Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 00380216501

Issued 04/06/00
Expires 10/06/00
Revenue Code 3157

FEES: $150.00

Establishment

BRUCE A IRONS
T10N R5E SEC 3 QTR NE
LOT 28IT
8601 W FLETCHER AVE-MALCOLM

TOTAL: $150.00

Permitee

BRUCE A IRONS
1421 HILLTOP RD
APT 202
LINCOLN NE 68521

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

012857

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

A

Permit Number: 003802165

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 6601 W. Fletcher Ave. (no rural route) City Malcolm NE, Zip 68402

Legal Description 3 T10N R5E 28 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 Bruce A. Irons Signature _____

Address 1421 Hilltop Rd. #202 City/State/Zip Lincoln, Nebr. 68521

☒ Check if owner designed system Home Phone 435-0626 Work Phone 580-6082

C. Contractor

Name Owner/Capital City Trenching 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 _____ 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 4/6/00 Date frwd 4/6/00 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Ford
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 4-6-00 Date frwd 4-6-00 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 4/6/00 Date frwd 4/6/00 **ACTION** ☒ Approved ☐ Disapproved Signature Chase Becker

Installation Final Written Approval

By Paul Wiltgen

Date 11-13-00

Business Office Use Only

Date Rec'd 04/06/00

Amt Paid 150 ck

Rec'd By _____ Cash/Check No. 1758

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector Also WC11

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

B

Permit Number: 00380216S

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 8601 W. Fletcher Av. (no rural route) City Malcolm NE, Zip 68402 ~~68504~~

Owner Bruce H. Irons Addresss 1421 Hilltop Rd. Apt 202

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

Date of Tests April ~~8~~ 1 to April ~~9~~ 2 Weather: Precipitation None Temperature Average 57

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	3'	Apr. 1	12:05 ~~p.m.~~	Apr. 2	8:00 a.m.	Apr. 2	8:00 a.m.	6"	Apr. 2	1:15 p.m.	5 hr. 15 min.	25 3/8	33 min / 3 1/8"
2	3'	"	~~12:05~~ "	"	"	"	8:02	"	"	1:17	"	27 1/2	30 min / 3 1/4"
3	3'	"	"	"	"	"	8:05	"	"	1:20	"	22 3/8"	35 min / 2 3/4"
4	3'	"	"	"	"	"	8:08	"	"	1:23	"	22"	30 min / 1 3/4"
5	3'	"	"	"	"	"	8:10	"	"	1:25	"	18"	32 min / 1 1/2"
6	3'	"	"	"	"	"	8:15	"	"	1:28 p.m.	5 hr. 13 min.	19 1/4	30 min / 2"

Person Conducting Percolation Tests

Name: Bruce H. Irons
Phone: 580-6082
Address Same as above.

Sum of Percolation Rates: _____
Average of Rates: _____
Rate Used for Calculation: 14

