Application to Alter, Extend or Repair an Individual Sewage Disposal System

☒ Municipal Code 24.38 ☐ County Resolution Number 2832

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☐ **REPAIR** an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. **Legal description of property:**
   Township 10 N Range 5E Section 10 1/4 Section SE
   Block ____ Lot 26 E.T. Addition ____
   Parcel ID 04 - 10 - 400 - 004 - 000 (i.e. 99-99-999-999-999)
   Street Address 3601 NW 84th St Lincoln, NE 68524

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

3. **Type of Present Individual Disposal System** ☒ septic tank ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** add riser on tank, install new distribution box with riser, add 100' of lateral

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jakoubek, Raymond Contracting

6. **Estimated project:**
   a. Repair, replace or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A "construction permit" is required if the use, operation, location, or type of the system is being change.

Print Name Rick Mc Clung Address 3601 NW 84th St Lincln, NE Phone 402-470-2700
Applicant Signature (owner or lessee) Richard L McClung

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 5/31/05 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 6/2/05 By ____
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 6/2/05 By ____

Return application to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only
Received: Date: 6/1/05 Amount 100.00 Check No. 5769 Initials ____

White - Division Copy Pink - Business Office Revised 9/00

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 5/27/05

McClung

System Location (Indicate correct number and street)

Address 3601 NW 84Th. ST. (no rural route) City Lincoln NE, Zip 68524

A. Building Sewer

1. Material: old sewer
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Old Tank
   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: old Box
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

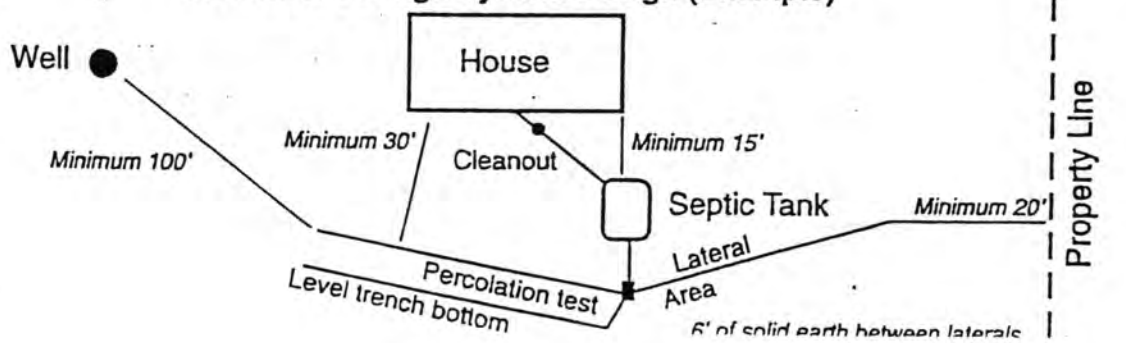
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☒ Perforated pipe
   Diameter of half round: H-10 New
   or perforated pipe: _____
   Material: ☑ fiberglass ☐ plastic ☐ concrete
   ☐ other Add 100'
2. Lateral lines: Number 4
   Length of each line: 100' old ft. 100' old ft.
   100' old ft. 100 New ft., _____ ft.
3. Trench dimensions: Width 3' ft.
   Slope FLAT in/100 ft.
   Average depth 27" in
4. Filter material: Dirt
   Depth of material 27" in.
5. Distances to: Well or suction line 100 ft.
   Stream 100 ft.
   Pressure line 100 ft.
   Property line 504 ft.

