LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit No. 97380166801

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 10/02/97
Expires 04/02/98
Revenue Code 18754

Establishment

SCOTT MCINTRYE
T12N R6E SEC 30
16700 NW 48 STREET

FEES: $150.00

Permittee

SCOTT MCINTRYE
16700 NW 48 ST
RAYMOND NE 68428

TOTAL $150.00

5289

Issued By M. Jane Ford
Health Director

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:

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 16700 NW 48th St. (no rural route) City Raymond NE, Zip 68428

Legal Description North 1/2 of SW 1/4 of SE 1/4 Section 30 T12N R06E
(1/4 1/4 Section Township Range Subdivision Addition Block Lot)

Geographical Location (if known): Longitude 96° 46' 57" W Latitude 40° 58' 32" N

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

B. Owner

Name Scott McIntyre Signature Scott McIntyre

Address 16700 NW 48th St. City/State/Zip Raymond NE 68428

☐ Check if owner designed system Home Phone 783-9069 Work Phone 471-2668

C. Contractor

Name Tom Kloser Company Name EXC. INC

Address 6667 NW 48th City/State/Zip LNK NE 68524

☑ Check if contractor designed system Work Phone 470 3100

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 2 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 9/22/97 Date frwd 9/22/97 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 10/1/97 Date frwd 10/1/97 ACTION ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 09/22/97 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____

10-10-97 mm

Installation Final Written Approval

By Ron Maynard

Date 10-20-97

Business Office Use Only 3142

Date Rec'd 9/22/97

Amt Paid 150 ck

Rec'd By LS Cash/Check No. 3970

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:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 16700 NW 48th St. (no rural route) City Raymond NE, Zip 68428

Owner Scott McIntyre Addresss 16700 NW 48th St., Raymond NE 68428

Soil Type (SCS): Shelby clay loam (SMD) at transition to Dickinson sandy loam Percolation Rate: average 34 min./inch

Date of Tests 4-25-97 to 4-26-97 Weather: Precipitation some drizzle, not measurable Temperature 55°-60° F

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	37	4-25-97	11:25	4-25-97	19:41	4-26-97	15:13	26 5/8	4/26/97	15:44	31	7/8	31÷0.875=35.4
2	36		11:26		19:42		15:13	26 1/8		15:45	32	7/8	36.6
3	36		11:27		19:43		15:14	27		15:45	31	1 1/8	27.6
4	37		11:29		19:43		15:14	29 1/2		15:46	32	1 1/4	25.6
5	37		11:32		19:44		15:15	30 1/4		15:48	33	7/8	37.7
6	36		11:33		19:45		15:15	27 1/4		15:49	34	7/8	38.9
												range:	38.9-25.6=13.3

Person Conducting Percolation Tests

Name: Scott McIntyre
Phone: home 783-9069 work 471-2668
Address 16700 NW 48th St.
Raymond NE 68428

Sum of Percolation Rates: 201.8
Average of Rates: 33.6
Rate Used for Calculation: 34

