Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003367

(402) 441-8000

Permit SEWAGE SYSTEM REPAIR
REPAIR & GRADE AROUND LAGOON

Permit # 04390077701

Issued 02/19/04
Expires 08/19/04
Revenue Code 3157

Establishment JACK & JOY DUKE
T10N R5E SEC 20 QTR SW
300 NW 126 ST

FEES: $100.00

Permittee JACK & JOY DUKE
300 NW 126 ST
LINCOLN NE 68528

TOTAL: $100.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

☐ Municipal Code 24.38 ☒ County Resolution Number 2832

RECEIVED
FEB 19 2004
043900777

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 10N Range 5E Section 20 1/4 Section SW
   Block _____ Lot _____ Addition _____
   Parcel ID ____-____-_____-_____-_____ (i.e. 99-99-999-999-999)
   Street Address 300 N.W 126TH

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe _____

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

4. **Description of proposed alteration, extension or repair** REPAIR & GRADE AROUND LAGOON, FENCE & SEED

5. **Work to be done by:** ☐ owner ☒ contractor's name LAGNER CONST

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 JACK DUKE Address 300NW 126th Phone 477-1812
Applicant Signature (owner or lessee) Mel Lagner for JACK DUKE

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 2/19/04 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date ____/____/____ 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: 2/19/04 ✓ Amount $100.00 ✓ Check No. 3940 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 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
LAGOON

No. 98380179401

Issued 06/30/98
Expires 12/30/98
Revenue Code 3157

PAID

FEES: $150.00

Establishment
JACK W DUKE JR
T1ON R5E SEC 20 QTR SW
300 NW 126 ST

TOTAL $150.00

Permittee
JACK W & JOY L DUKE JR
BOX00169
BOX 00169
PLEASANT DALE NE 68423-0169

Issued By Health Director
Lincoln-Lancaster County Health Department

007759

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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

A

Permit Number: 9838017 94

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 300 NW 126th (no rural route) City Lincoln NE, Zip 68528

Legal Description SEE ATTACHED
Southwest (1/4) 20 (1/4) 10 (Section) North (Township) 5 East (Range) of the Sixth P.M. (Subdivision) 21 Acres (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 Jack W. Duke Jr & Joy L. Duke Signature _____

Current Address 114 S. 5th Po Box 169 City/State/Zip Pleasant Dale NE 68423

☐ Check if owner designed system Home Phone 402-795-2033 Work Phone 402-795-2004

C. Contractor

Name Owner Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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 6/30/98 Date frwd 6/30/98	ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Flood	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 6/30/98 Date frwd 6/30/98	ACTION ☐ Approved ☐ Disapproved Signature Dale	
3. City or County Engineer	Date rec'd 06/30/98 Date frwd _____	ACTION ☒ Approved ☐ Disapproved Signature [signature]	

Installation Final Written Approval

By Paul Dryden

Date 4-9-99

Business Office Use Only
Date Rec'd 6/30/98
Amt Paid $150.00
Rec'd By CW Cash/Check No. 990