Indicate North with Arrow

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

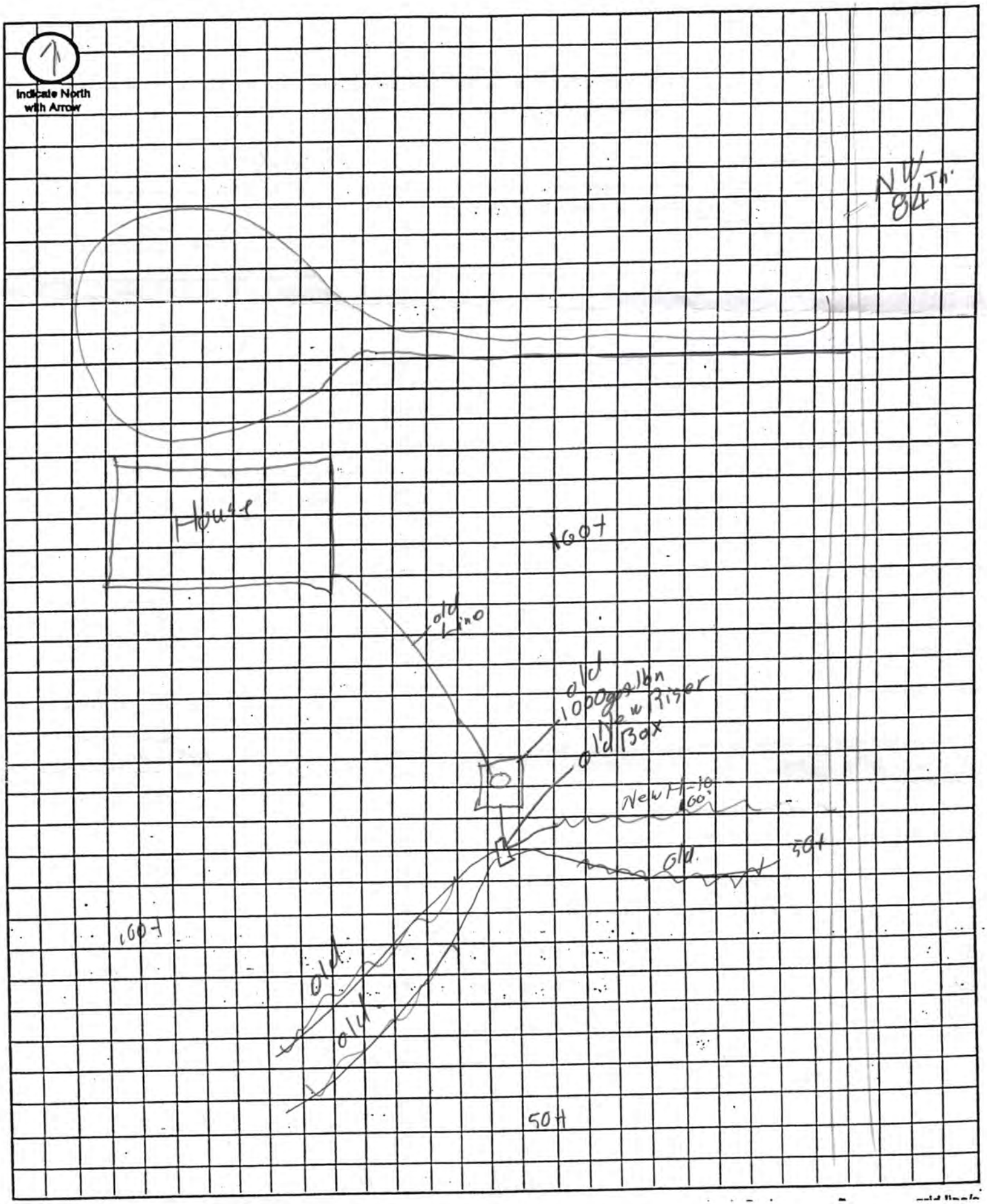
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

MAY 3 1 2005



FILE #2028

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

FEBRUARY 16, 1984 — THIS LICENSE OR PERMIT EXPIRES

RICHARD L. MC CLUNG — LICENSEE OR PERMITTEE

301 GROVELAND — ADDRESS

LINCOLN, NE 68521

T10N; R5E; Sec. 10 SE¼; 3601 NW 84 — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NONTRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	LICENSE	TOTAL
$ 60.00	$	$	$	$ 60.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
019815	XXXXX 10.16	XXXXXX 148.14	XXXX 62

SERIAL NO.	DATE	AMOUNT
65376 NO25	83	60.00 -

VALID RECEIPT ONLY IF MACHINE RECEIPTED IN THIS SPACE

APPLICATION
HEALTH

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

A

FILING FEE: $ 60 ⁰⁰

FILE NO. 2028

DATE: 8-8-83

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. T 10 N; Range R 5 E; Section 10 SE¼;
   Block _____: Lot H.T.: Addition _____
   Street Address 3601 NW 84TH

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3. Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: — ft.

