Lincoln-Lancaster County Health Department

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

Permit

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR -CHG FROM SEPTIC TO LAGOON
BARN LOCATION

Establishment

DAVE CHAMBERS
T10N R5E SEC 13 QTR NW
NE 1/4 OF NW 1/4
6305 W ADAMS ST

Permitee

DAVE CHAMBERS
6305 W ADAMS ST
LINCOLN NE 68524-8839

Permit # 99390062601

Issued 06/29/99
Expires 12/29/99
Revenue Code 3157

FEES: $50.00

TOTAL: $50.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010587

Individual Sewage Disposal System
Application to Alter, Extend or Repair

❒Municipal Code 24.38 ❒County Resolution Number 2832

Date: 6/26/99	File No.:

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.

NE. 1/4 of NW. 1/4

1. **Legal description of property:**
   Township 10N Range 5E Section 13 1/4 Section _____
   Block _____ Lot _____ Addition _____
   Street Address 6305 West Adams

2. **Property use:** ❒ residential X ❒ commercial ❒ other use Barn
   Number of bedrooms _____ Describe _____

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

4. **Description of proposed alteration, extension or repair:** Change from Septic System to Lagoon

5. **Work to be done by:** ❒ owner ☒ contractor's name John Stuthmyer

6. **Estimated project:** a. Repair, replace or minor extension with a cost of less than $400.00 (no fee required).
   b. Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operation, location, or type of the system is being changed.

Print Name Dave Chambers Address 6305 W. Adams Phone 470-3670
Applicant Signature (owner or lessee) _____

Please include the permit fee ($50.00) with this application

(Please do not write below this line)

Date rec'd 6/28/99 REVIEW: ☒ approved ❒ disapproved By: Gerald C. Hood

Site visits:

Date 8-19-99 By mm read & sod lagoon

Date 8-23-99 By mm sewerline

Date 8-30-99 By mm

Installation final written approval

Date 8-30-99 By Ron Mazour

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

Rec'd 6/29/99 to
10933 $50 ck

White - EH Pink - Business Office Revised 1/98

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

Barn

As Built Plans & Specifications

Date 8/23/99

Dave Chambers

System Location (Indicate correct number and street)

Address 6305 West Adams (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: PVC Class 160
   Diameter: 4 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 100' + ft.
   stream 100' + ft.
   pressure line 100' + ft.
   property line 100' + ft.

B. Septic Tank

1. Material: Lagoon System
   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

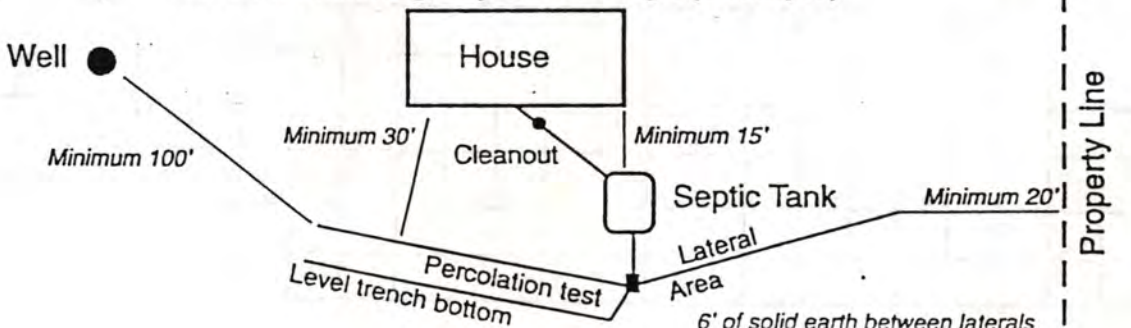
(Provide as-built drawings on back of this form)

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.

