Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

011018

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit
SEWAGE INSTALLATION
LAGOON

Permit # 07380334701

Issued 06/11/07
Expires 06/11/08
Revenue Code 3157

Establishment
JEFF DITTMER
T12N R6E SEC 33 QTR NW
LOT 16
16140 NW 27 ST-RAYMOND

FEES: $290.00

Permittee
JEFF DITTMER
2230 MANITOU DR
LINCOLN NE 68521

TOTAL: $290.00

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

JUN 06 2007

A

Permit Number: 07380334701

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:

24.36 acres

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 16140 NW 27th St (no rural route) City Raymond NE, Zip 68428

Legal Description LOR 5984 — 1/4 NW, 1/4, Section 33, Township 12, Range 6, Subdivision, Addition, Block, Lot 16

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Jeff Dittmer Signature See other A Sheet

Address 2230 Manitou Dr City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone 402-435-9283 Work Phone 402-430-8191

C. Contractor

Name Owner Company Name Stonebrook Builders

Address Same as Above City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Lloyd Jakoubek Firm Raymond Contracting, Inc. Work Phone 402-890-6009

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 6/11/07 Date frwd 6/11/07 ACTION ☑ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/11/07 Date frwd 6/11/07 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 6-11-07 Date frwd 6-11-07 ACTION ☒ Approved ☐ Disapproved Signature _____

line a lagoon 8/10/07 NH

Installation Final Written Approval

By _____

Date 1/8/08

Business Office Use Only (see other form)

Date Rec'd 6-1-07
Amt Paid 290.00
Rec'd By _____ Cash/Check No. 6440

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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Phone: 402-441-8022

A

Permit Number: 07380334701

Sewage Disposal System

Request for Site Clearance and Permit

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☐ 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:

20.62

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 16140 NW 27th St (no rural route) City ~~Davey~~ Raymond NE, Zip 68428

Legal Description NW 31 12 7 Parcel 1 13
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 Jeff Dittmer Signature _____

Address 2230 Manitou Dr City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone 402-435-9283 Work Phone 402-430-8191

C. Contractor

Name Owner Company Name Stonebrook Builders

Address same as Above City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

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3. **City or County Engineer** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By _____

Date _____

Business Office Use Only
Date Rec'd 06/01/07
Amt Paid 290.00
Rec'd By _____ ~~Cash~~/Check No. 6440

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

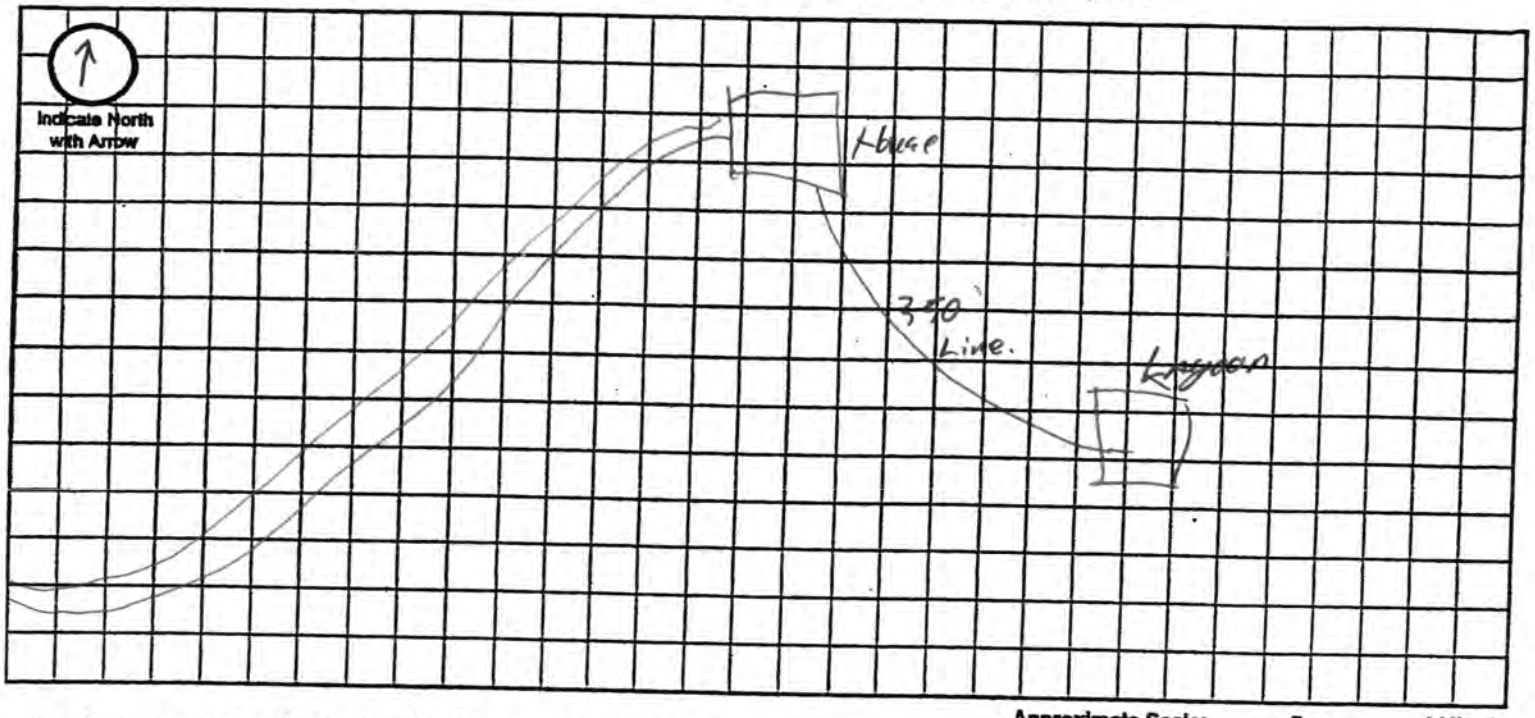
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) 16140 NW 27th 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: _____ %