X Richard L McClung
Signature of Applicant (Owner or Lessee)

X 301 Groveland,
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/15/83. Date Frwd. 8/15/83. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 8-25-83. Date Frwd. 8-25-83. ACTION: Approved ☒ Disapproved ☐ Signature: Paul Bowers

3. City ~~or County~~ Engineer: Date Rec'd. 8-16-83 Date Frwd. 8-16-83 ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL NEED WELL PERMIT

Site Visits:
Date: 8-11-83 by: pm
Date: 9/27/84 by: J.C.H.
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/1/84 By: Jerrold C. Hood

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

B

FILE NO. 2028

PROPERTY WHERE SOIL TESTED:

Location: Township T10N ; Range R5E ; Section & ¼ Section SE ¼.
Property Dimensions: _____ ft. x _____ ft. Area: 10.5 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒.
Dates of Tests: 8-12-80 to 8-13-80. Weather: Precip. 0 Temp. 98°/70°

OWNER: Rick McClung
Address: 301 Groveland Lincoln, Ne 68521

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	24"	8-12	7:30	8-13	7:00	8-13	7:00	10"	11:00	7	60	3	3
2			P.M.		P.M.		P.M.		P.M.	9½		½	½
3										8¾		1¼	1¼
4										9¾		¼	¼
5										9¾		¼	¼
6										9¾		¼	¼
7										6		4	4
8										8¼		1¾	1¾

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Paul von Gillern
Signature of Person Conducting Test

Address 3308 N Cotner Blvd Phone 467-4792

220' Lateral Half Round (Do not write below this line)

REVIEWING ACTION

3 hour Telephone call to Jerry Hood 8-14-80
Remarks: _____

Soil Type (SCS): _____

Date: August 15, 1983

Approved Percolation Rate (a)
A. 22 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

Need 880 sq ft

220' of 4' wide

293.3' of 3' wide

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

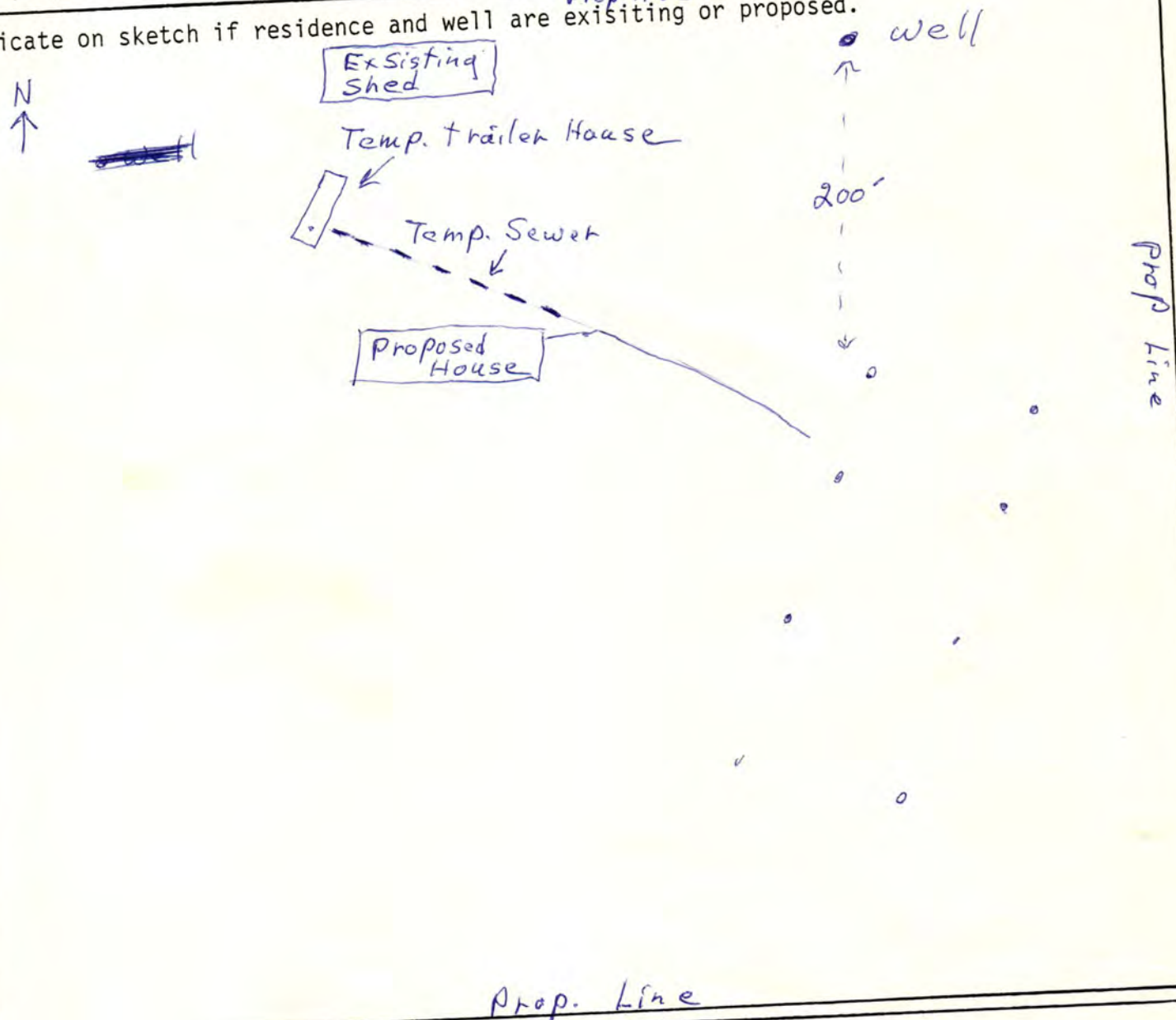
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 2028

