LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380190601

Issued 12/04/98
Expires 06/04/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment

DOUG BLOOM
T12N R6E SEC 35 QTR NW
SW 1/4 OF NW 1/4
15800 N 1 ST-RAYMOND

Permittee

DOUG BLOOM
1832 S 15 ST
LINCOLN NE 68502-2410

Issued By Health Director
Lincoln-Lancaster County Health Department

008342

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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

A

Permit Number: 98380196

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 15800 N. 1st (no rural route) City Raymond NE, Zip 68428

Legal Description SW (1/4) NW (1/4) 35 (Section) 12N (Township) 6E (Range) 22.4 acres (Subdivision) (Addition) (Block) 23 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Doug Bloom Signature Doug Bloom

Address 1832 S. 15th City/State/Zip Lincoln NE 68502

☐ Check if owner designed system Home Phone (402) 477-5101 Work Phone (402) 450-5232

C. Contractor

Name Doug Bloom Company Name Bloom Construction

Address 1832 S. 15th City/State/Zip Lincoln NE 68502

☐ Check if contractor designed system Work Phone (402) 450-5232

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 4 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 12/7/98 Date frwd 12/7/98 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12/7/98 Date frwd 12/7/98 **ACTION** ☒ Approved ☐ Disapproved Signature Gary Spier
3. **City or County Engineer** Date rec'd 12-7-98 Date frwd 12-7-98 **ACTION** ☒ Approved ☐ Disapproved Signature

3-22-99 Need D sheet

Installation Final Written Approval

By _____

Date 3-5-99 4-29-99

Business Office Use Only

Date Rec'd 12/03/98
Amt Paid 150.00
Rec'd By LO Cash/Check No. 3624

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: 98380 1906

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

35 - 12 - 6

System Location (Indicate correct number and street)

Address 15800 N 1st (no rural route) City Raymond NE, Zip 68

Owner Doug Bloom Addresss 1832 S. 15th Lincoln NE 68502

Soil Type (SCS): Sharpsburg Percolation Rate: 23.4 min./inch

Date of Tests 10-26-98 to 11-15-98 Weather: Precipitation dry Temperature 55°-65°

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"	10-26	10:30	10-26	2:30	10-27	2:30	—	10-27	6:30	30	1 5/8	18.4
2	"	10-26	10:30	10-26	2:30	10-27	2:30	—	10-27	6:30	30	1 1/4	24
3	"	11-14	11:30	11-14	3:30	11-15	11:30	—	11-15	3:30	30	1 1/2	20
4	"	11-14	11:30	11-14	3:30	11-15	11:30	—	11-15	3:30	30	1	30
5	"	11-14	11:30	11-14	3:30	11-15	11:30	—	11-15	3:30	30	1 1/4	24
6	"	11-14	11:30	11-14	3:30	11-15	11:30	—	11-15	3:30	30	1 1/4	24
													140.4

Sum of Percolation Rates: 140.4

Average of Rates: 23.4

Rate Used for Calculation: 23 mpi

Person Conducting Percolation Tests

Name: Doug Bloom

Phone: (402) 477-5101

Address 1832 S. 15th Lincoln NE 68502

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks ~~Sharpsburg soil~~ Mollisol

