Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment

MARTY & SHERYL WOODWARD
T12N R6E SEC 19 QTR SE
IRREGULAR TRACT LOT 19IT
18405 NW 40 ST-RAYMOND

Permittee

MARTY & SHERYL WOODWARD
6119 NW 6 ST
LINCOLN NE 68521

Permit # 02380253801

Issued 09/23/02
Expires 03/23/03
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002968

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

A

Permit Number: 02380253801

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 16405 NW 40th (no rural route) City Raymond NE, Zip 68428

Legal Description Lot 19 SE ¼, 19-12N6E 19IT
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 Monty & Sheryl Woodward Signature _____

Address 6119 NW 6th City/State/Zip Lincoln NE

☐ Check if owner designed system Home Phone 438-2030 Work Phone 479-1506

C. Contractor

Name Dick Robison Company Name Robison Construction

Address 1221 Evergreen Dr City/State/Zip Lincoln, NE 68510

☐ Check if contractor designed system Work Phone 488-5650

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

Designer Name Lloyd J. Bakoubek Firm Raymond Contracting Work Phone 890-6009

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 9/23/02 Date frwd 9/24/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9-24-02 Date frwd 9-24-02 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 9/24/02 Date frwd 9/24/02 ACTION ☒ Approved ☐ Disapproved Signature _____

9-17-02.mm

Installation Final Written Approval

By Ron Mayfield

Date 4-25-03

Business Office Use Only

Date Rec'd 09/23/02

Amt Paid 200.00

Rec'd By _____ Cash/Check No. 4613

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

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 18405 NW 40th St. (no rural route) City Raymond NE, Zip NE 68428

Owner Monty & Sheryl Woodward Address 6119 NW 6th St. Lincoln, NE 68521

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

Date of Tests 7/18/02 to 7/19/02 Weather: Precipitation 0 Temperature 85

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				
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	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	2 3/4	11
2	36	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	2 3/4	11
3	36	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	4 1/2	7
4	36	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	3 3/4	8
5	36	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	2 1/4	12
6	36	7/18	12:00	7/19	1030	7/19	1030	6	7/19	1:30	30	2	15

Person Conducting Percolation Tests

Name: Tom Burt Design Associates

Phone: _____

Address _____

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

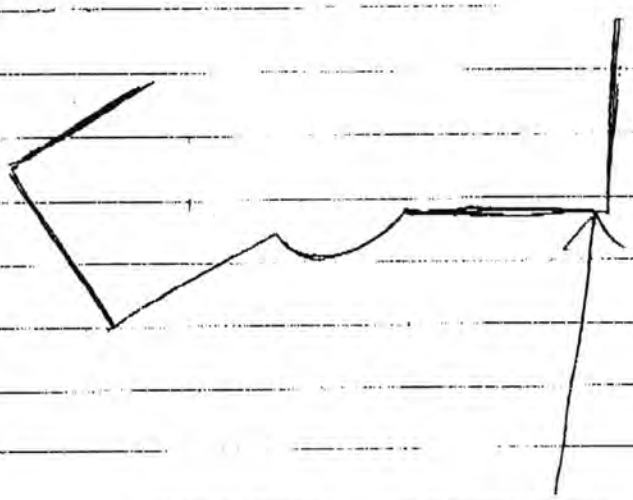
Remarks On-site inspection reveals a loam soil on the edge of Fannel clay loam soil

