Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005725

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 04380289901

Issued 09/22/04
Expires 03/22/05
Revenue Code 3157

Establishment

ASPEN BUILDERS
T12N R6E SEC 28 QTR NW
LOT 28
2225 W DAVEY RD-DAVEY

FEES: $200.00

Permittee

ASPEN BUILDERS
1640 NORMANDY CT
APT A
LINCOLN NE 68512

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

SEP 2 2 2004

A

Permit Number: 04380289901

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 2225 W. Davey Rd. (no rural route) City Davey NE, Zip 68336

Legal Description I.T. NW 28 12N 6E OF 6th PM. 28
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 Aspen Builders Inc. Signature _____

Address 1640 Normandy Ct. Ste A City/State/Zip Lincoln NE 68512

☐ Check if owner designed system Home Phone 423-6811 Work Phone _____

C. Contractor

Name Bob Benes Company Name Aspen Builders Inc shalley owens

Address 1640 Normandy Ct. Ste A City/State/Zip Lincoln NE 68512

☒ Check if contractor designed system 416-9660 Work Phone 423-6811

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 9/22/04 Date frwd 9/23/04 ACTION ☒ Approved ☐ Disapproved Signature Gerald C. Hood
1-20-05 Two laterals about 2½ ft drop Engineer each

2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9/23/04 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
2-23-05, 2nd attempt, still too much drop.

3. **City or County Engineer** Date rec'd 9/23/04 Date frwd 9/23/04 ACTION ☒ Approved ☐ Disapproved Signature _____
2-25-05, upper lateral OK 2nd level lower one 1 ft drop in about 50 ft
2-28-05, Construction completed

Installation Final Written Approval

By Ron Mangum

Date 5-10-05

Business Office Use Only
Date Rec'd 09/22/04
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 8158

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: 043802899

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2225 W. Davey Rd. (no rural route) City Davey NE, Zip 68336

Owner Aspen Builders Addresss 1640 Normandy Ct. Lincoln 68512

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

Date of Tests 9-9 to 9-10 Weather: Precipitation Dry Temperature 80

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"	9-9	5:00p	9-10	8:00A	9-10	10:10	15	9-10	10:40	30	1.75	17.1
2	35"	↓	↓	↓	↓	↓	10:12	17	9-10	:42	↓	1.875	16.0
3	36"	↓	↓	↓	↓	↓	10:15	18	↓	:45	↓	2.0	15.0
4	36"	↓	↓	↓	↓	↓	10:17	18	↓	:47	↓	2.0	15.0
5	38"	↓	↓	↓	↓	↓	10:20	19	↓	:50	↓	2.0	15.0
6	36"	↓	5:10	↓	↓	↓	10:25	22	↓	:55	↓	1.75	17.1

Person Conducting Percolation Tests

Name: Bob Beaes ; Ed Etzen

Phone: 423-6811

Address 1640 Normandy Ct. Lincoln, NE 68512

Sum of Percolation Rates: 95.2

Average of Rates: 16

Rate Used for Calculation: 16

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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