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: _____

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

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

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 5-29-07

Installer _____ Date 5-29-07

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 8/11/07

System Location (Indicate correct number and street)

Address 16140 NW 27TH (no rural route) City Raymond NE, Zip 68428

A. Building Sewer

1. Material: SDR26 160 PSI
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 20 in.
3. Distance between dwelling and ~~septic tank~~ Lagoon: 320 ft.
4. Number of clean-outs: 6
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 50+ ft.

B. Septic Tank

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

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

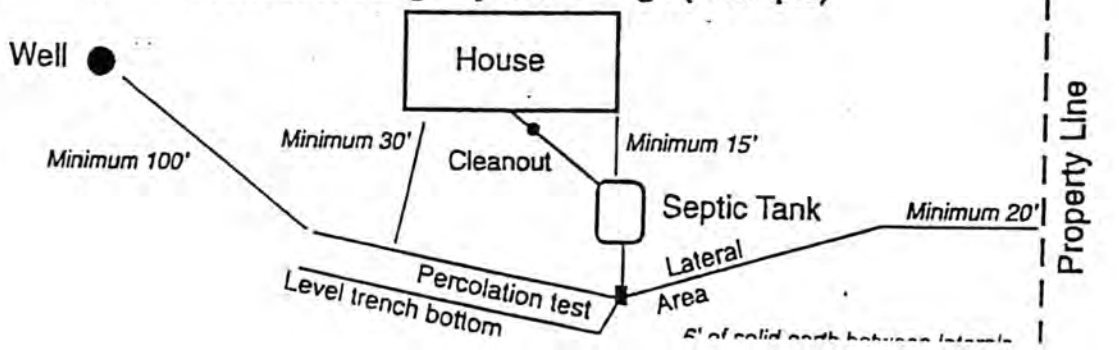
(Provide as-built drawings on back of this form)

