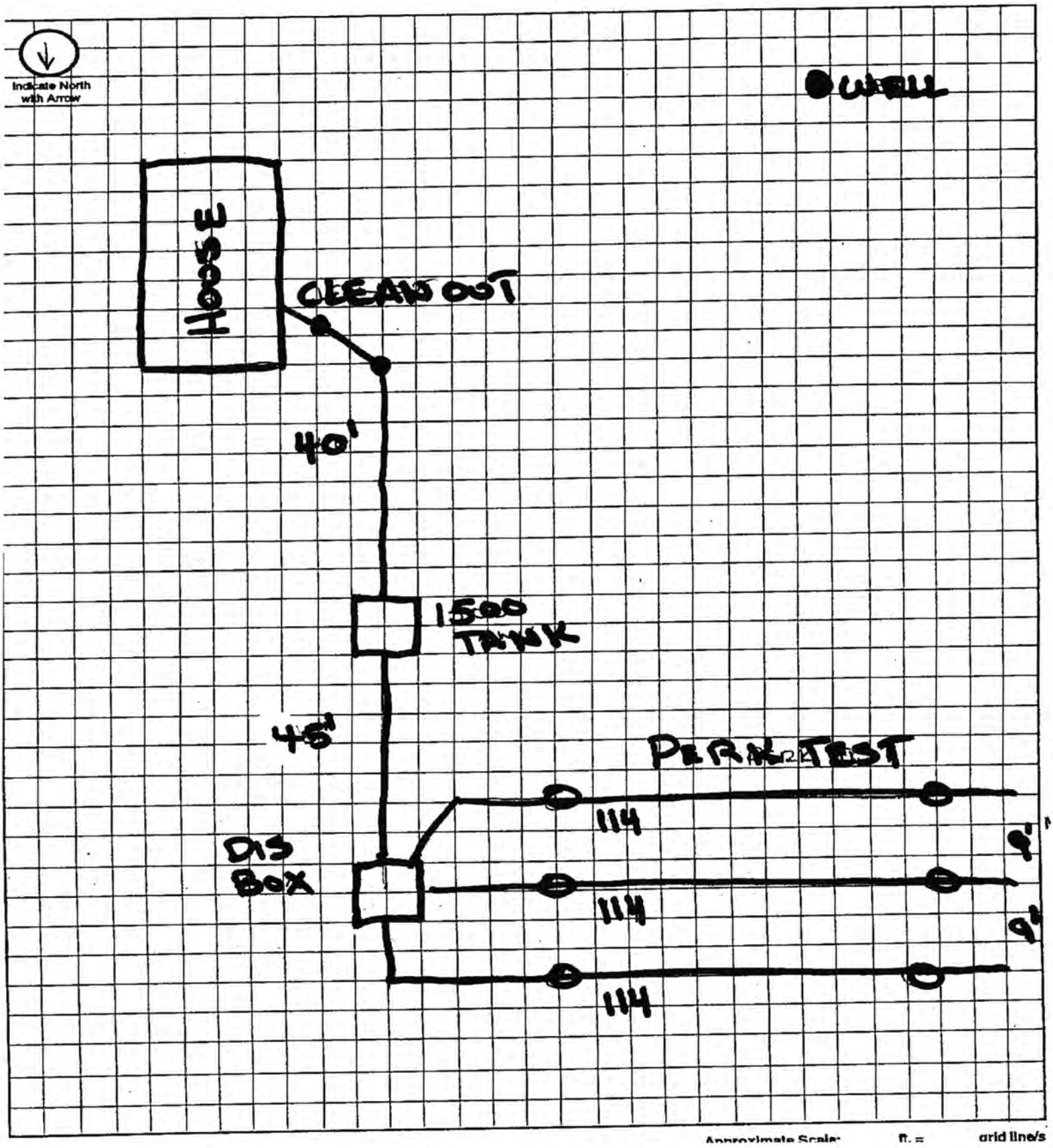
Indicate North with Arrow

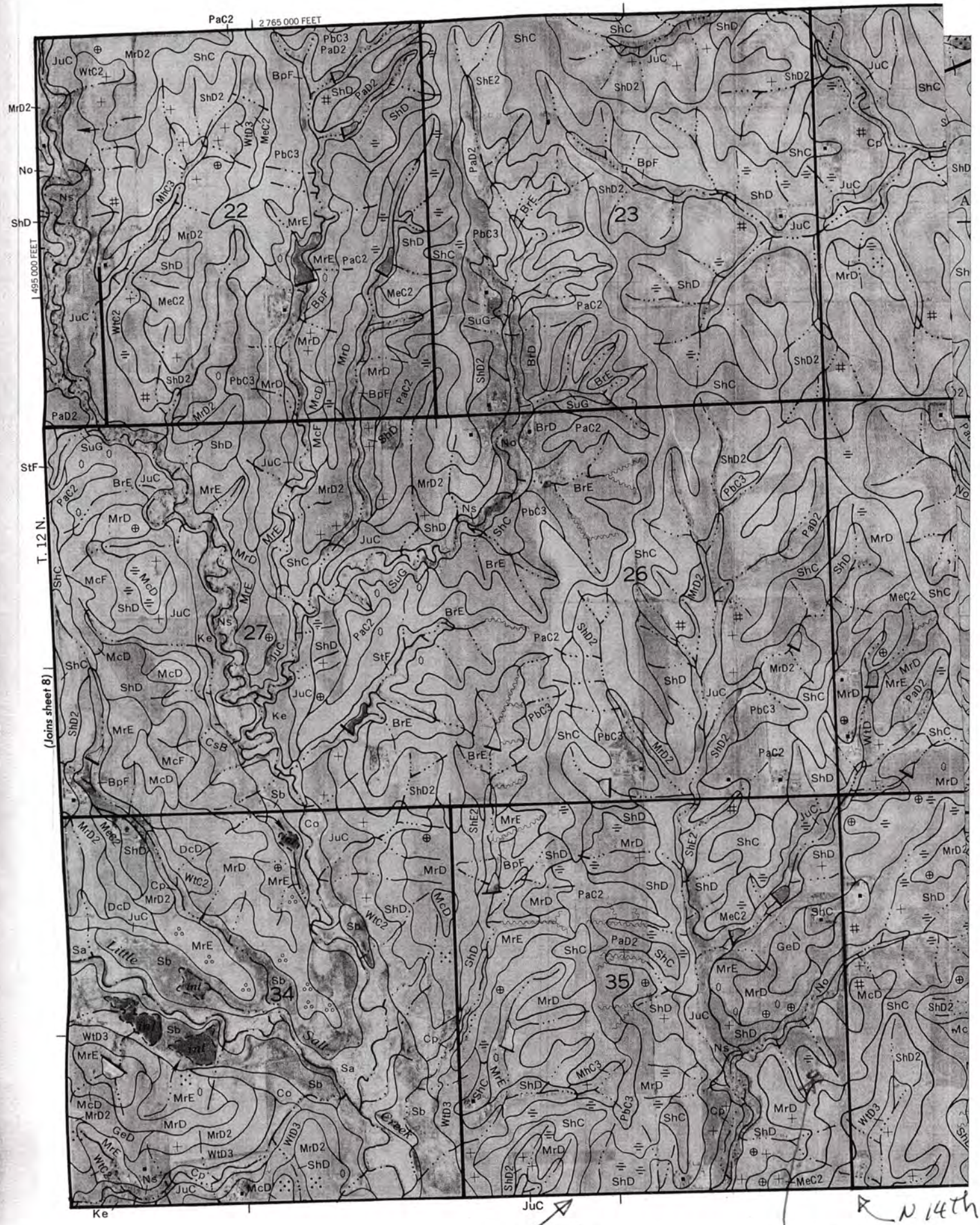
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing




2 765 000 FEET
495 000 FEET
T. 12 N.
(Joins sheet 8)
22
23
26
27
34
35
Little Salt Creek
Raymond Rd
15401 N. 14th
N 14th