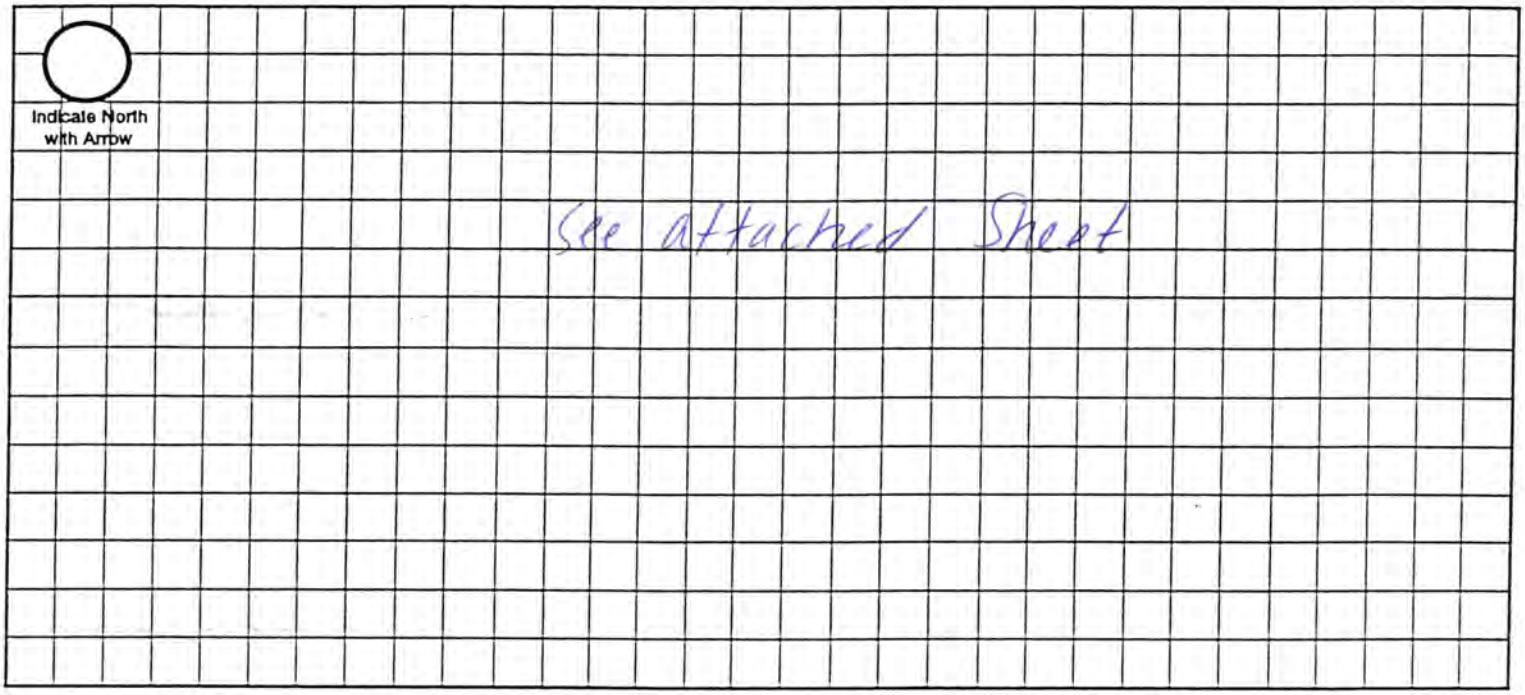
C

Permit Number: 043802899

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) 2225 N. Davey RD. City Davey NE, Zip 68336

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 16 (min. per inch) Soil Type: _____ Land Slope: 15 %

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: 34" Gravel less Chamber

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

Total Length of Laterals 290 ft. Number of Trenches 3 Trench Width 3'

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

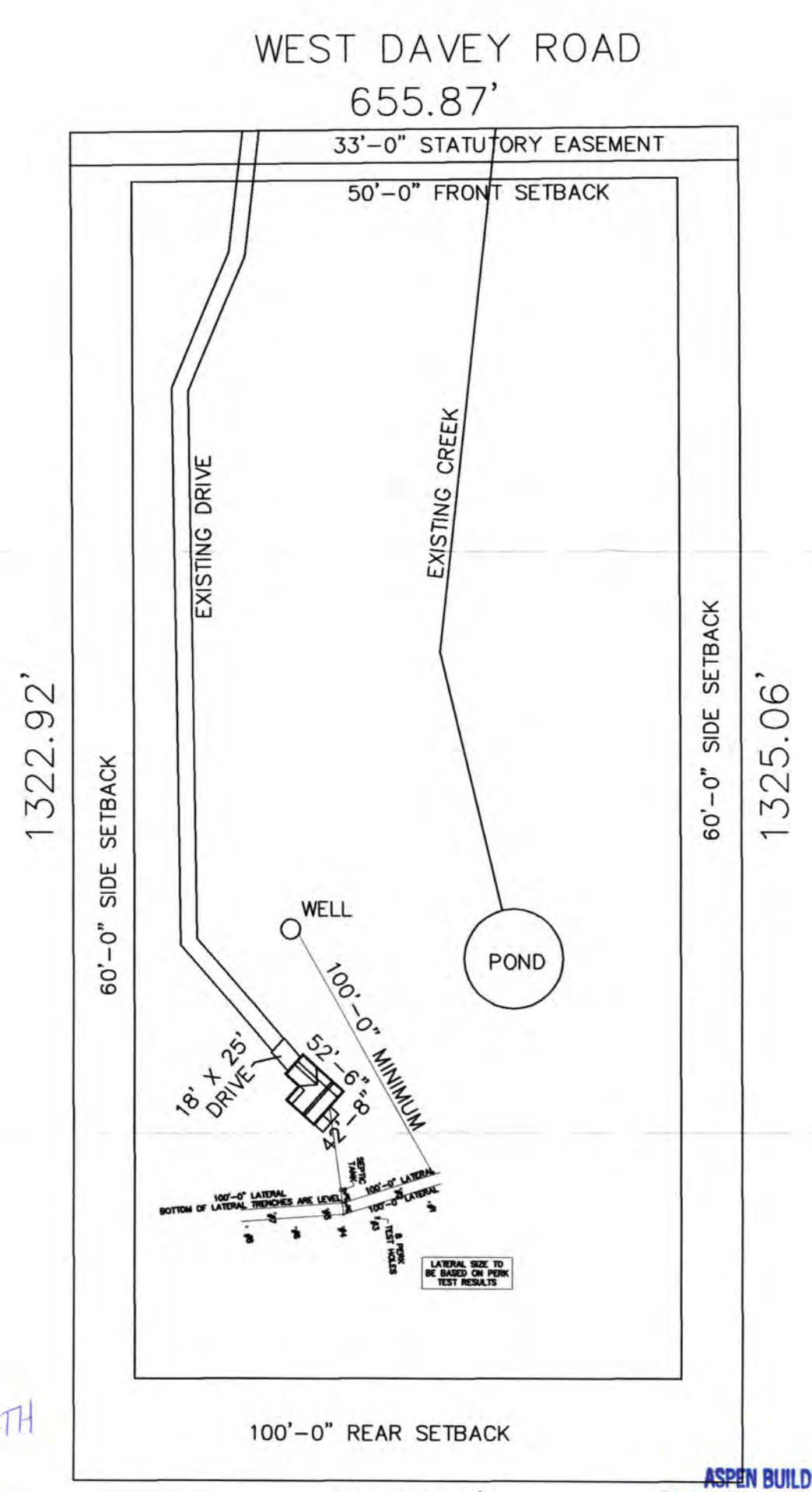
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☐	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Bob Rasmussen Date 9-15-04