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

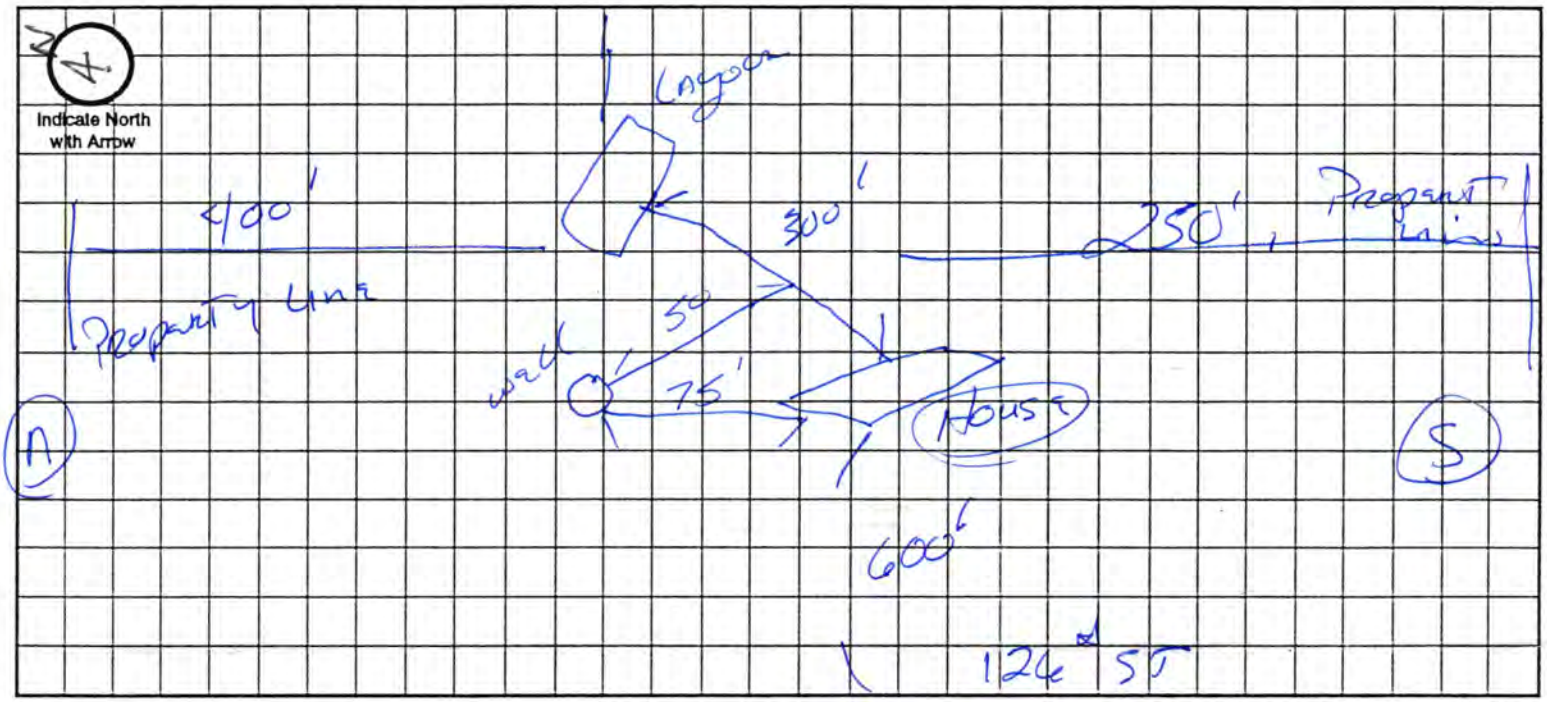
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 9838017794

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) 300 NW 126th City Lincoln NE, Zip 68528

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☒ Other Lagoon must be sealed so no more than ½" seepage per day

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

Percolation Rate _____ (min. per inch) Soil Type: _____ 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