Signature of Reviewing Official Ron Mayer Date 12-3-98

FORM 23-101 10-96

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

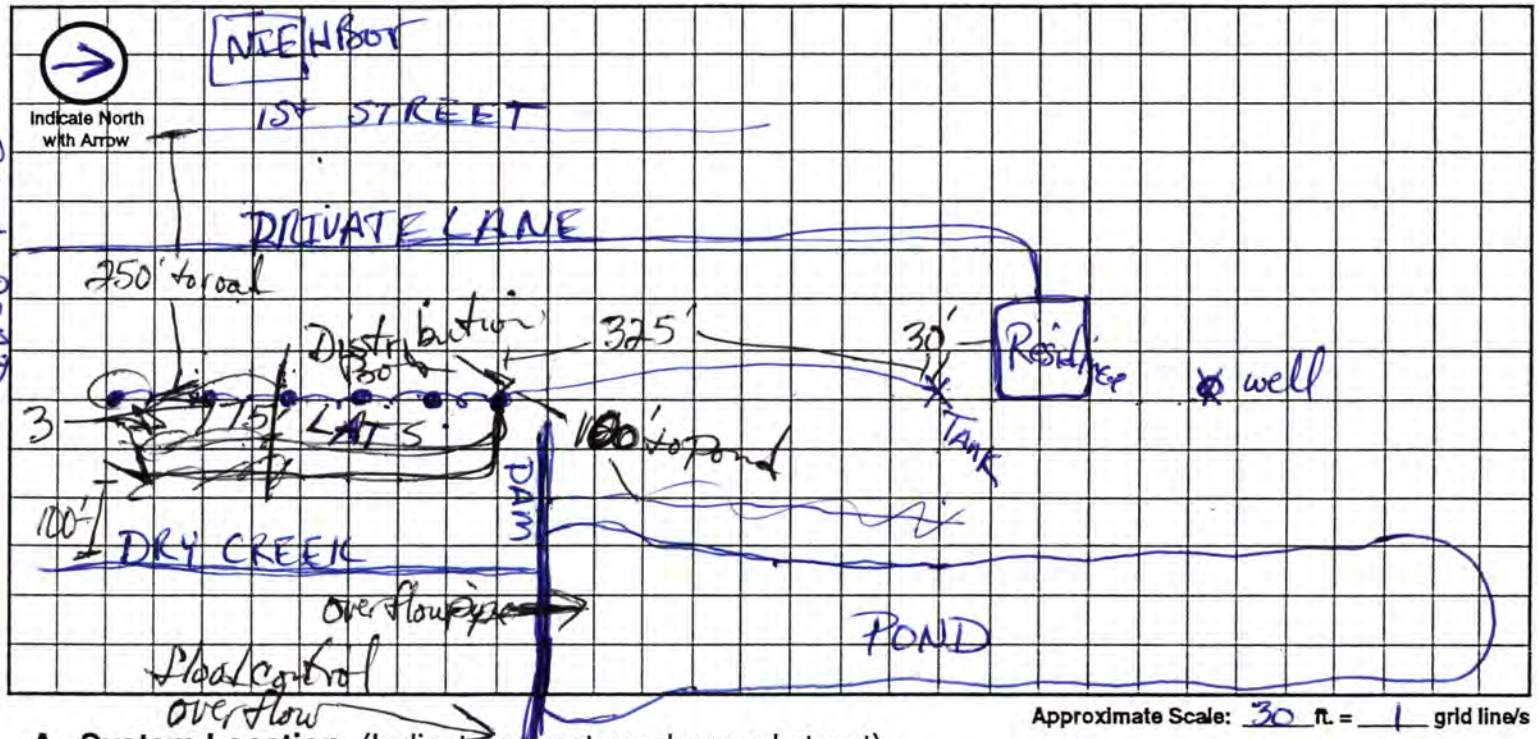
C

Permit Number: 98301906

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: 30 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) ~~15~~ 15800 N. 1st City Raymond NE, Zip 68434

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 23 (min. per inch) Soil Type: ~~Shoaby~~ Morrill Clay loam Land Slope: _____ %

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

Total Square Feet of Field Required: 886 sq. ft.

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

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

Total Length of Laterals ~~222~~ 295 ft. Number of Trenches 3 3 Trench Width 4' 3'

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 Doug Bloom Date 12-1-98

Installer Doug Bloom Date _____

FORM 23-102 10-96

From Doug Bloom

APR 21 1999

D

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

Permit Number: 98 3801906

Sewage Disposal System

As Built Plans & Specifications

35-12-6

Date 4-20-99

System Location (Indicate correct number and street)

Address 15800 N. 1st (no rural route) City Raymond NE, Zip 68428

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 35 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 130 ft.
   stream — ft.
   pressure line — ft.
   property line 500 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☒ above ☐ below grade 1 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 160 ft.
   Stream — ft.
   Pressure line — ft.
   Property line 500 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: ~~300~~ 230 ft.

D. Absorption Field

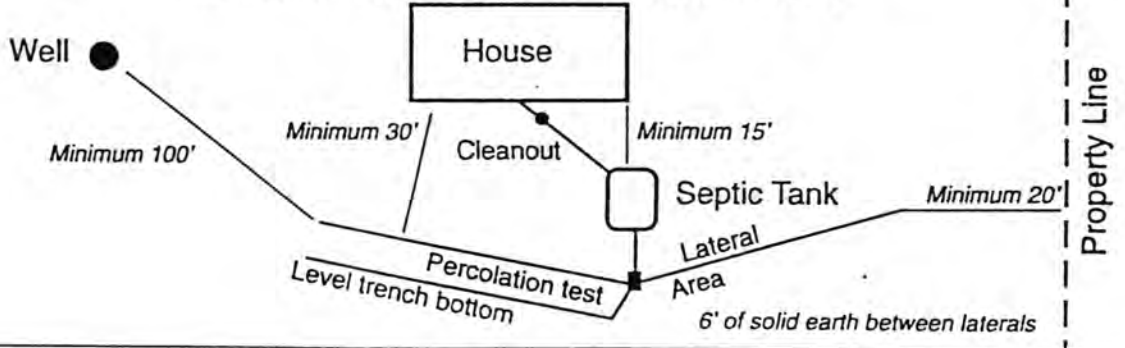
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: INFILtrator
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 75 ft. 75 ft.
   75 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 0 in/100 ft.
   Average depth 30" in
4. Filter material: gravel
   Depth of material 16 in.
5. Distances to: Well or suction line 500 ft.
   Stream — ft.
   Pressure line — ft.
   Property line 500 ft.