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: AUGUST 15, 1983

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 218 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 653 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: 8-11-83

FILE NO. 2028

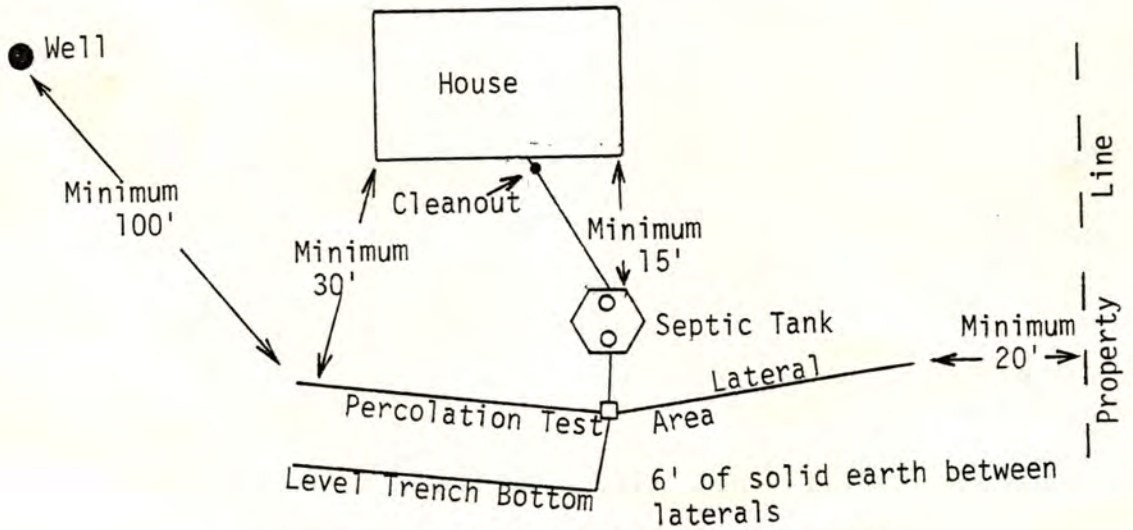
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 3034; Diameter 4" in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank _____ ft.
4. Number of clean-outs 3.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Pre Cast; No. of compartments _____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade _____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 12" in.
8. Distances to:
Well or Suction Line 200' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Pre Cast; Number - available outlets 5.
2. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
3. Distance from Septic Tank 5' 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 4" .
Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 3 ; Length of each line 100, 100, 100, _____, _____ ft.;
Total length of laterals 300' ft.;
Distance between lateral lines 10' ft.
3. Trench dimensions: Width 3' ft.; Slope 13 in/100 ft.; Average Depth 28" in.
4. Filter Material: Road Gravel
Depth of Material 16" in.
5. Distances to:
Well or Suction Line 205' ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