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date APRIL 6, 2000

FORM 23-101 10-96

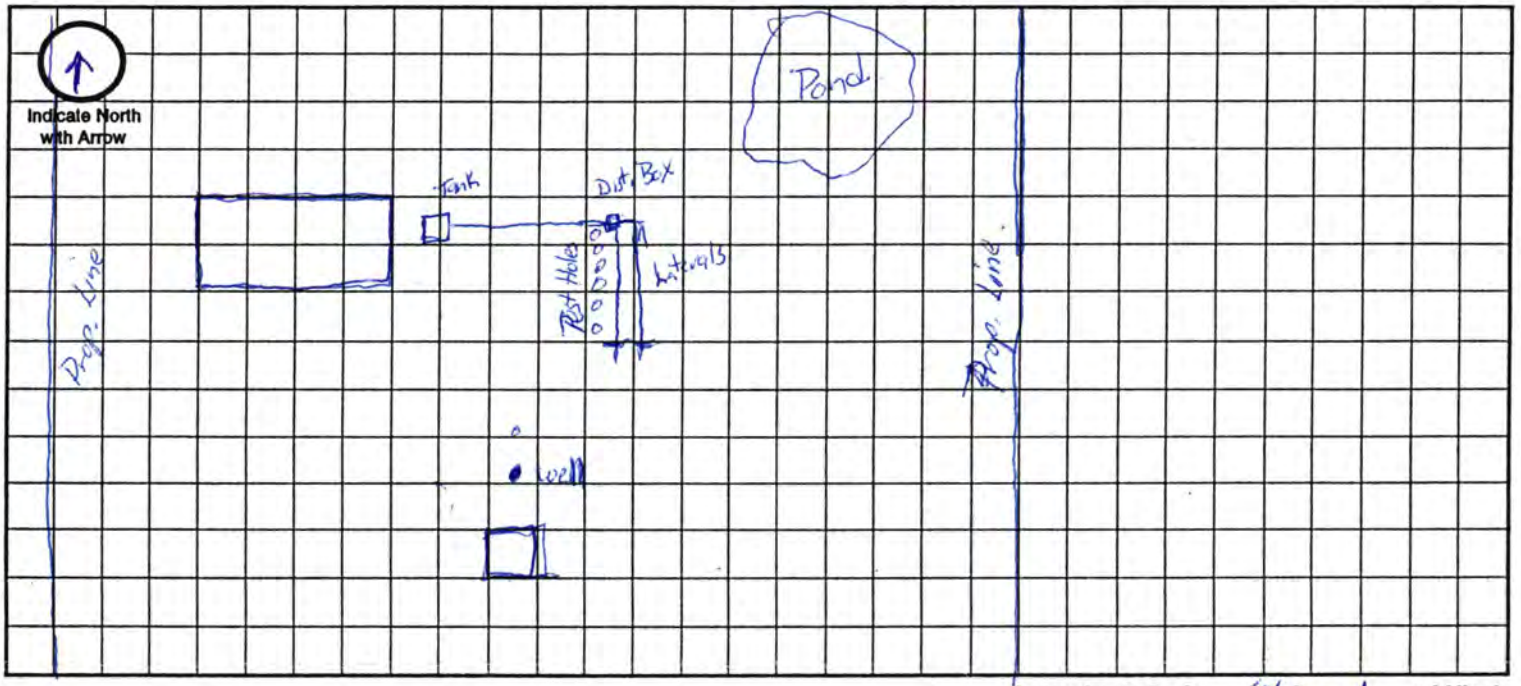
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 00380216S

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: 50' ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 8601 W. Fletcher City Malcolm NE, Zip 68402

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 14 (min. per inch) Soil Type: Judson SILT LOAM. Land Slope: 2 %

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

Total Square Feet of Field Required: 840 sq. ft.

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

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed _____

Total Length of Laterals 280 ft. Number of Trenches 3 Trench Width 84'

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 Bruce A. Irons Date 4/4/00

Installer Bruce Irons / Capital City Trenching Date _____

FORM 23-102 10-96

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

NOV 1 3 2000

D

Permit Number: 003802165

Sewage Disposal System

As Built Plans & Specifications

Date 11-10-00

System Location (Indicate correct number and street)

Address 8601 W. Fletcher (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: ~~Extra Strength Plastic Half Rounds~~ PVC
   Diameter: ~~24"~~ 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and septic tank: 25 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 120 ft.
   stream _____ ft.
   pressure line _____ ft.
   property line 275 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 ~~24~~ 30 in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☒ below grade 30 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 180 ft.
   Stream _____ ft.
   Pressure line 30 ft.
   Property line 150 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 75 ft.