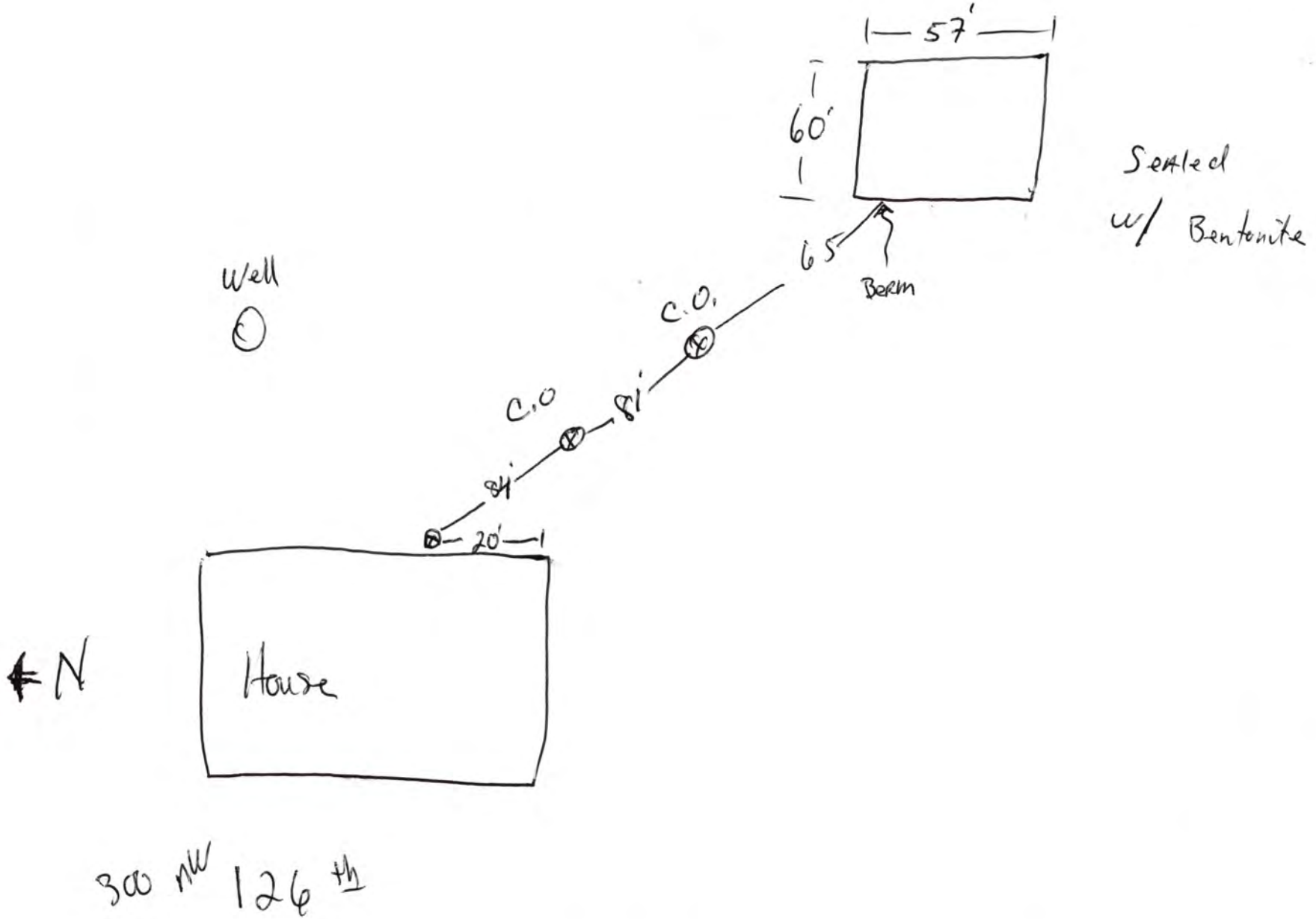
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☑	50 ☑	N/A ☐	30 ☒	50 ☑	100 ☑	200 ☒	☐

E. Required Signatures

Home Building Contractor Jack Duke owner Date 6-30-98

Installer Jack Duke owner Date 6-30-98

12-3-98


57'
60'
Sealed
w/ Bentonite
65
Berm
Well
C.O.
C.O.
84'
84'
20'
House
N
300 NW
126 th

TITLE 124 – NEBRASKA DEPARTMENT OF ENVIRONMENTAL QUALITY

Appendix D

RECEIVED
AUG 22 2004
DEPARTMENT OF ENVIRONMENTAL QUALITY

NDEQ Use Only
REG # 10310
Fee Rcvd? $50. of CK # 4136 for $100. - on 7/2

Onsite System Registration Form

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
Dube	Jack & Joy		402-477-1812

Owner's Mailing Address	City	State	Zip code
300 NW 126th	Lincoln	NE	68528

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

System Location Legal Description:

1/4	1/4	Section #	Twnshp	Range	County	Latitude	Longitude
SW		20	10N	5	LANCASTER		

System Information

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

Septic Tank / Soil Absorption System	Lagoon System
Rated Tank Capacity = _____ gallons	Water Surface Area = 1225 sq. ft.
Total effective trench bottom area = _____ sq. ft.	Tested seepage rate = NA in/day
Number of Trenches = _____	**Other Type System**
Total Trench Length = _____ ft.	NDEQ Construction Permit# _____
Design Percolation Rate = _____ min/inch	

Certified professional registering the system:

Last Name	First Name	Middle Initial	Professional Certificate #
GAGNER	MELVIN	F	P1268

Signature of Certified Professional	Date of inspection or completion of work
Melvin Gagner	

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.

