Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

006196

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 05380296101

Issued 02/02/05
Expires 08/02/05
Revenue Code 3157

Establishment:
ROGER ENGELBART
T10N R5E SEC 5 QTR NE
11255 W FLETCHER AVE

FEES: $200.00

Permittee:
ROGER ENGELBART
1535 SW 32 ST
LINCOLN NE 68522

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

RECEIVED FEB 0 8 2005

A

Permit Number: 053802961O1

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 11255 W FLETCHER Ave (no rural route) City Lincoln NE, Zip 68524

Legal Description NE 5 10N 5E 27 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 Roger Engelbart Signature Roger A Engelbart

Address 1535 SW 32nd St City/State/Zip Lincoln, NE 68522

☐ Check if owner designed system Home Phone 402-643-0504 Work Phone _____

C. Contractor

Name owner 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 Lloyd Jakoubek Firm Raymond Contracting Inc Work Phone 402-890-6009

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 5 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 2/2/05 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
   5-20-05-mm
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 2-3-05 Date frwd 2-3-05 ACTION ☒ Approved ☐ Disapproved Signature Jim Blouzek

Installation Final Written Approval

By Ron Mayfield

Date 5-31-05

Business Office Use Only

Date Rec'd 3/2/05

Amt Paid 200.00

Rec'd By CW Cash/Check No. 9482

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:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

NE 1/4 5-10-5, Lot 27

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 11255 W FLETCHER (no rural route) City Lincoln NE, Zip 68524

Owner Roger Engelbart Address 1535 SW 32nd St Lincoln, NE 68522

Soil Type (SCS): ShB - Shargesburg Percolation Rate: 60 min./inch

Date of Tests 10-19-04 to 10-20-04 Weather: Precipitation 0 Temperature 56°

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	19	10-19	12:00p	10-19	4:00p	10-20	1:00p	6	10-20	4:00p	30	1 5/8	30/1.63 = 18	
2	21	"	"	"	"	"	"	"	"	"	"	2 1/4	30/2.25 = 13	
3	18	"	"	"	"	"	"	"	"	"	"	1/2	30/0.50 = 60	
4	24	"	"	"	"	"	"	"	"	"	"	5/8	30/0.63 48	
(5)	20	"	"	"	"	"	"	"	"	1:30p	30	1/8	30/0.13 = 231	Fails
6	28	"	"	"	"	"	"	"	"	4:00p	"	1/2	30/0.50 = 60	
7	27	"	"	"	"	"	1:25p	"	"	2:25p	10	5/8	10/1.63 = 6	
(8)	21	"	"	"	"	"	"	"	"	1:30p	30	1/16	30/0.06 = 500	Fails

Sum of Percolation Rates: 205 (Holes 1,2,3,4,6,7)
Average of Rates: 34
Rate Used for Calculation: 60 - 20mpi variance

Person Conducting Percolation Tests

Name: Terri Jakoubek, Raymond Contracting, Inc.
Phone: 402-783-2663 or 402-890-3870
Address 13860 NW 70th St
Raymond, NE 68428 # P1198

Holes 5 + 8 had water remaining overnight

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Gerald C. Hood R.E.H.S.

