LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION
LAGOON

No. 97380160701

Issued 06/30/97
Expires 12/30/97
Revenue Code 18754

Establishment

JOHN BROOKS
T12N R6E SEC 30
LOT 23
17501 NW 40 STREET

FEES: $150.00

TOTAL $150.00

Permittee

JOHN BROOKS
4751 O ST
LINCOLN NE 68510

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"

4933

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 17501 NW 40th St. City Raymond NE, Zip 68428
(no rural route)
Parcel ID
Legal Description 13-30-200-007-000 Lot 23 NE 30-12-6
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 John + Mary Brooks Signature John W. Brooks
Address 4751 "O" St City/State/Zip Lincoln, NE 68510
☒ Check if owner designed system Home Phone 781-2776 Work Phone 488-2900

C. Contractor

Name John + Mary Brooks Company Name B K + B, Inc
Address 4751 "O" St City/State/Zip Lincoln, NE 68510
☐ Check if contractor designed system Work Phone 488-2900

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

Designer Name John Brooks Firm Contractor Work Phone 488-2900

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 200 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 6-17-97 Date frwd 6/19/97 **ACTION** ☑ Approved ☐ Disapproved Signature Jon Bare
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 6/19/97 Date frwd 6/19/97 **ACTION** ☑ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 6-19-97 Date frwd 6-19-97 **ACTION** ☑ Approved ☐ Disapproved Signature Jim Blaylock

2-2-98, Need fence.

Installation Final Written Approval

By Paul Hamann
Date 3-6-00

Business Office Use Only 3237
Date Rec'd 06/17/97
Amt Paid 150 ck
Rec'd By _____ ~~Cash~~/Check No. 4003

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

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 17501 NW 40th St (no rural route) City Raymond, NE, Zip 68428

Owner John + Mary Brooks Addresss 4751 "O" St Lincoln, NE 68510

Soil Type (SCS): Clay Percolation Rate: .054 min./inch

Date of Tests May 4-97 to May 5-97 Weather: Precipitation None Temperature 85°

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"		1:30 pm		5:30		5:30	6"		6:00		6"	0
2	36"		1:30 pm		5:30		5:30	6"		6:00		5 7/8"	1/8"
3	36"		1:30 pm		5:30		5:30	6"		6:00		6"	0
4	36"		1:30 pm		5:30		5:30	6"		6:00		6"	0
5	36"		1:30 pm		5:30		5:30	6"		6:00		5 3/4"	1/4"
6	36"		1:30 pm		5:30		5:30	6"		6:00		6"	0"

Person Conducting Percolation Tests

Name: John W. Brooks
Phone: 488-2900
Address 4751 "O" St
Lincoln, NE 68510

Sum of Percolation Rates: 3/8"
Average of Rates: .054"
Rate Used for Calculation:

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Percolation TEST FAILED - Lagoon to be installed