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

Indicate North with Arrow

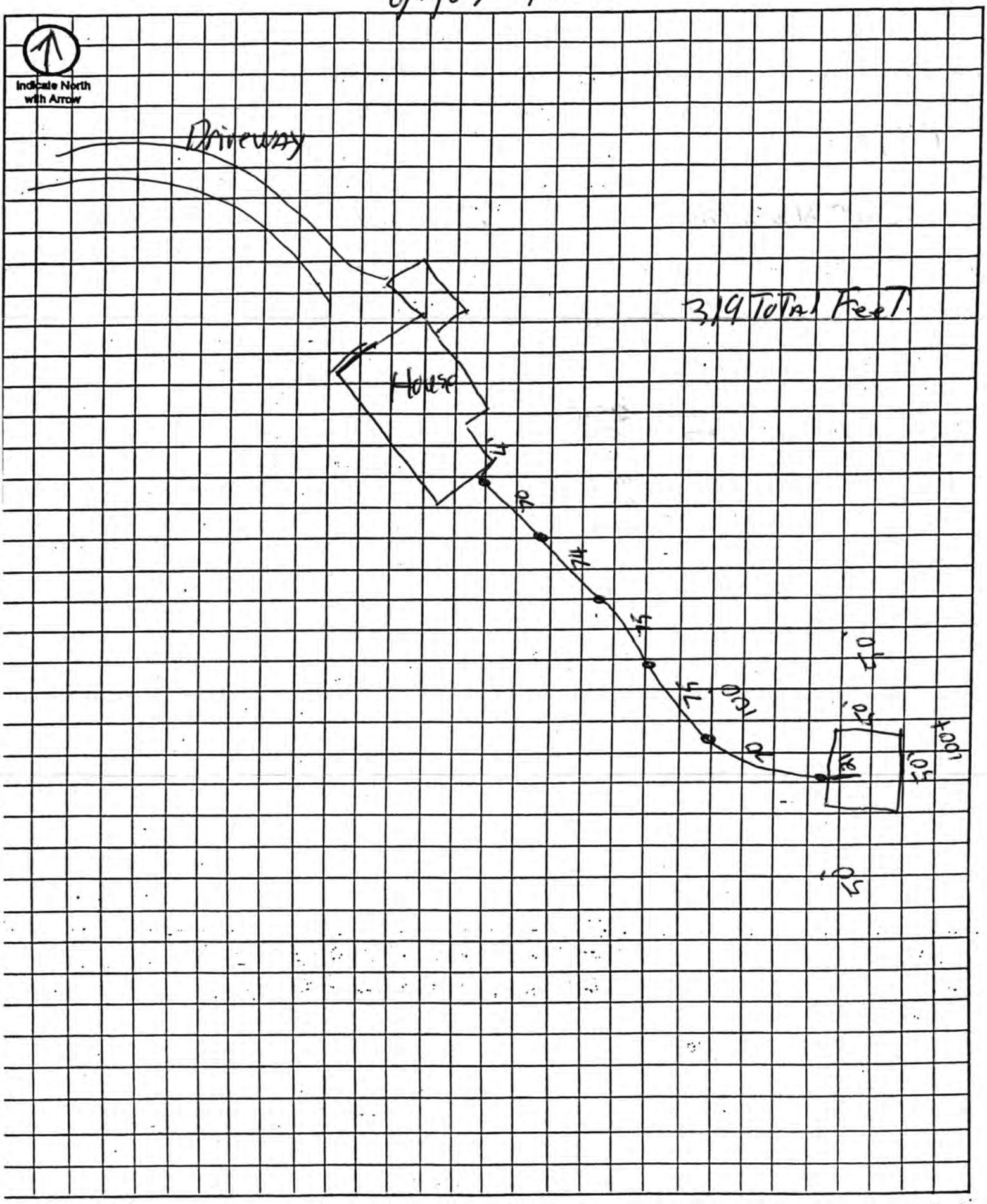
Complete "As Built" drawing on back of this form.

