Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008501

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment:
ASPEN BUILDERS
T12N R6E SEC 16
EAST 1/2 LOT 6
W AGNEW RD-RAYMOND

Permittee:
ASPEN BUILDERS
1640 NORMANDY CT
APT A
LINCOLN NE 68512

Permit # 05380313201

Issued 11/14/05
Expires 11/14/06
Revenue Code 3157

FEES: $275.00

TOTAL: $275.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

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

A

Permit Number: 05380313201

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 NW 22nd (no rural route) W. Agnew Rd. City Raymond NE, Zip 68428

Legal Description E 1/2 NW 1/4 16 (1/4 / 1/4 Section) 12N (Township) 6E (Range) Subdivision Addition Block Lot I.T.

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 Signature _____

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

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

C. Contractor

Name Bob Benes Company Name Aspen Builders Inc.

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

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

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 3 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 11/14/05 Date frwd 11/17/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Wood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 11/17/05 Date frwd 11/17/05 ACTION ☒ Approved ☐ Disapproved Signature _____
   NEED BUILDING PERMITS.
3. **City or County Engineer** Date rec'd 11-17-05 Date frwd 11-17-05 ACTION ☒ Approved ☐ Disapproved Signature _____
   Sine tank, lateral 2/10/06

Installation Final Written Approval

By Doug Arnold

Date 2/13/06

Business Office Use Only

Date Rec'd 11/16/05

Amt Paid 200.00 + 75.00

Rec'd By _____ Cash/Check No. 11378 + 11381

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: 053803132

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address W. Agnew Rd. (no rural route) City Raymond NE, Zip 68428

Owner _____ Addresss _____

Soil Type (SCS): _____ Percolation Rate: 23 min./inch

Date of Tests 11-3 to 11-4 Weather: Precipitation Day Temperature 65°

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	11-3	2 pm	11-4	2 pm	11-4	2:10	23	11-4	2:40	30	1 1/2"	20
2	36						2:12	18"		2:42		2"	15
3	36						2:14	29"		2:44		3/4"	40
4	36						2:16	27"		2:46		1"	30
5	36						2:18	21"		2:48		1 3/4"	17
6	36		2:10				2:20	28"		2:50		1 3/4	17
7	36		2:15				2:22	26"		2:52		2 1/4	13

Sum of Percolation Rates: 162
Average of Rates: 23
Rate Used for Calculation: 40

Person Conducting Percolation Tests

Name: Bob Banes Dennis Hasheimer
Phone: 423-6811
Address 1640 Normandy Dr.
Lincoln NE 68512

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

Lincoln-Lancaster County Health Department
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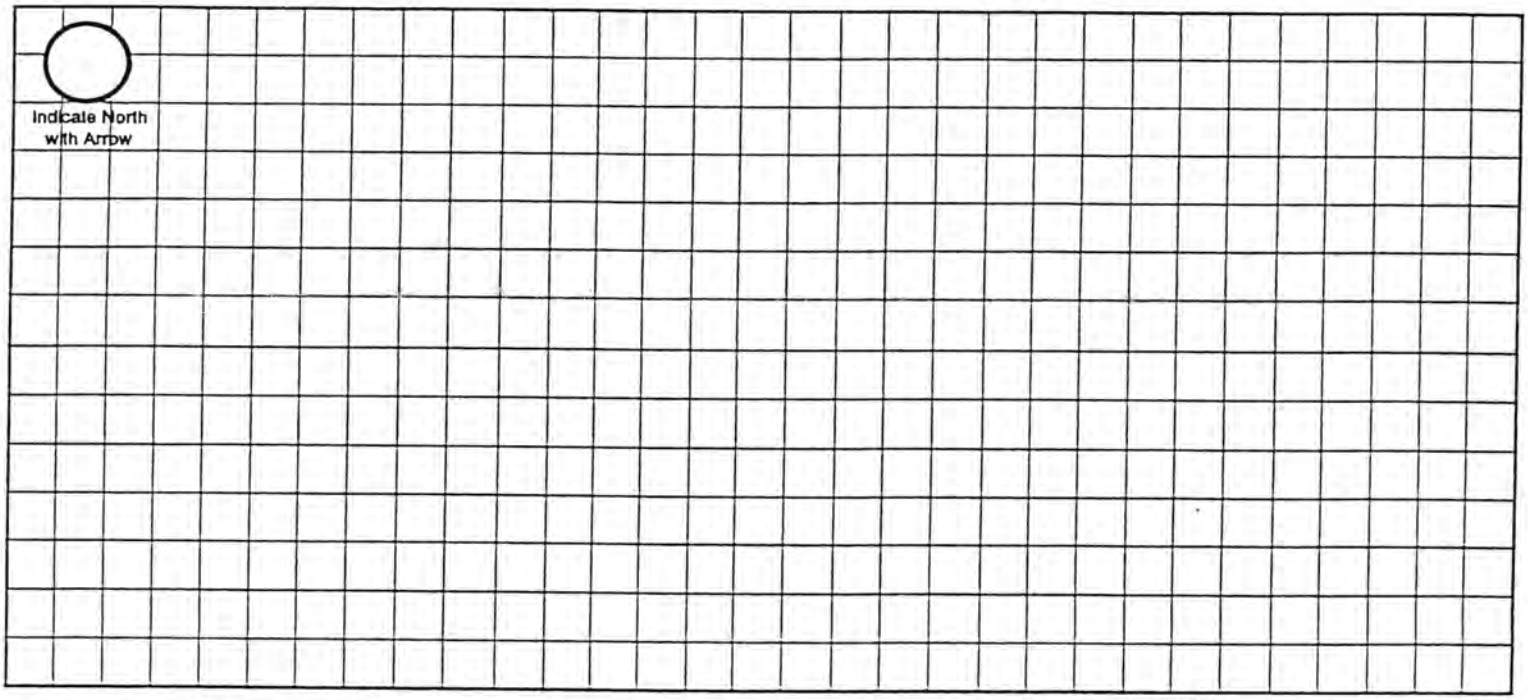
C