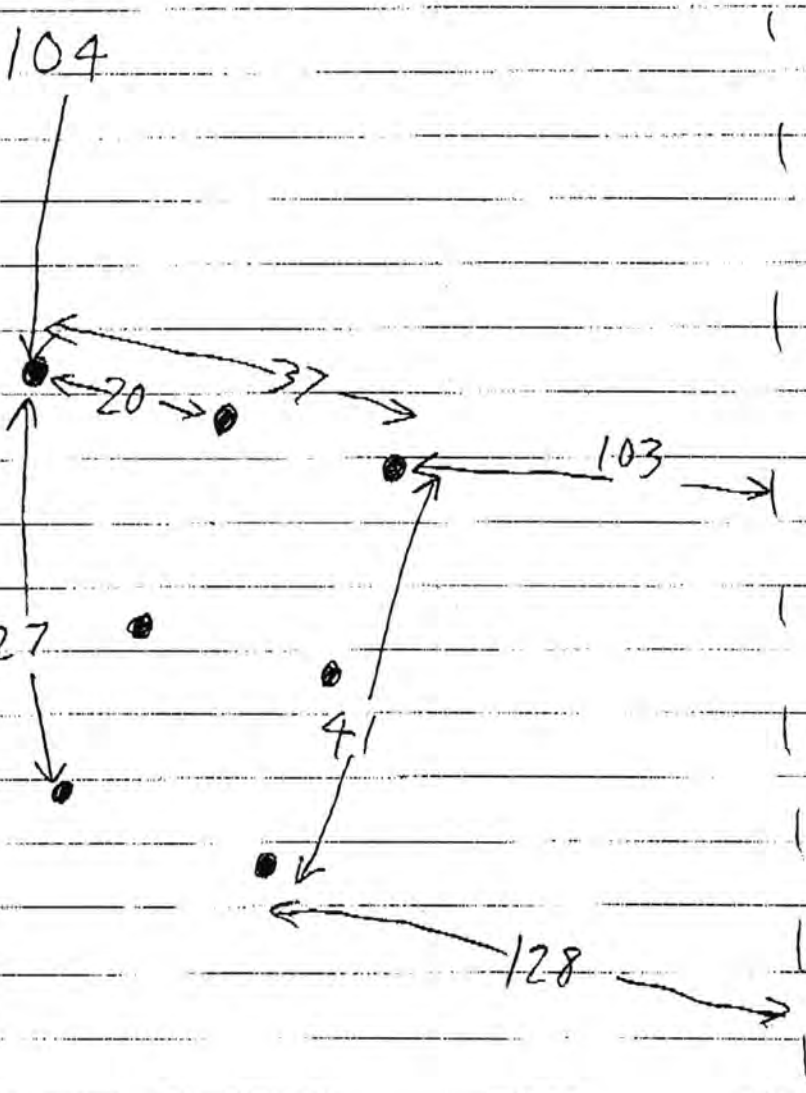
Signature of Reviewing Official Ron Mayer Date _____

FORM 82-101 10-98

QUICK FAX™ OfficeMax

Date: 8-7	# Of Pages: 3
To: Monty Woodward	From: Dick Robison
Co./Dept.:	Co./Dept.:
Fax: 479-1694	Fax:
Phone:	Phone:
Note:	E-Mail:





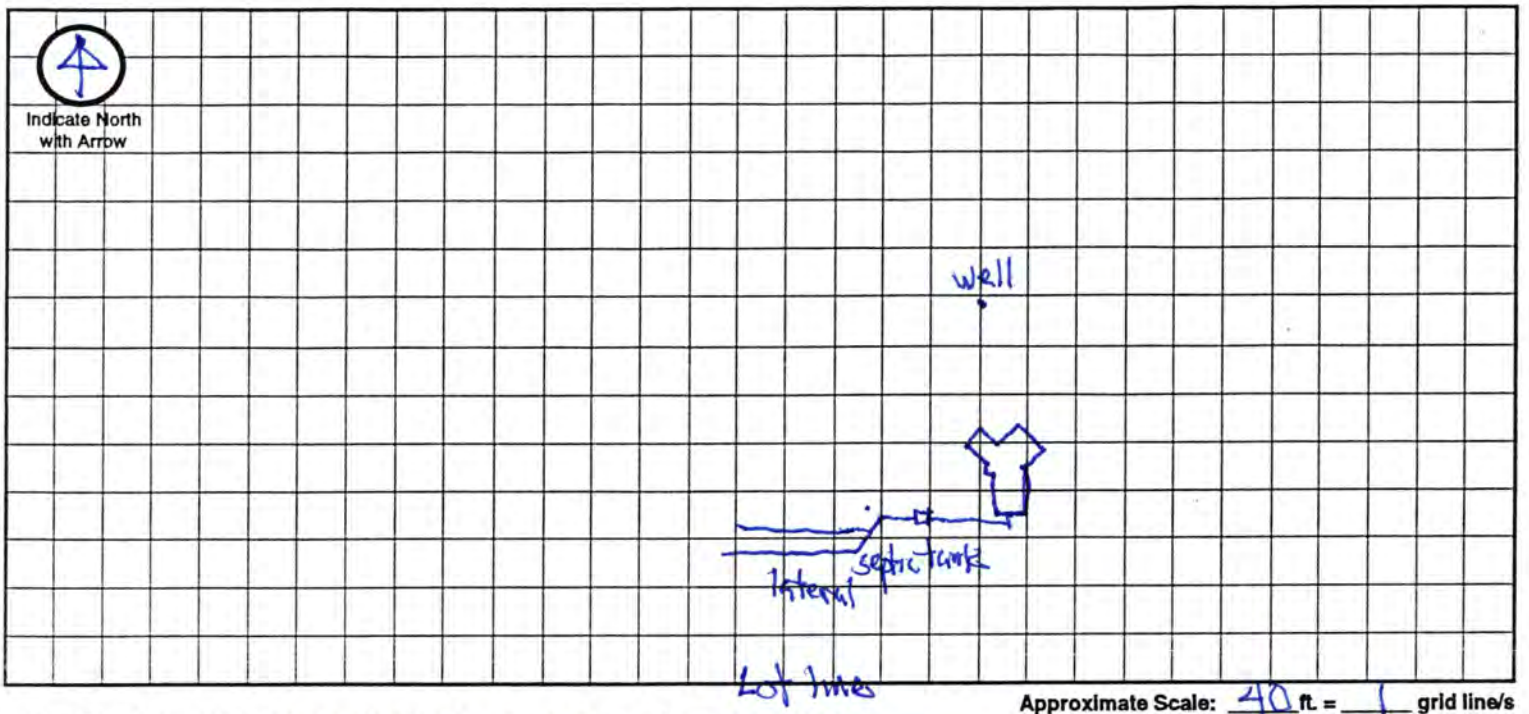
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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: 40 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 8405 NW 40th City Raymond NE, Zip

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other

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

Percolation Rate 11 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other

Total Square Feet of Field Required: 630 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: infiltrator

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed 1

Total Length of Laterals 200 ft. Number of Trenches 2 Trench Width 3'6"

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 [signature] Date 8/19/02

Installer Action Plbg by [signature] Date 8-19-02

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 9/17/02

System Location (Indicate correct number and street)

Address 18405 NW 40Th. (no rural route) City Raymond NE, Zip 68428

A. Building Sewer

1. Material: PVC 40
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 78 ft.
4. Number of clean-outs: one
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 50+ ft.

B. Septic Tank

1. Material: concrete
   Number of compartments: one
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6 in.
   Over outlet, diameter 6 in.
   ~~Riser:~~ ☐ above ☐ below grade grade in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 11 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50+ ft.

C. Distribution Box

1. Material: concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 13 ft.

D. Absorption Field

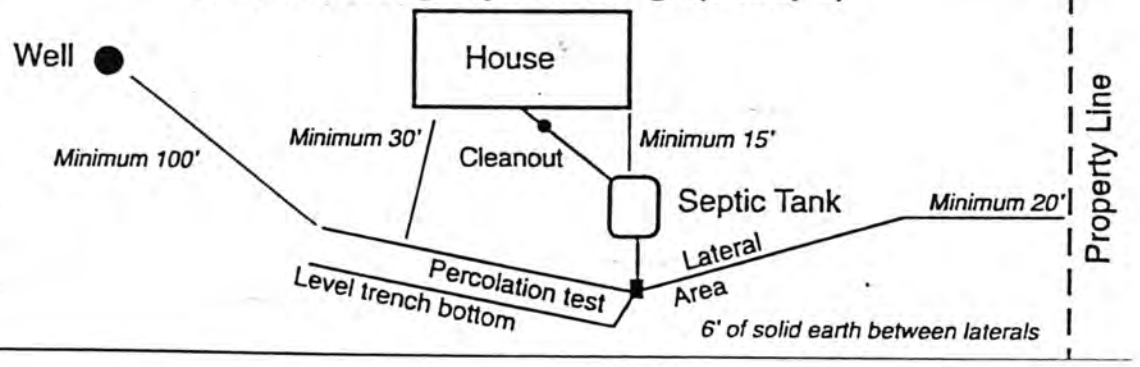
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: 34" wide 16" Tile
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 100+8 ft. 63 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope Flat in/100 ft.
   Average depth 34" in
4. Filter material: Dirt.
   Depth of material _____ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50 ft.