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

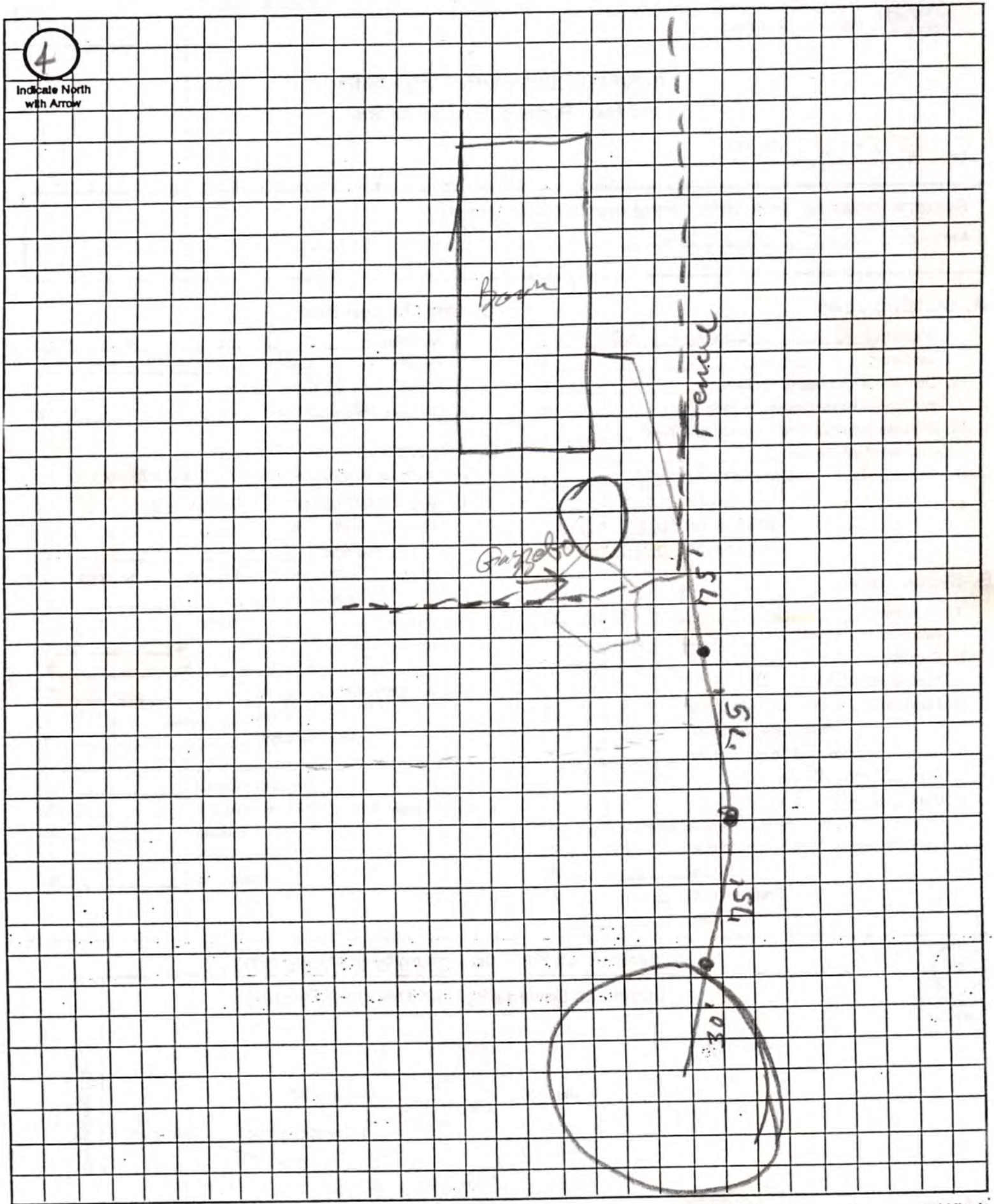
Indicate North with Arrow

Individual Sewage System Design (Example)