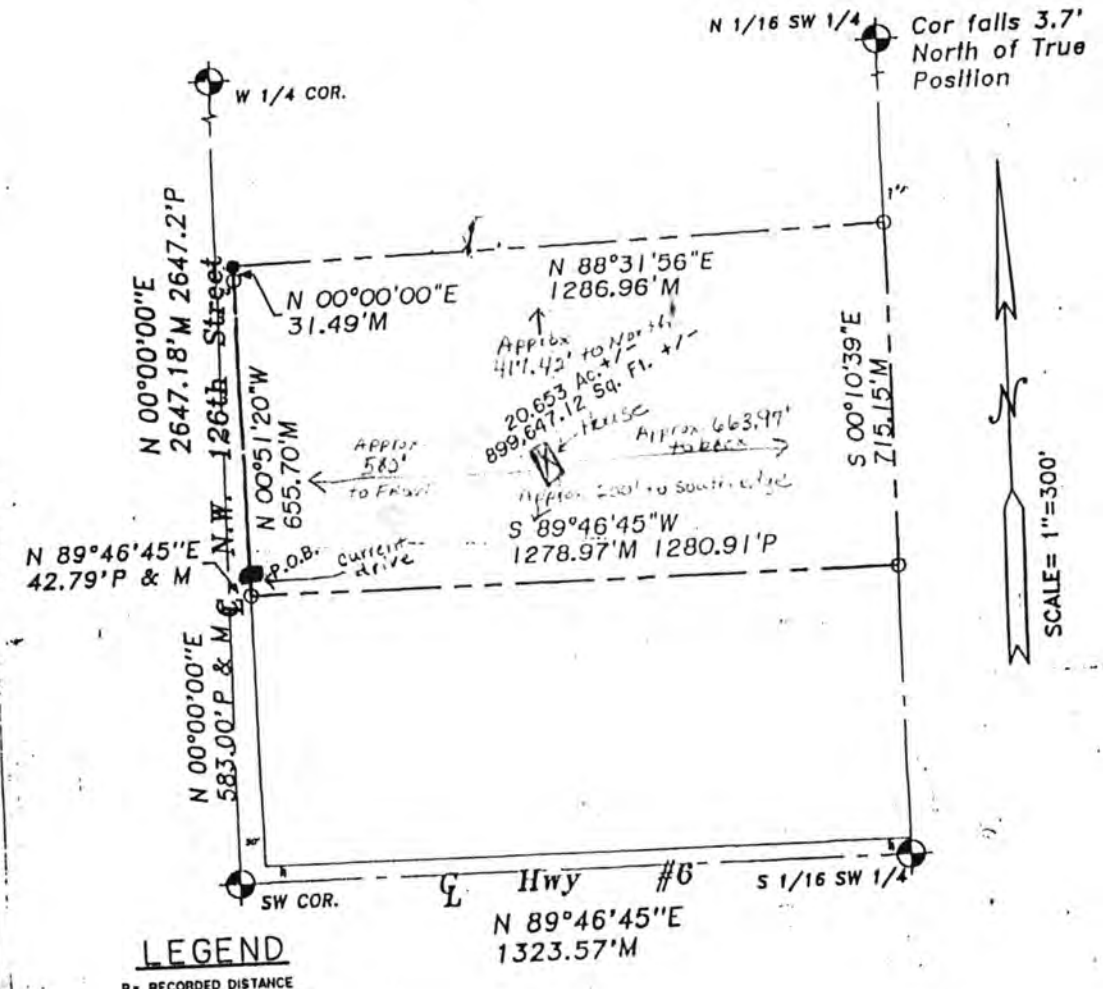
Make checks payable to the **Nebraska Department of Environmental Quality.** Mail to NDEQ P.O. Box 98922 Lincoln Nebraska 68509-8922

OFFICIAL SURVEY RECORD

A survey of a 20.653 Acre tract of land located in the Southwest Quarter of Section 20 Township 10 North Range 5 East of the Sixth P.M., Lancaster County, Nebraska.

Work Order# 97-300

August 5, 1997



LEGEND

R= RECORDED DISTANCE
P= PLATTED DISTANCE
M= MEASURED DISTANCE
●= FOUND 1"I.P IPE
O= SET 3/4" X 24" REBAR
+= SET CHISLED 'X' IN CONC.
D= DEEDED DISTANCE

SURVEYORS CERTIFICATE

I hereby certify that I accurately surveyed or under my direct supervision and [illegible] REBAR 3/4" X 24" were set at all points marked. All distances are in feet and hundredths of a foot.

REGISTERED LS-461

Signed this 6th day of AUGUST 19 97

Victor A. Beenblossom LAND SURVEYOR #461

VICTOR A. BEENBLOSSOM

BENCHMARK SURVEYING

2649 NORTH 48TH ST.
SUITE 'B'
LINCOLN, NE. 68504
PH. (402) 466-4366
FAX (402) 466-7584