Signature of Reviewing Official John Bair Date 6-18-97

FORM 23-101 10-96

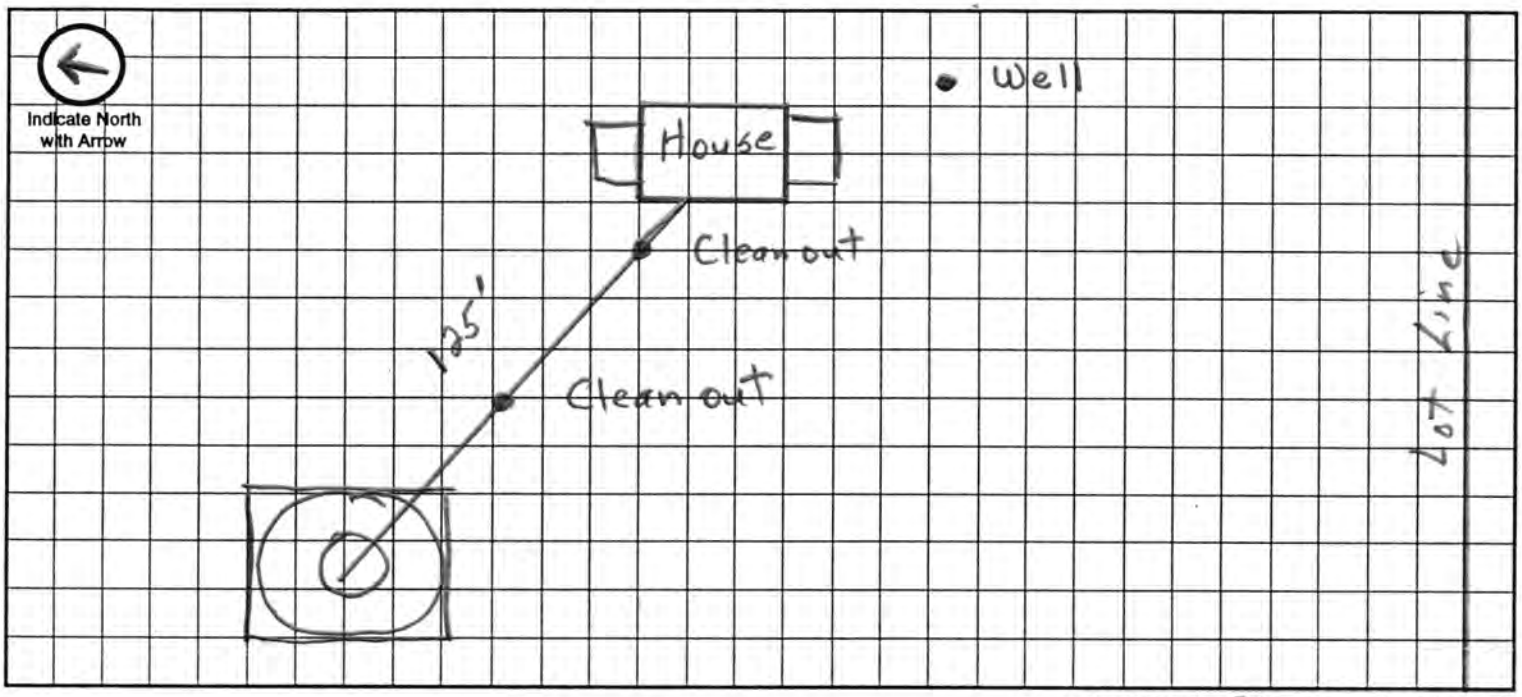
Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 17501 NW 40th St. City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☒ Other Stabilization Pond

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

Percolation Rate .054 (min. per inch) Soil Type: Clay 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 John W. Brooks Date 6-17-97

Installer _____ Date _____

Lincoln-Lancaster County Health Department
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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address 17501 NW 40TH (no rural route) City RAYMOND NE, Zip _____

A. Building Sewer

1. Material: 2241
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and ~~septic tank~~ LAGOON: 140 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: _____
   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

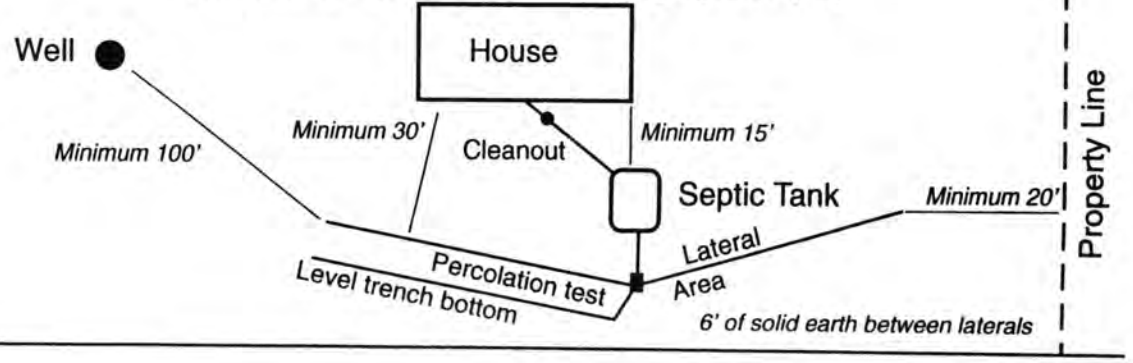
(Provide as-built drawings on back of this form)