Indicate North with Arrow

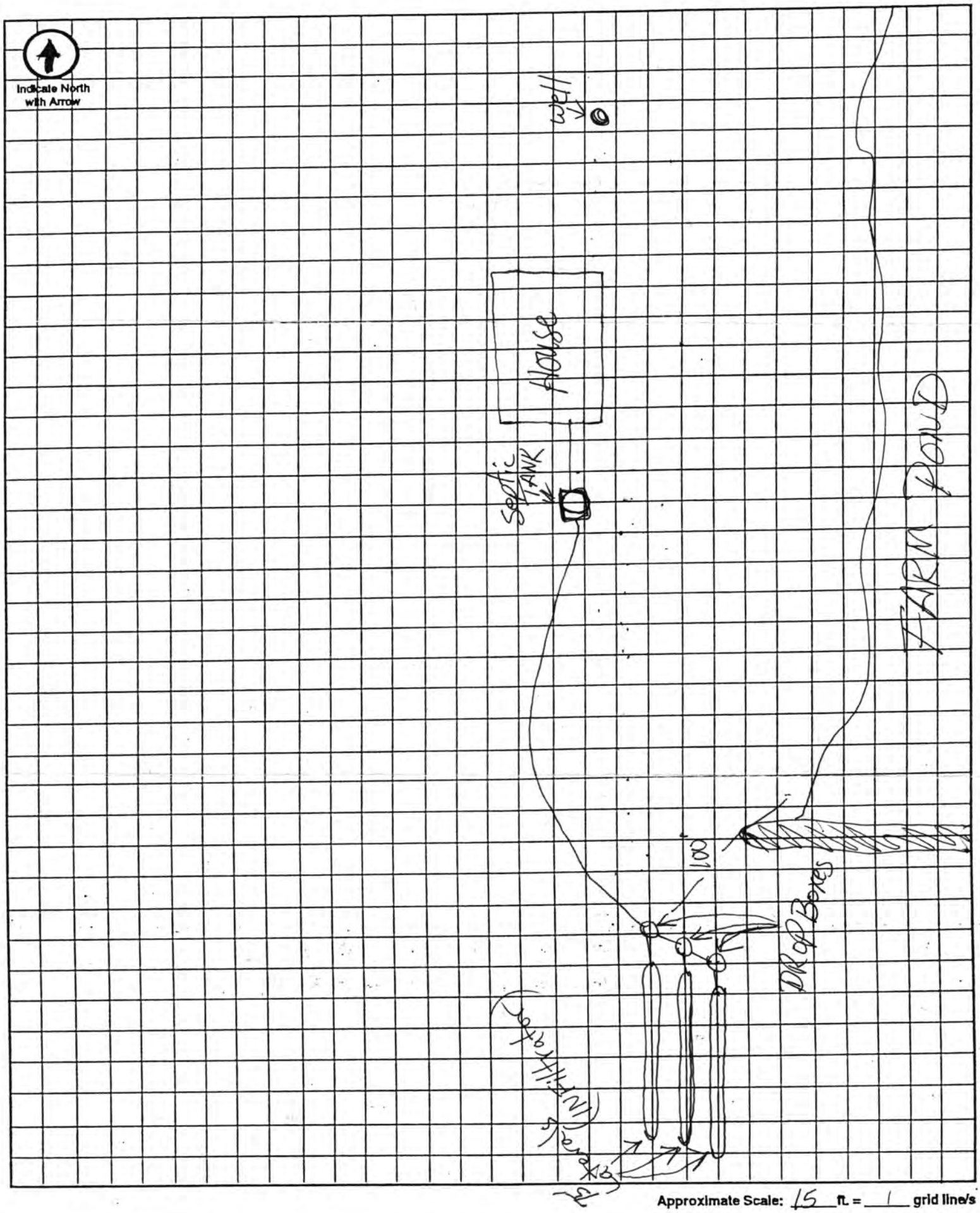
Complete "As Built" drawing on back of this form.