D. Absorption Field

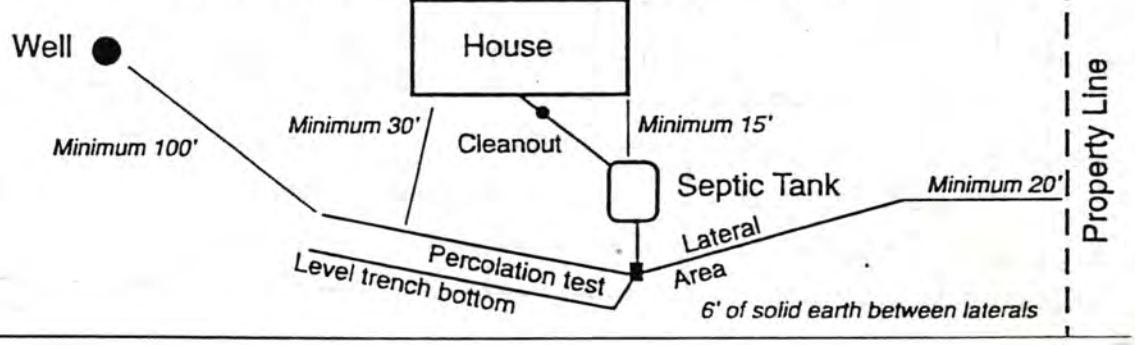
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 24"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 100' ft. 100' ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 33" in
4. Filter material: Rd Gravel
   Depth of material 24" in.
5. Distances to: Well or suction line 120 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