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)

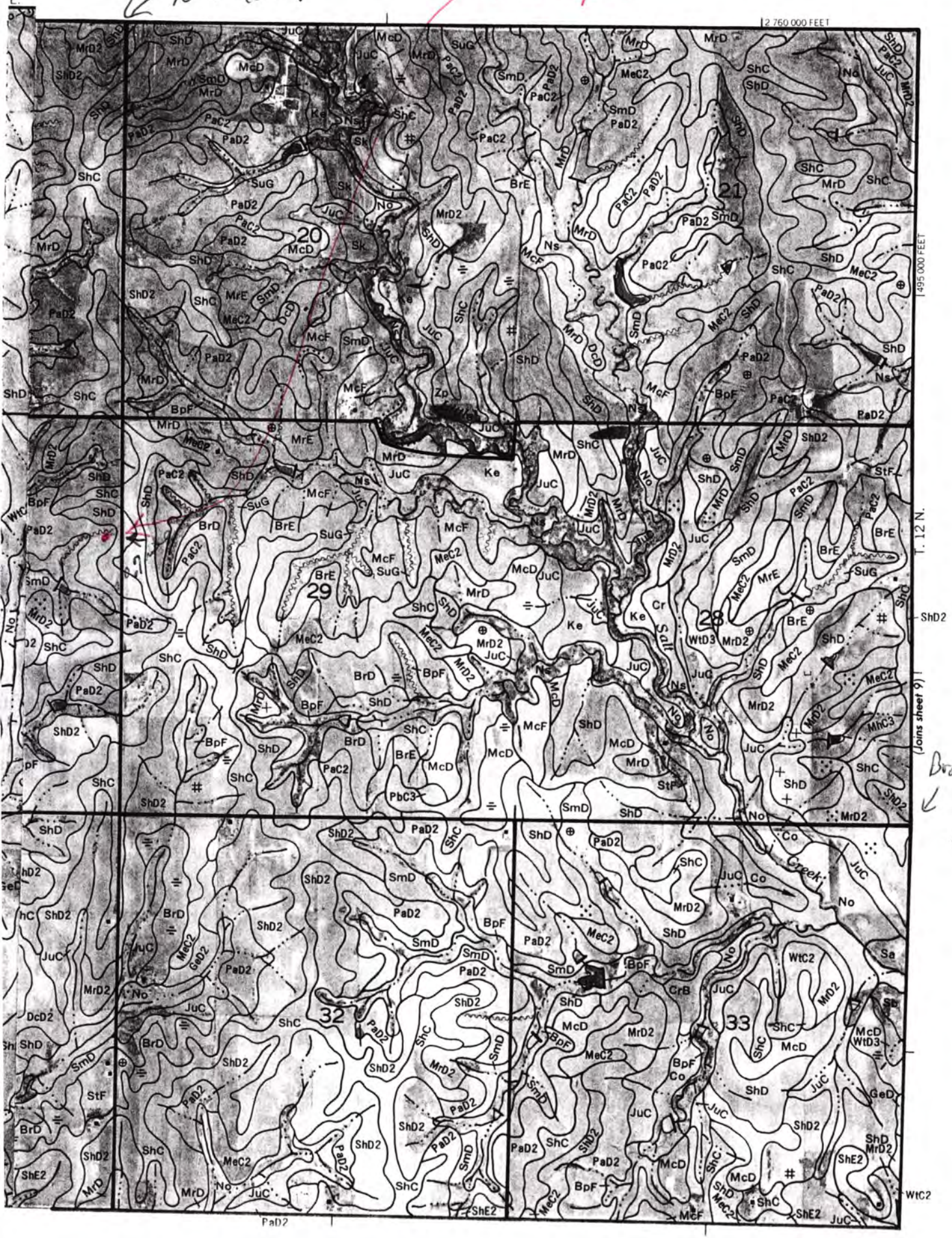


STREAM
70+'
LAGOON
CLEAN OUT
70'
70'
HOUSE
CLEAN OUT

- NEBRASKA — SHEET NUMBER 8

NW 40th

New lagoon



Branched Oak Rd