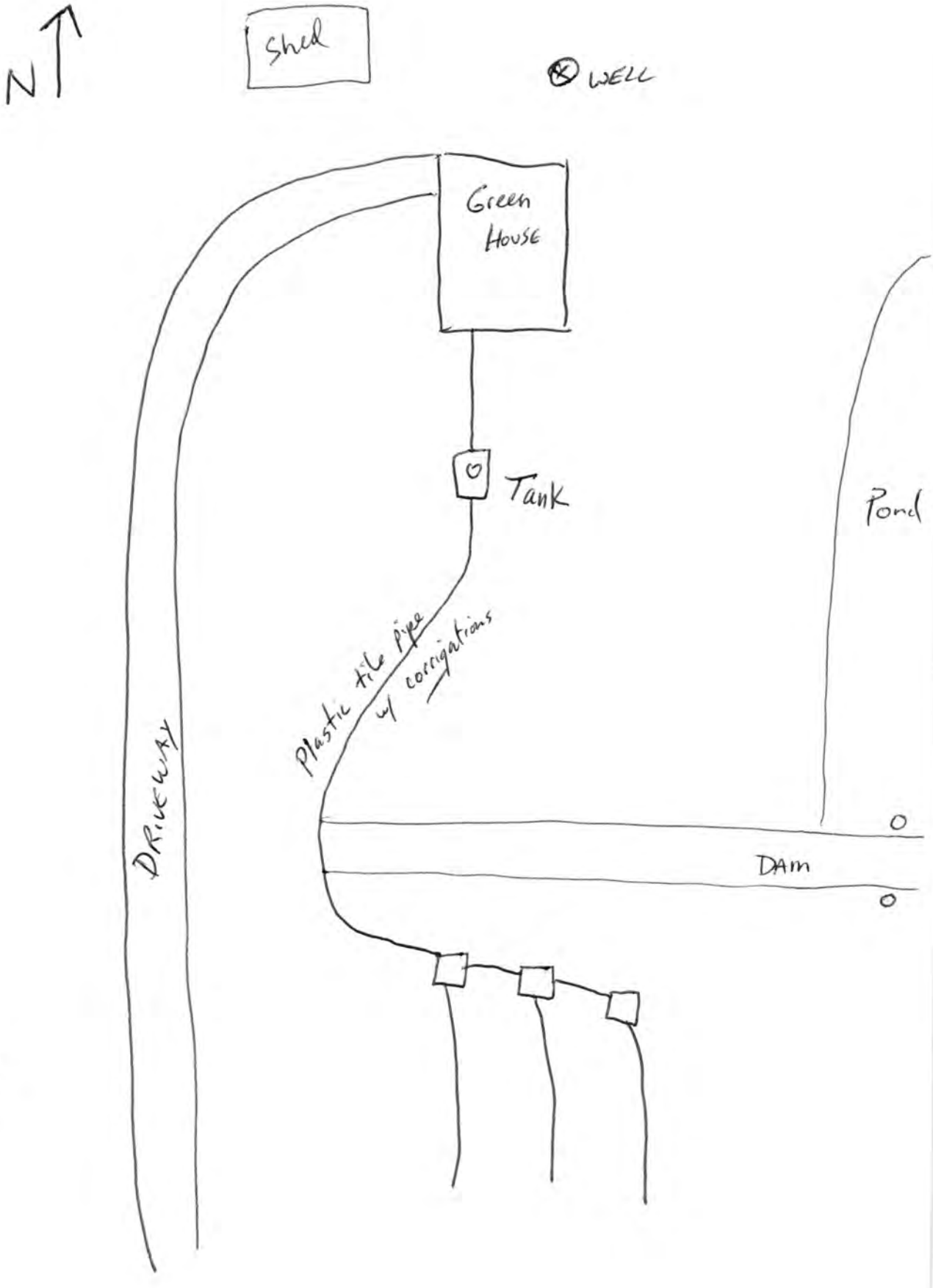
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing





As seen on 3-22-99 by P.D.

15800 N. 1st
12-6-35
Lot 23


2 765 000 FEET
495 000 FEET
T. 12 N.
(Joins sheet 8)
22
23
26
35
PaC2
MrD2
ShC
ShD
MrE
MrD
BpF
ShE2
PaD2
PbC3
MeC2
MnC3
JuC
BrE
StF
McD
McF
ShD2
Ke
JuC
New septic
N. 1st St.
Proposed Rd.