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

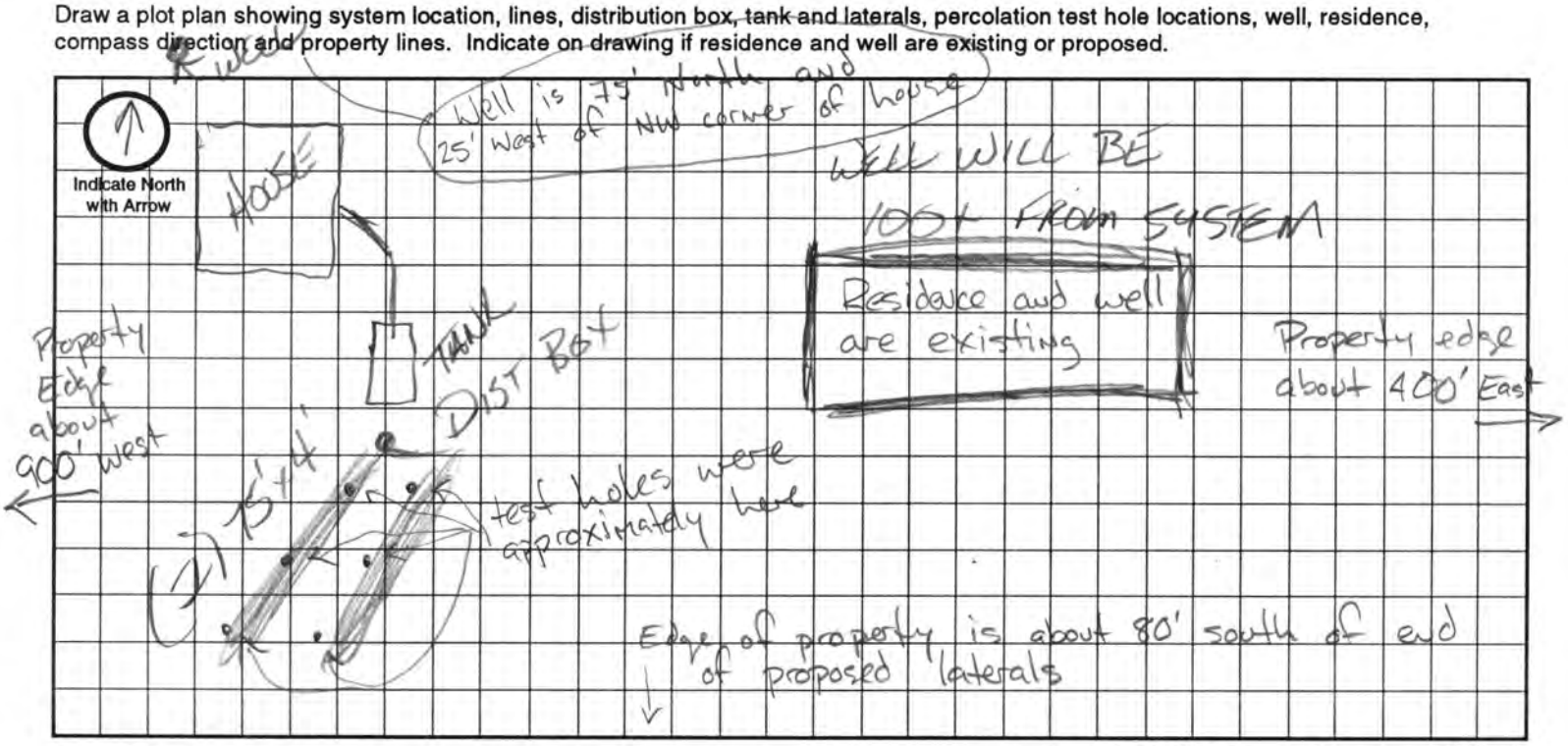
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) 16700 NW 48TH 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 34 (min. per inch) Soil Type: Shelby loam / Dickinson loam Land Slope: 1' drop in 15' %

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

Total Square Feet of Field Required: 532 sq. ft. ← from phone call to Jerry Hood, 9-16-97

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: — Number of Distribution Laterals per Bed —

Total Length of Laterals 150 ft. Number of Trenches 2 Trench Width 4

Area = 150'x4' = 600 sq. ft.

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 Scott McIntyre Date 9/17/97

Installer Stan Reese EXC. INC Date 9/17/97

FORM 23-102 10-96

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

D

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date 10-10-97

System Location (Indicate correct number and street)

Address _____ City _____ NE, Zip _____
(no rural route)

A. Building Sewer

1. Material: Plastic class 160
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below ~~basement~~ floor: 18 in.
3. Distance between dwelling and septic tank: 27 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100+ ft.
   stream none ft.
   pressure line none ft.
   property line 100+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter none in.
   Over outlet, diameter none in.
   Riser: ☐ above ☐ below grade none in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 4 in.
8. Distances to: Well or suction line 100+ ft.
   Stream none ft.
   Pressure line none ft.
   Property line 100+ ft.

C. Distribution Box

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

D. Absorption Field

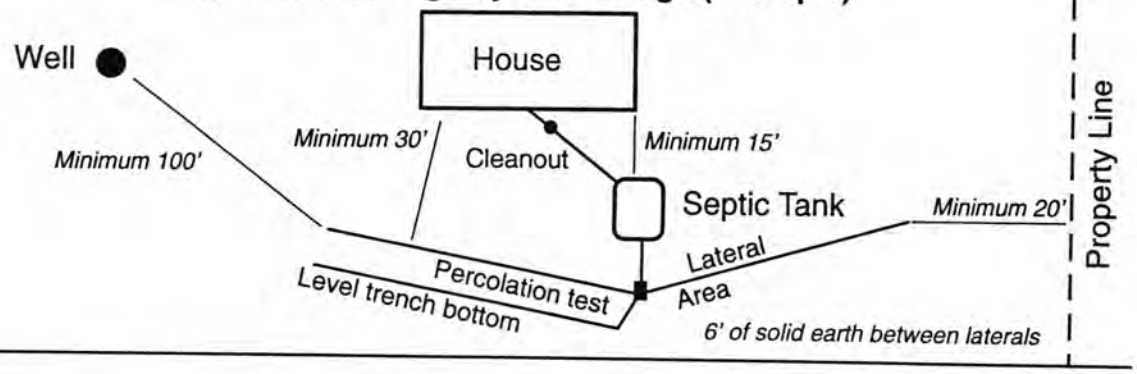
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: infiltrators
   or perforated pipe: _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 94 ft. 59 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 1" in/100 ft.
   Average depth 20 in
4. Filter material: gravel
   Depth of material 16 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