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

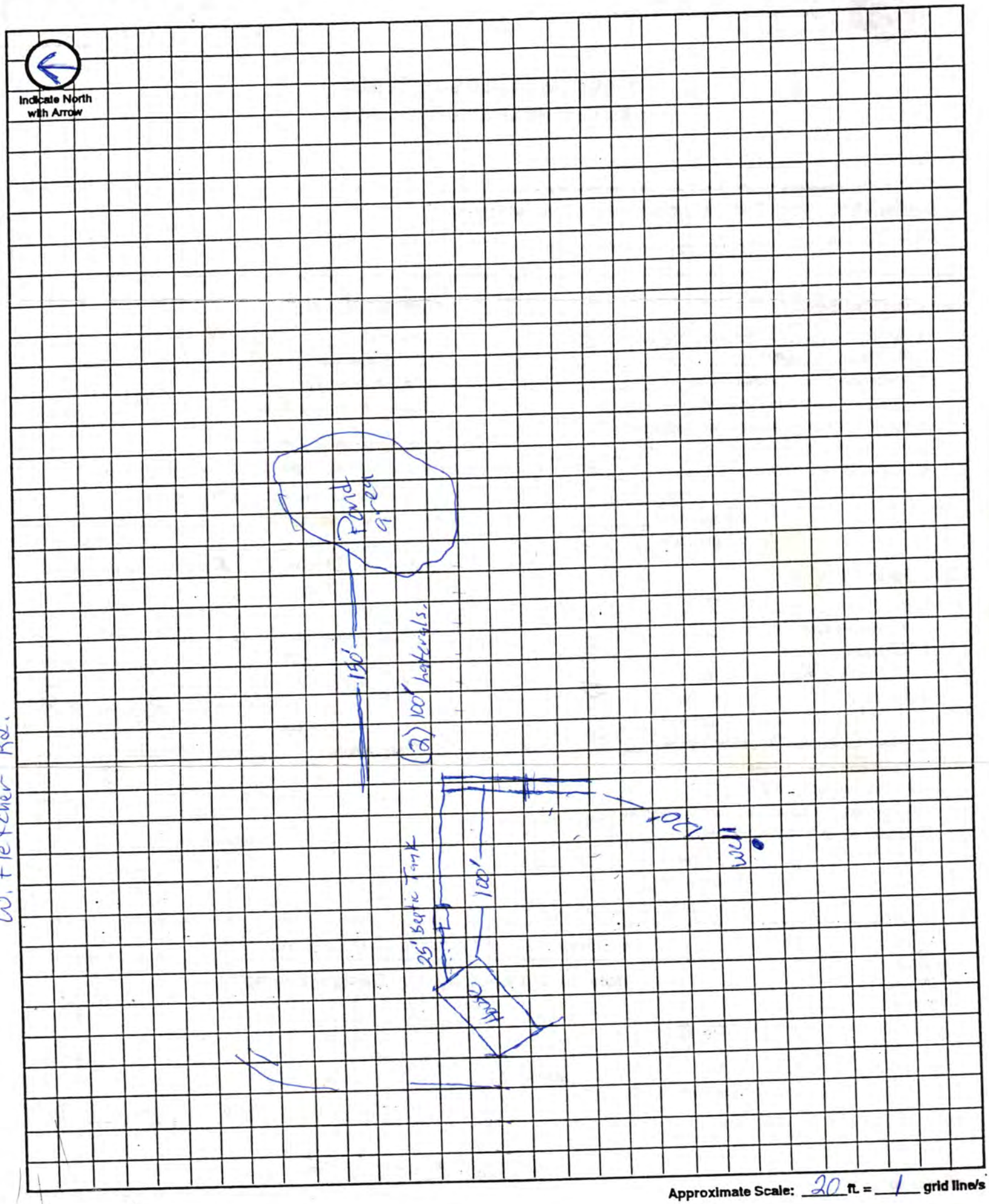
Indicate North with Arrow

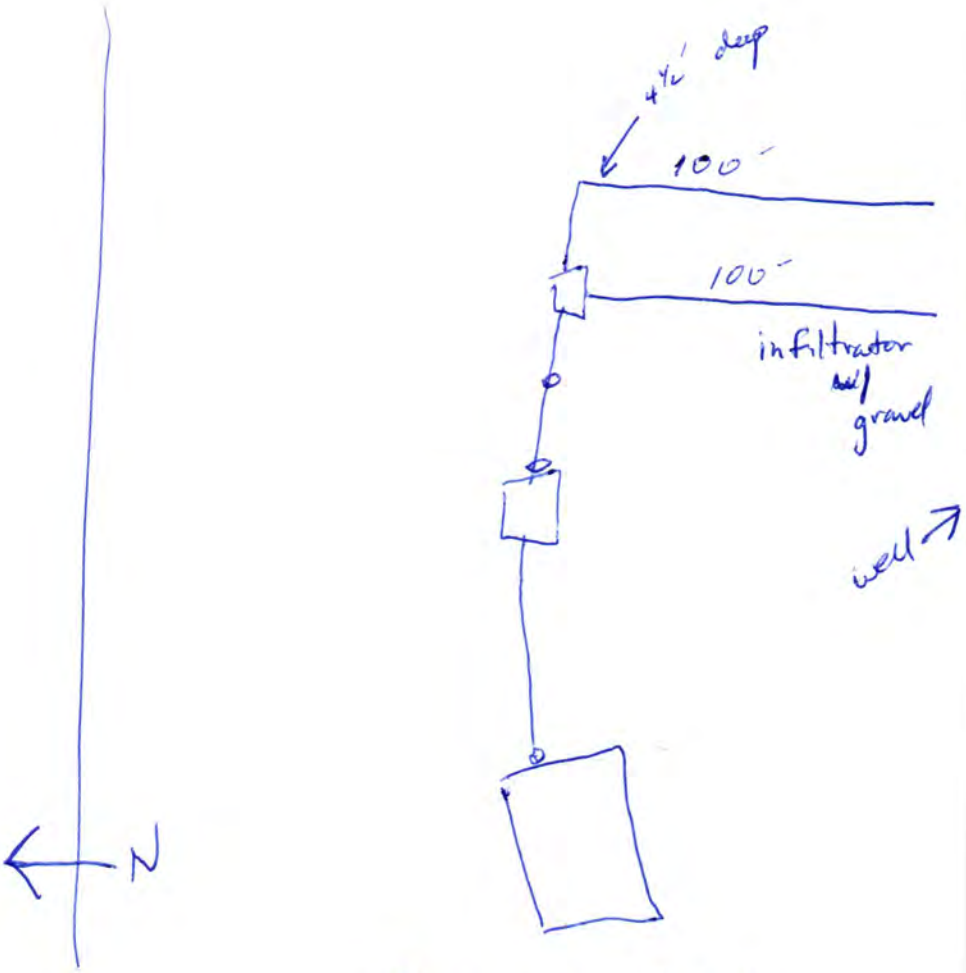
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing





8601 W. Fletcher

4-10-00 PD