Indicate North with Arrow

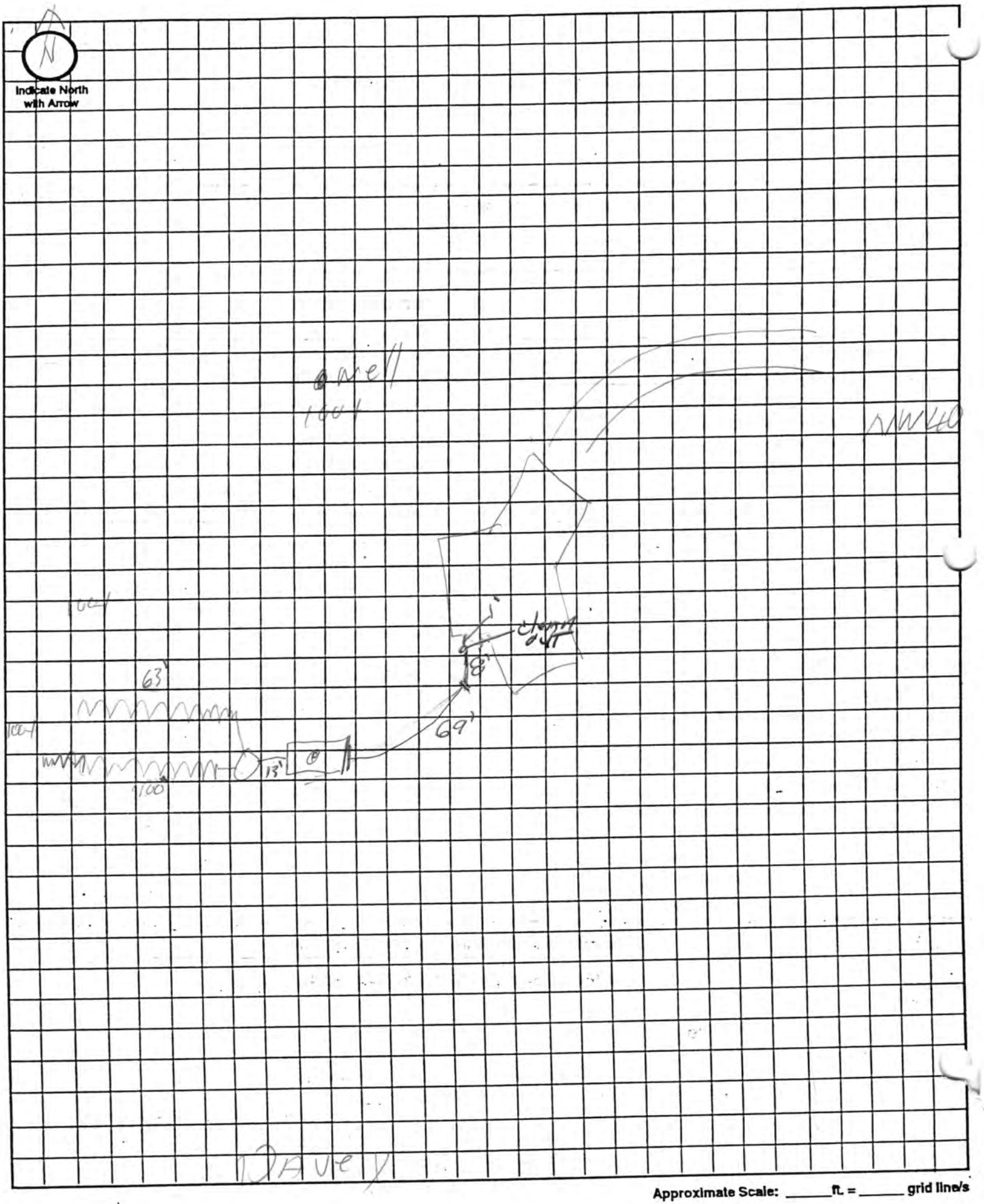
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