Permit Number: 053803132

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) W Agnew Rd. 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 40 (min. per inch) Soil Type: _____ Land Slope: _____ %

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

Total Square Feet of Field Required: 825 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: gravelless chamber

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

Total Length of Laterals 184 ft. Number of Trenches 2 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 _____ Date 11-6-05

Installer _____ Date _____

FORM 23-102 10-96

TITLE 124 – NEBRASKA DEPARTMENT OF ENVIRONMENTAL QUALITY

Appendix D

COPY

Onsite System Registration Form G

NDEQ Use Only
REG # _____
Fee Rcvd? ____

Existing System Registration #_____ **(if previously registered)**

(Please type or print) (Must be filed within 45 days of inspection or completion of work)

System Location and Ownership:

Owner's Last Name	First Name	Middle Init	Owner's Phone number
Thomsen	Steve & Patty		402-438-3224

Owner's Mailing Address	City	State	Zip code
20701 NW 22ND St.	Lincoln	NE	

System Location Physical Address (if different than owner's)	Nearest Community
	Raymond/Valparaiso

System Location Legal Description:

1/4	1/4	Section #	Twnshp	Range	County	Latitude	Longitude
Lot 1 Mustang Ridge	Block 3	Addition			Lancaster		

System Information

System is for: ☒ Dwelling with 3 bedrooms, or ☐ Establishment with _____ gal/day flow

Septic Tank / Soil Absorption System	Lagoon System
Rated Tank Capacity = 1250 gallons	Water Surface Area = _____ sq. ft.
Total effective trench bottom area = 618.75 sq. ft.	Tested seepage rate = _____ in/day
Number of Trenches = 2	**Other Type System**
Total Trench Length = 208 ft.	NDEQ Construction Permit#_____
Design Percolation Rate = 40 min/inch	

Certified professional registering the system:

Last Name	First Name	Middle Initial	Professional Certificate #
Beres	Robert	L	1093

Signature of Certified Professional	Date of inspection or completion of work
	2-12-06

A fee of fifty dollars ($50) must accompany this application, unless;

1. the system was previously registered by an Inspector following an inspection,
2. the system is being registered again by an Installer upon completion of construction, reconstruction, alteration, or modification that resulted from that inspection, and
3. the construction, reconstruction, alteration, or modification was completed within one-hundred twenty (120) days of the date of the original inspection.

Make checks payable to the **Nebraska Department of Environmental Quality.** Mail to NDEQ P.O. Box 98922 Lincoln Nebraska 68509-8922

Lincoln-Lancaster County Health Department
Environmental Health Division
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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 12-6-16

System Location (Indicate correct number and street)

Address 20701 NW 22ND St. (no rural route) City Lincoln NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 8" in.
3. Distance between dwelling and septic tank: 32 ft.
4. Number of clean-outs: 0
5. Distances to: well or suction line 300 ft.
   stream — ft.
   pressure line 100 ft.
   property line 500 ft.

B. Septic Tank

1. Material: PVC
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24" in.
   Over outlet, diameter 24" in.
   Riser: ☒ above ☐ below grade 4 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line 300 ft.
   Stream — ft.
   Pressure line 100 ft.
   Property line 500 ft.