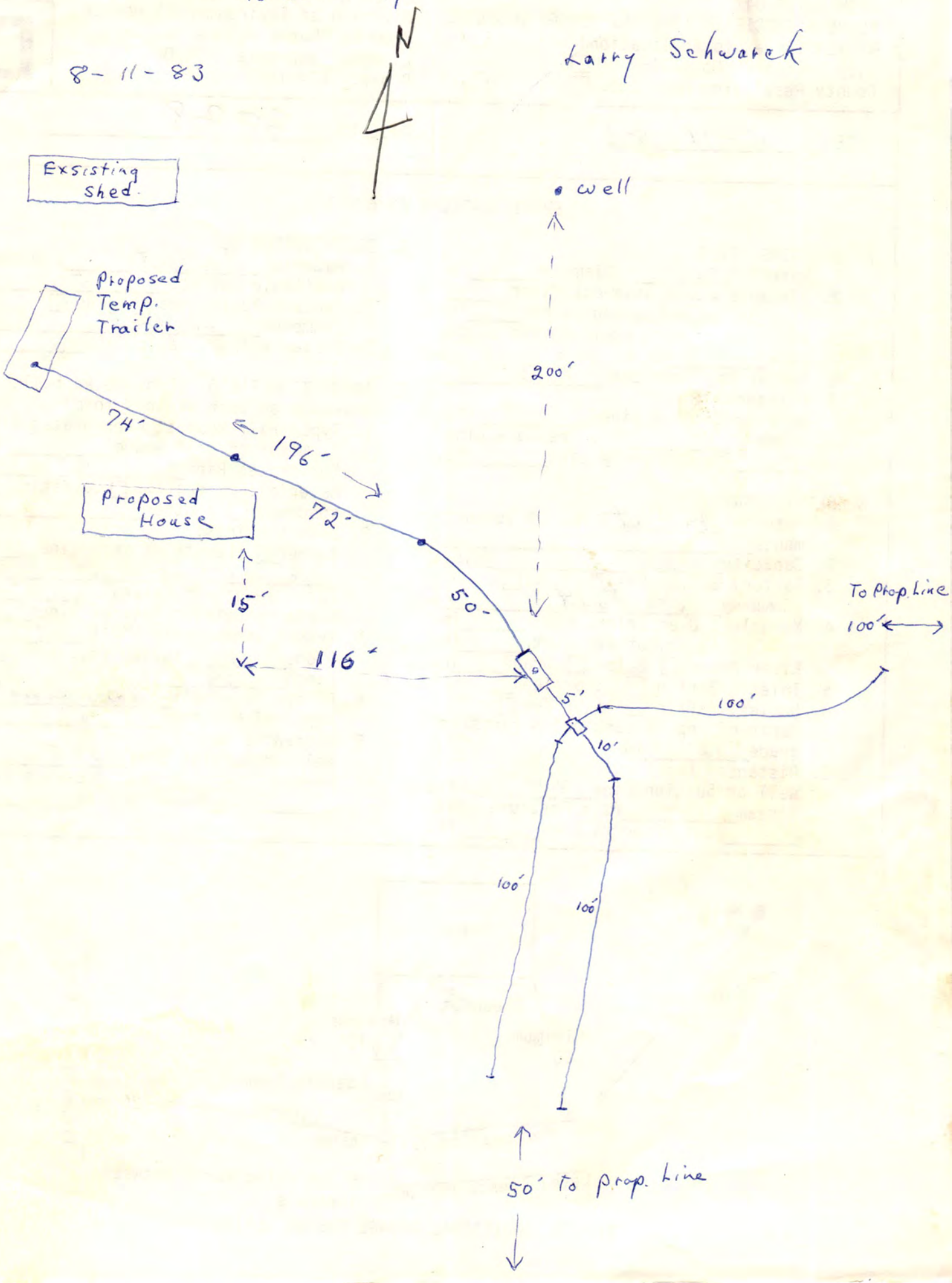


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

As Built By

8-11-83

Larry Schwarck



REC'D OCT 1 1984

AS BUILT DRAWING OF SYSTEM

DATE 9-27-84 INSTALLER Larry Schwarck

As Built By

Tied in to sewer that was installed in 1983