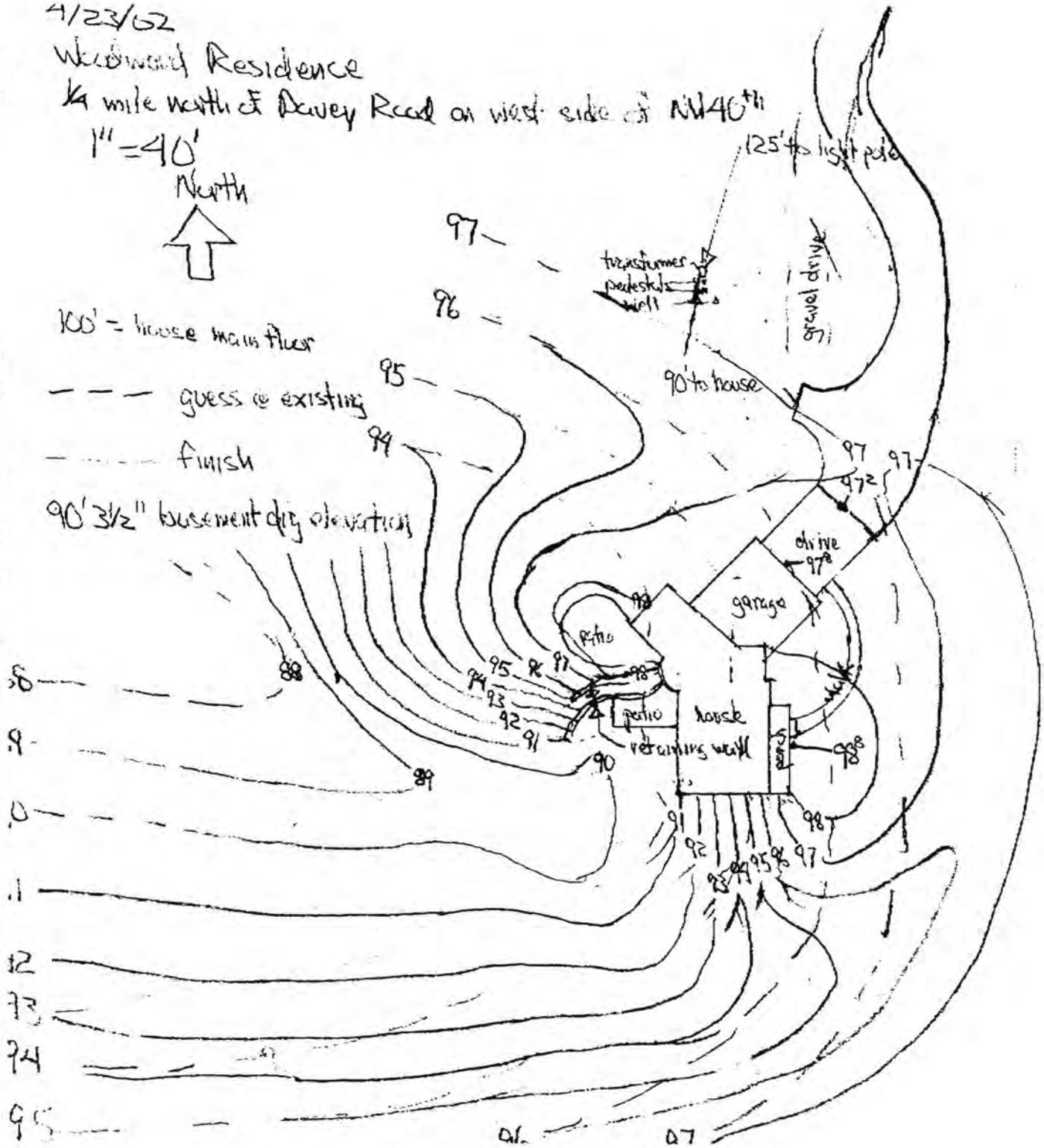
Approximate Scale: _____ ft. = _____ grid line/s

4/23/02

Woodward Residence

¼ mile north of Davey Road on west side of NW 40th

1" = 40'




ShC
ShD2
PaD2
JuC
ShD
MrD2
MeC2
MrD
PaC2
SuG
BrD
BrE
McF
McD
SmD
BpF
MrE
MfD
StF
Ke
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