C. Distribution Box

1. Material: PVC
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 15' ft.

D. Absorption Field

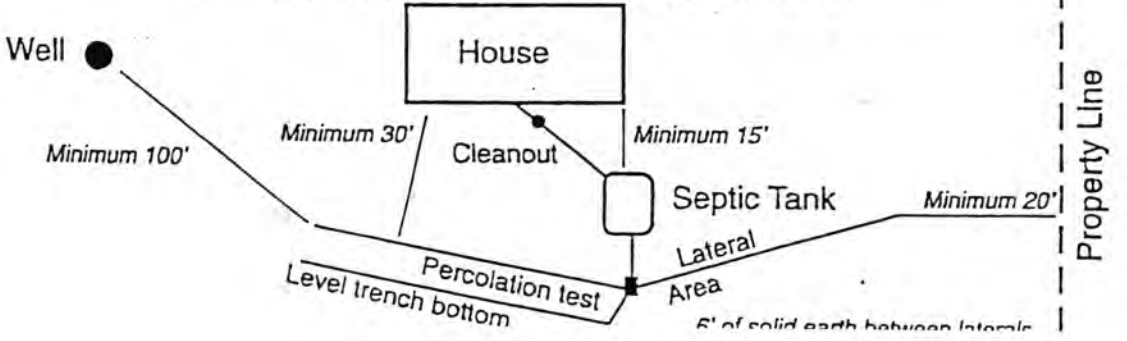
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Chamber H-10's
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 105 ft. 104 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 0 in/100 ft.
   Average depth 30" in
4. Filter material: —
   Depth of material _____ in.
5. Distances to: Well or suction line 1000 ft.
   Stream 600 ft.
   Pressure line 200 ft.
   Property line 50 ft.