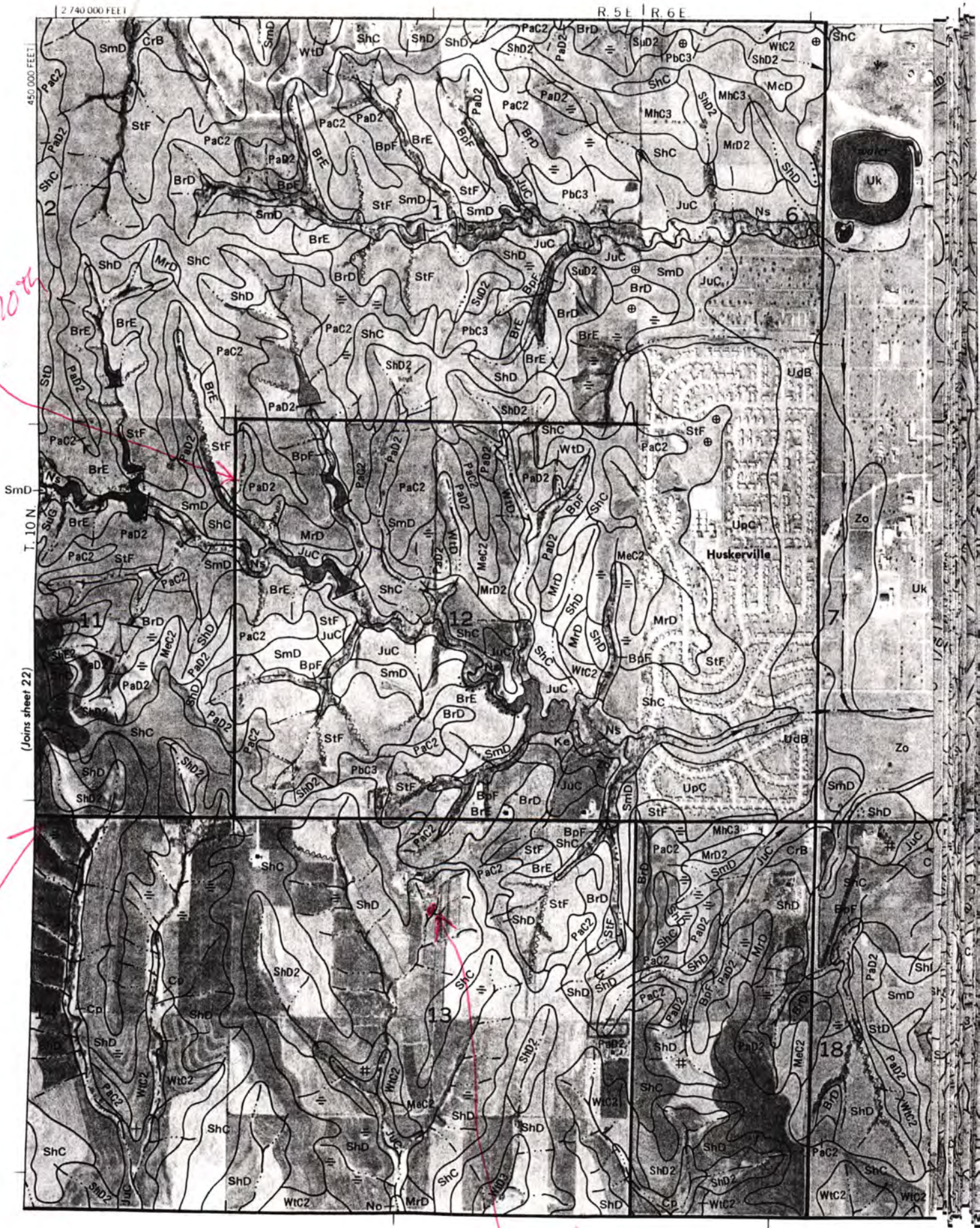


FORM 23-103 10-96

As Built Drawing



Approximate Scale: ft. = _____ grid line/s


2 740 000 FEET
R. 5 E.
R. 6 E.
450 000 FEET
T. 10 N.
(Joins sheet 22)
Huskerville
Uk
Zo
UdB
UpC
MeC2
MrD2
MhC3
PbC3
SuD2
WtC2
ShD2
PaD2
PaC2
BrE
BrD
BpF
StF
SmD
ShC
ShD
JuC
Ns
Ke
No
Cp
StD
SuG
CrB
WtD
McD
MrD
1
2
6
7
11
12
13
18
WW.20th
W. Adams
New lagoon