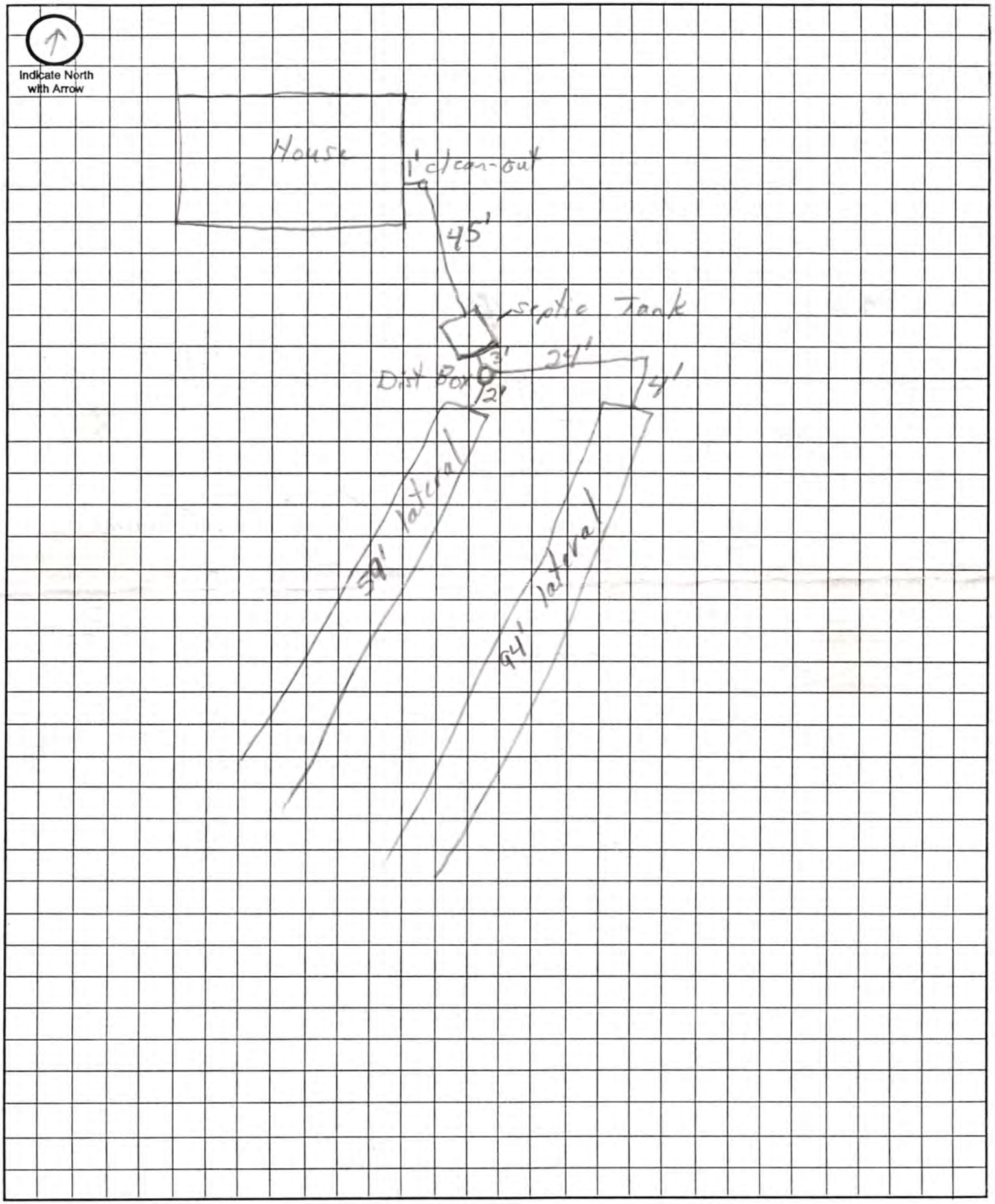
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)