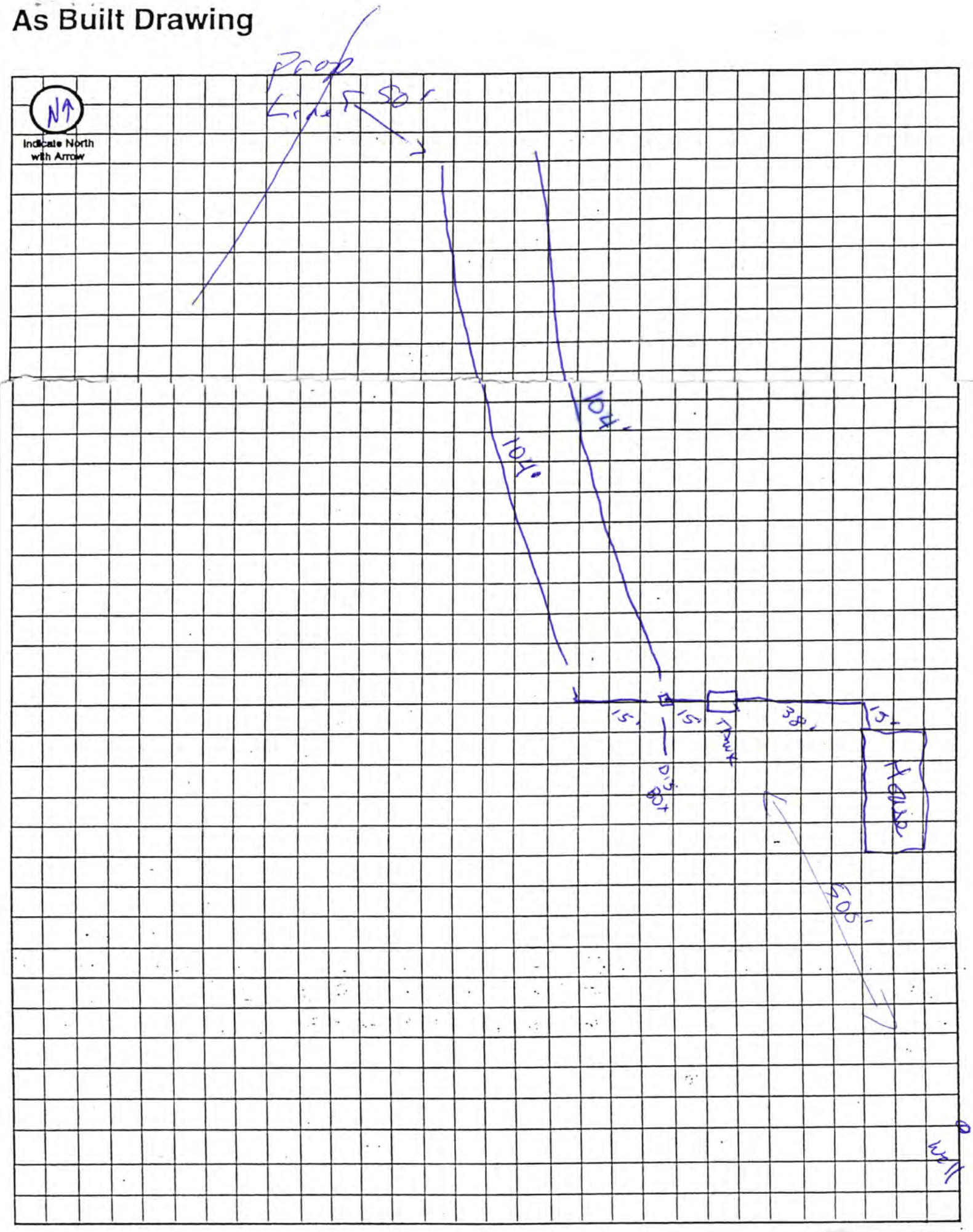
Indicate North with Arrow

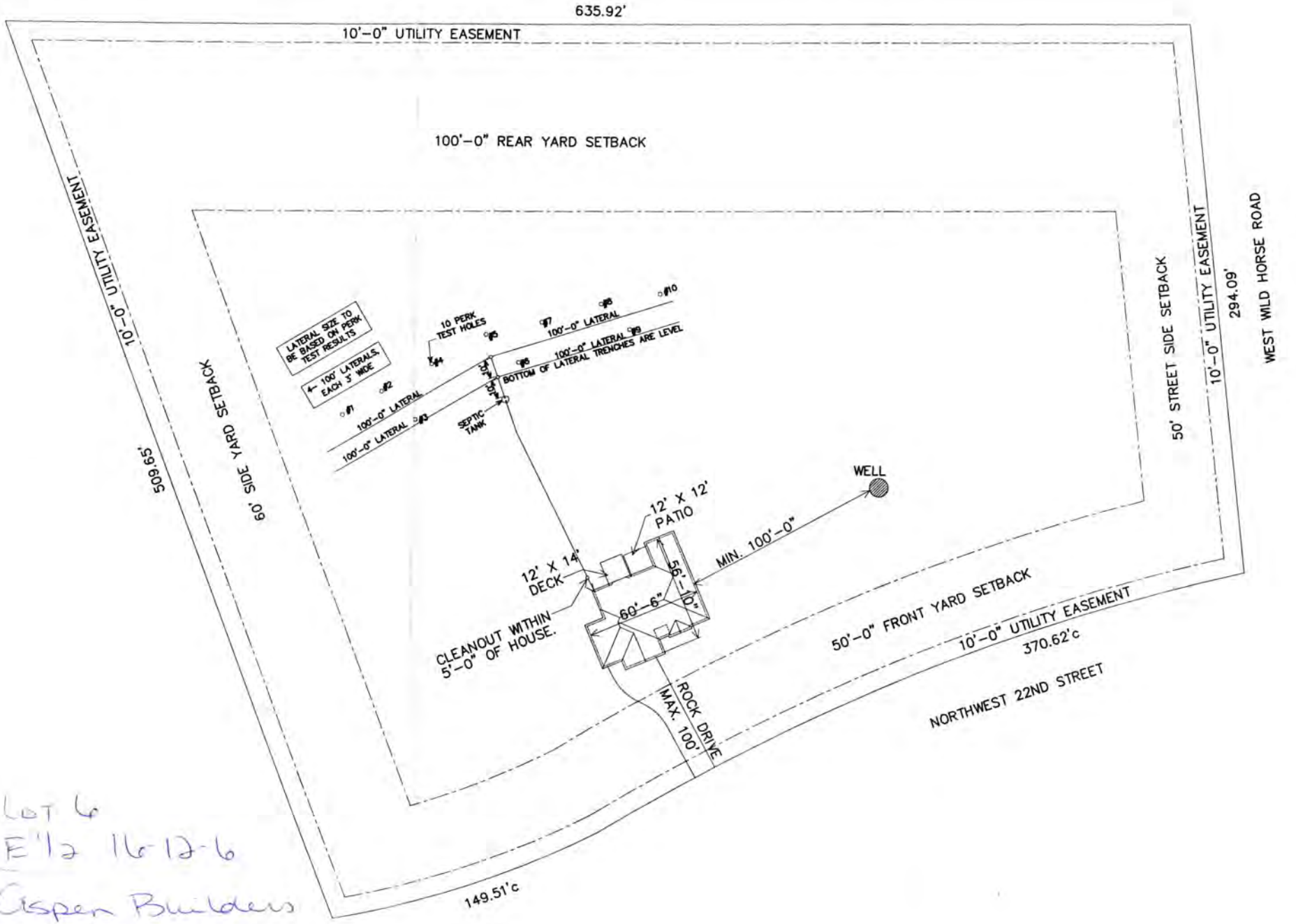
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



As Built Drawing





LOT 6
E½ 16-12-6

Aspen Builders
No Scale