Signature of Reviewing Official

Date

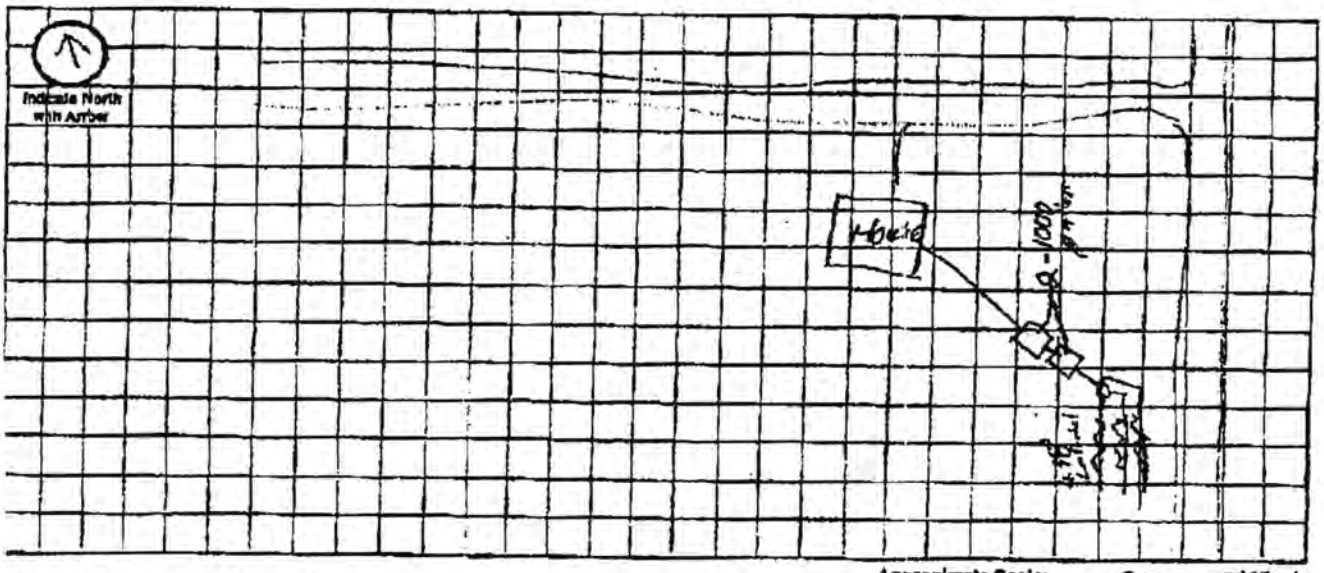
Exhibit C

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

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 lines

A. System Location (indicate correct number and street)

Address (no rural route) 11255 w Fletcher City Lincoln NE, Zip 68524

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: Sharpsburg Land Slope: _____ %

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

Total Square Feet of Field Required: 1250 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: Infiltrator H-10

Capacity of Septic Tank: 2-1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 438 ft. Number of Trenches 3 Trench Width 4'

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

Distance From	Private Well	Public Well	Surface Water	Ground 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 5/4/05

Installer _____ Date 5-4-05

RM 23-102 10-99

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 5/23/05

Engelbart

System Location (Indicate correct number and street)

Address 11255 W Fletcher (no rural route) City Lincoln NE, Zip 68524

A. Building Sewer

1. Material: class 160
   Diameter: 4 in.
2. Distance above basement floor: — in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and septic tank 177 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: 2- concrete
   Number of compartments: one
2. Capacity: 2-1000gallon gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade At Grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18"x14" in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: 2-Boxes Plastic
   Number available outlets: 6
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 13' and 16' ft.

D. Absorption Field

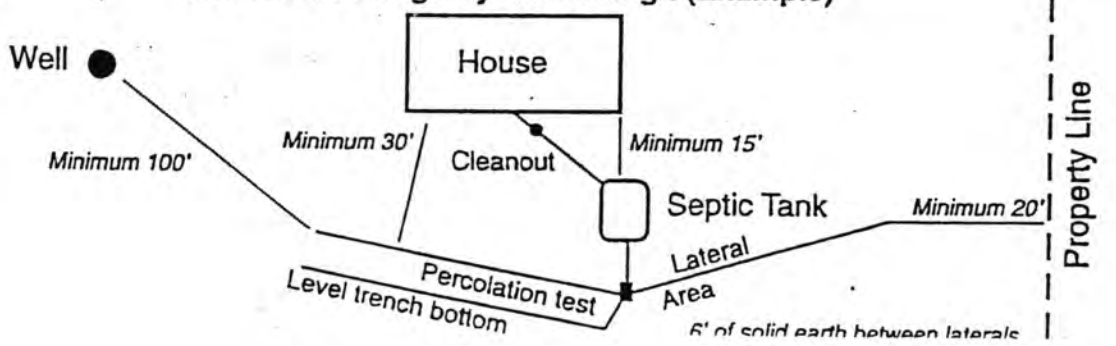
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 34" wide 12 Tall
   or perforated pipe:
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 3
   Length of each line: 150 ft. 150 ft.
   138 ft. ft., ft.
3. Trench dimensions: Width 3' ft.
   Slope FLAT' in/100 ft.
   Average depth 24 in
4. Filter material: Dirt
   Depth of material 24 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ 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

MAY 2 6 2005