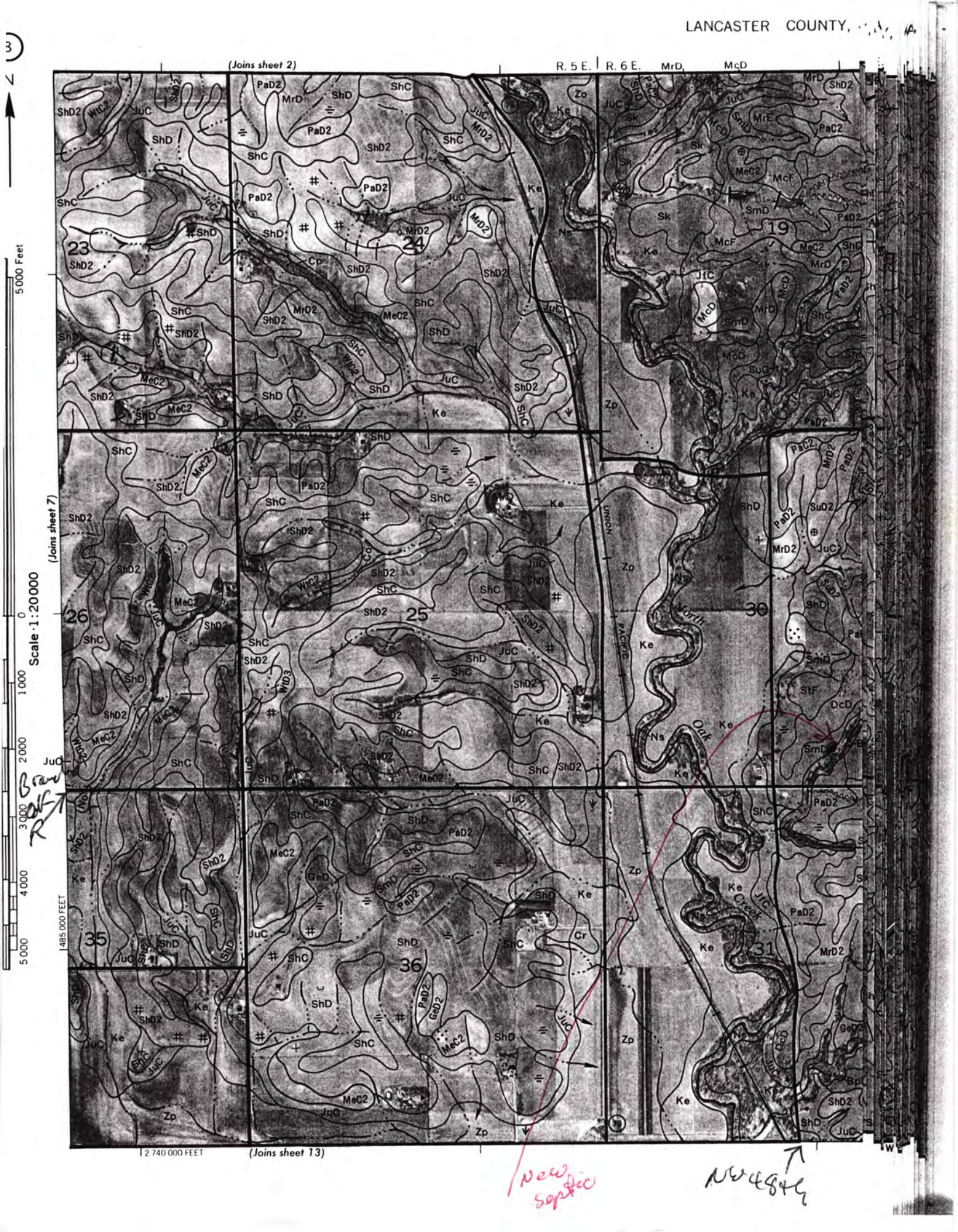


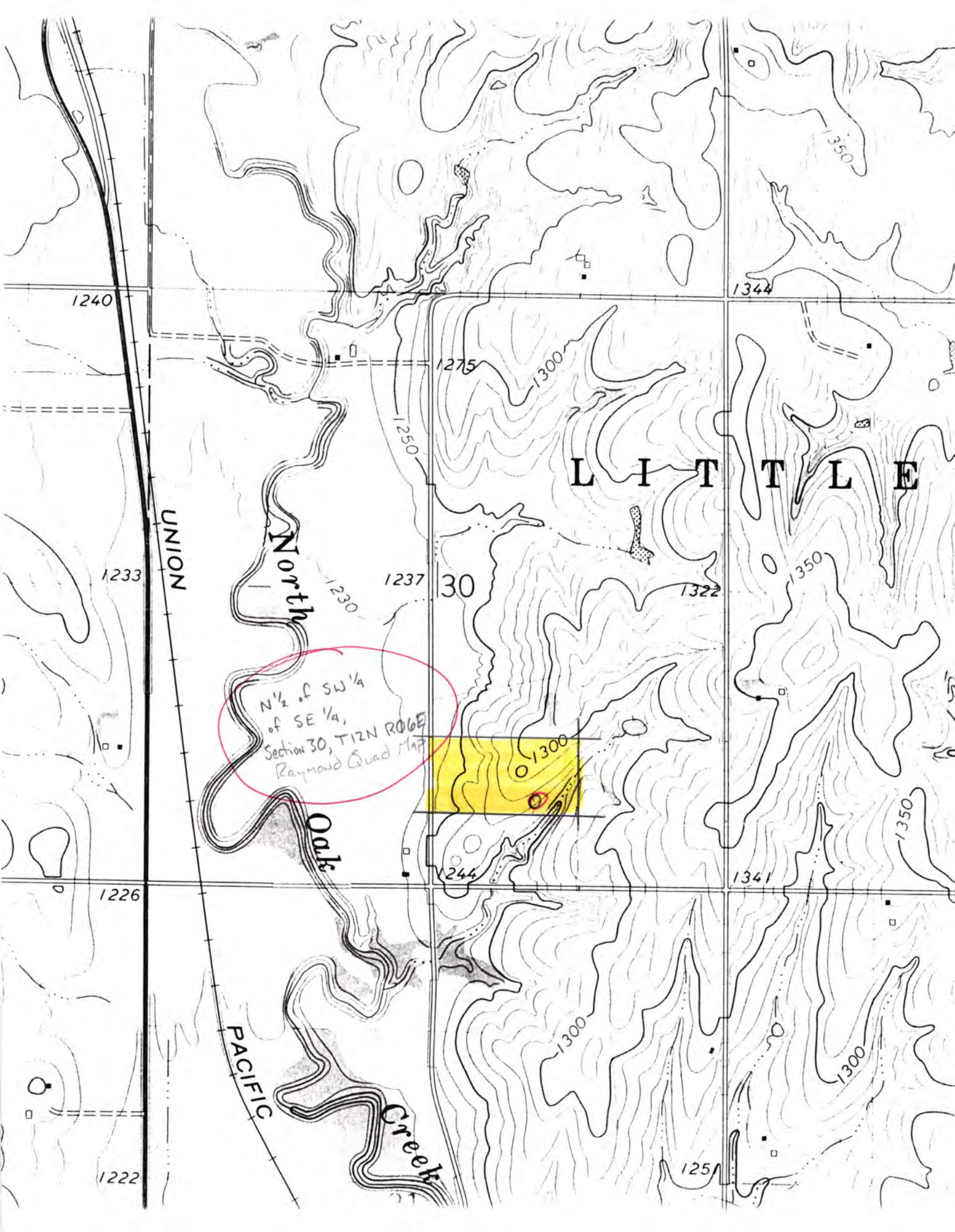
FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s


(Joins sheet 2)
R. 5 E.
R. 6 E.
(Joins sheet 7)
(Joins sheet 13)
Scale 1:20000
5000 Feet
2 740 000 FEET
485 000 FEET
23
24
25
26
30
31
35
36
19
Ke
Zp
ShD2
ShC
PaD2
MrD
MeC2
JuC
Ns
Oak
Creek
New septic
NW48Pt


1240
1275
1300
1250
1344
350
L I T T L E
UNION
North
1233
1230
1237
30
1322
1350
N½ of SW¼
of SE¼,
Section 30, T12N R06E
Raymond Quad Map
1300
Oak
1244
1341
1226
1350
PACIFIC
1300
1300
Creek
1222
125


McD
MrD
SmD
ShC
ShD2
PaD2
McD
Sk
SuG
Ke
Zp
Ns
JuC
MrD
BpF
PaC2
MrD2
MeC2
SuD2
ShD
Br
30
UNION
North
PACIFIC
StF
DcD
Oak
Creek
JfC
BrD
GeD2