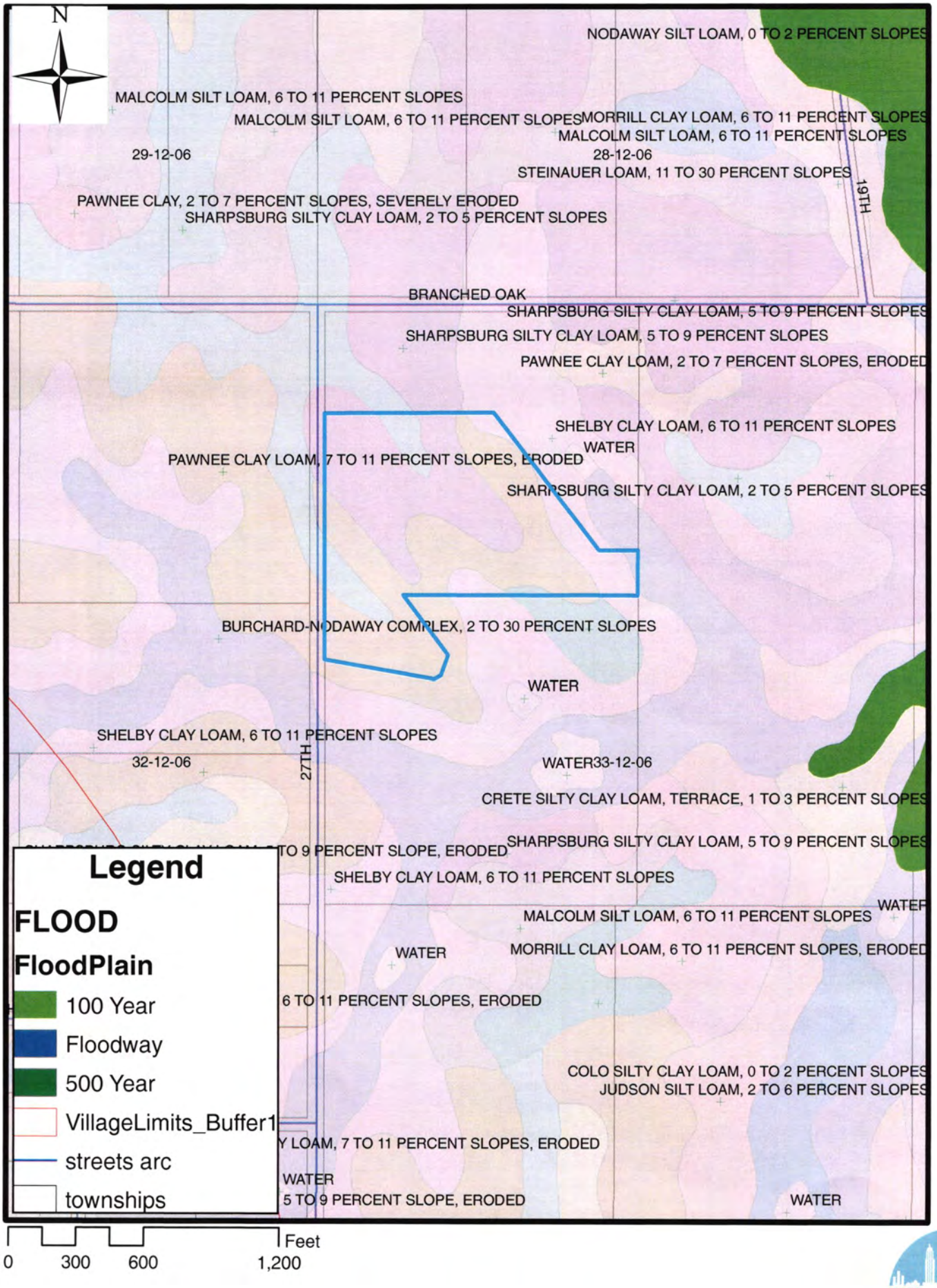
Individual Sewage System Design (Example)



As Built Drawing

8/11/07 No well




N
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
MALCOLM SILT LOAM, 6 TO 11 PERCENT SLOPES
MALCOLM SILT LOAM, 6 TO 11 PERCENT SLOPES
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
MALCOLM SILT LOAM, 6 TO 11 PERCENT SLOPES
29-12-06
28-12-06
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES
19TH
PAWNEE CLAY, 2 TO 7 PERCENT SLOPES, SEVERELY ERODED
SHARPSBURG SILTY CLAY LOAM, 2 TO 5 PERCENT SLOPES
BRANCHED OAK
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
WATER
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
SHARPSBURG SILTY CLAY LOAM, 2 TO 5 PERCENT SLOPES
BURCHARD-NODAWAY COMPLEX, 2 TO 30 PERCENT SLOPES
WATER
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
32-12-06
27TH
WATER
33-12-06
CRETE SILTY CLAY LOAM, TERRACE, 1 TO 3 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
TO 9 PERCENT SLOPE, ERODED
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
WATER
MALCOLM SILT LOAM, 6 TO 11 PERCENT SLOPES
WATER
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
6 TO 11 PERCENT SLOPES, ERODED
COLO SILTY CLAY LOAM, 0 TO 2 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
Y LOAM, 7 TO 11 PERCENT SLOPES, ERODED
WATER
5 TO 9 PERCENT SLOPE, ERODED
WATER
Legend
FLOOD
FloodPlain
100 Year
Floodway
500 Year
VillageLimits_Buffer1
streets arc
townships
Feet
0
300
600
1,200