Installer Bob Rasmussen Date _____

FORM 23-102 10-96



NORTH

no scale

2225 W. Davey Rd.

ASPEN BUILDERS, INC.
1640 NORMANDY COURT, SUITE A
LINCOLN, NE 68512

MAY 1 0 2005

D

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

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Sewage Disposal System

As Built Plans & Specifications

Date 3-31-05

System Location (Indicate correct number and street)

Address 2225 W. Davey Rd (no rural route) City Davey NE, Zip 68336

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: 21 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 150 ft.
   stream 85 ft.
   pressure line 150 ft.
   property line 500 ft.

B. Septic Tank

1. Material: PVC
   Number of compartments: 1
2. Capacity: 1250 ~~1000~~ gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 12 in.
   Over outlet, diameter 12 in.
   Riser: ☒ above ☐ below grade 5 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 150 ft.
   Pressure line 100 ft.
   Property line ~~500~~ ft.

C. Distribution Box

1. Material: PVC
   Number available outlets: 6
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 17' ft.

D. Absorption Field

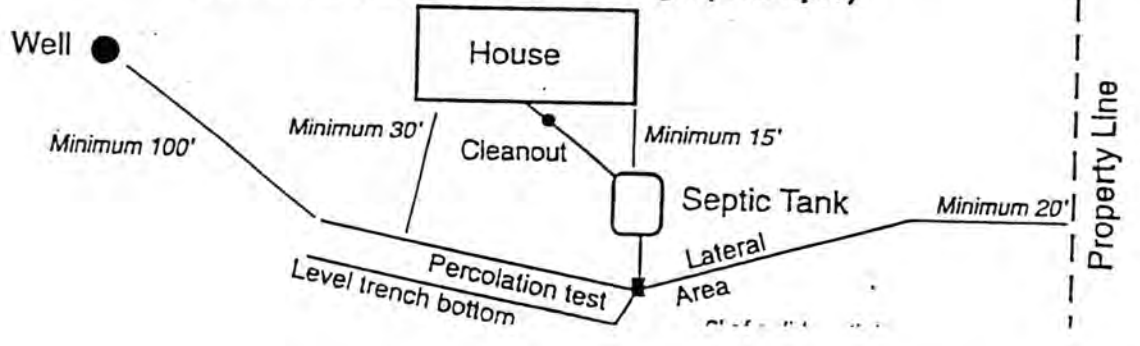
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: ~~10~~ 6
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 150 ft. 166 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope 0 in/100 ft.
   Average depth _____ in
4. Filter material: gravel / Filterless
   Depth of material _____ in.
5. Distances to: Well or suction line 200 ft.
   Stream 100 ft.
   Pressure line 150 ft.
   Property line 600 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

