Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

009851

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Establishment:
LEROY ANG
T12N R5E SEC 13 QTR NE
6TH PRINCIPAL MEREID BLK 3 LOT 41
20909 NW 56 ST-VALPARAISO

Permittee:
LEROY ANG
5030 N 25 ST
LINCOLN NE 68521

Permit # 07380329201

Issued 01/02/07
Expires 01/02/08
Revenue Code 3157

FEES: $290.00

TOTAL: $290.00

Bruce D. Dart

Bruce D. Dart, Health Director

POST IN A PROMINENT PLACE

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

DEC 29 2006 A DEC 29 2006

Permit Number: 07380329201 Amf

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 10909 NW 56 St. NCR 5915 (no rural route) City Valparaiso NE, Zip 68065

Legal Description NE Corner 1/4 NE 1/4 13 Section 12N Township 5E Range 6th PM Subdivision Parcel 3 Addition 41 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 LeRoy Ang Signature LeRoy Ang NCR 71606

Address 5030 N 75 ACR 44322 City/State/Zip Lincoln, Ne 68521

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Kurt Virgil Company Name Kurt + Virgil Excavating, Myron

Address 4620 W. Mary Louise Ln City/State/Zip Lincoln, Ne 68528

☐ Check if contractor designed system Work Phone 402-525-6681 783-0305

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 450 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 1-2-07, Date frwd 1-2-07 — ACTION ☒ Approved ☐ Disapproved — Signature _____
2. Supt. Bldg. Insp. or Village Clerk — Date rec'd 1-2-07, Date frwd 1-2-07 — ACTION ☒ Approved ☐ Disapproved — Signature _____
3. City or County Engineer — Date rec'd 1-2-07, Date frwd 1-2-07 — ACTION ☐ Approved ☐ Disapproved — Signature _____

8/21/07 - will be constructed in fall of 2007
11/1/06 - Needs fence

Installation Final Written Approval

By _____

Date 5/18/09

* Lagoon fence 30 day notice *

Business Office Use Only

Date Rec'd 01/03/07
Amt Paid 290.00
Rec'd By _____ Cash/Check No. 5409

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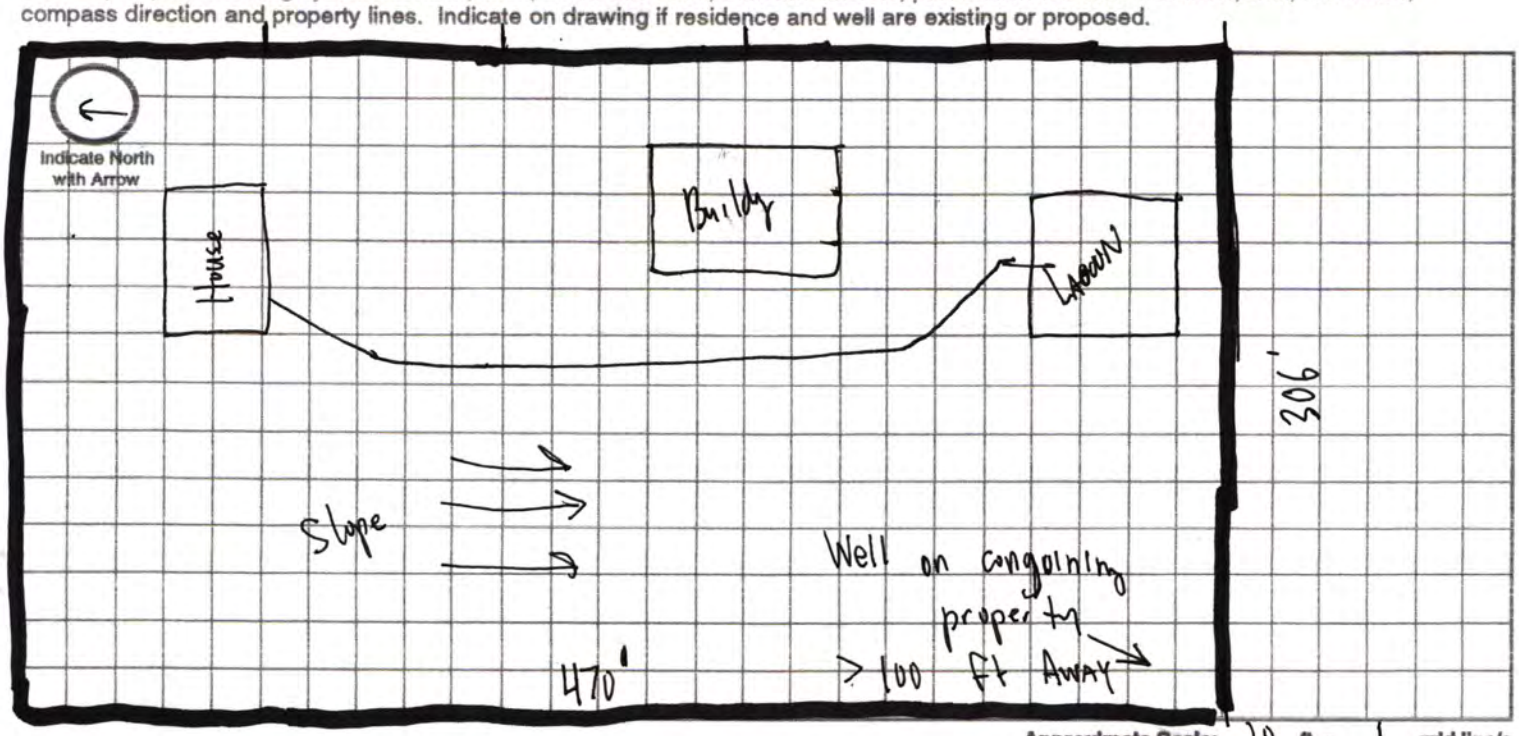
C

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 20909 NW 56th St City Valparaiso NE, Zip 68065

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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 Kent Yost Date 12/27/06

Installer Kent Yost Date 12/07/06

Easement Reqd

JAN 24 2007

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 1/22/07

System Location (Indicate correct number and street)

Address 20909 NW 56th St. (no rural route) City Valparaiso NE, Zip 68065

A. Building Sewer

1. Material: PVC
   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
5. Distances to: well or suction line 7 100 ft.
   stream 7 100 ft.
   pressure line > 50 ft.
   property line > 50 ft.

B. Septic Tank

1. Material: _____
   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

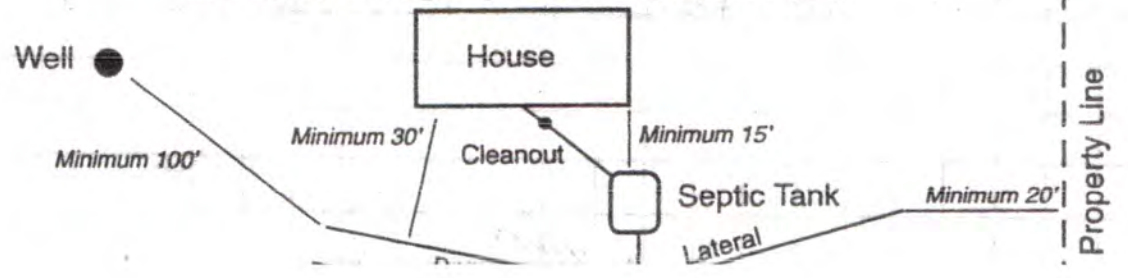
(Provide as-built drawings on back of this form)

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.

indicate North with Arrow

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

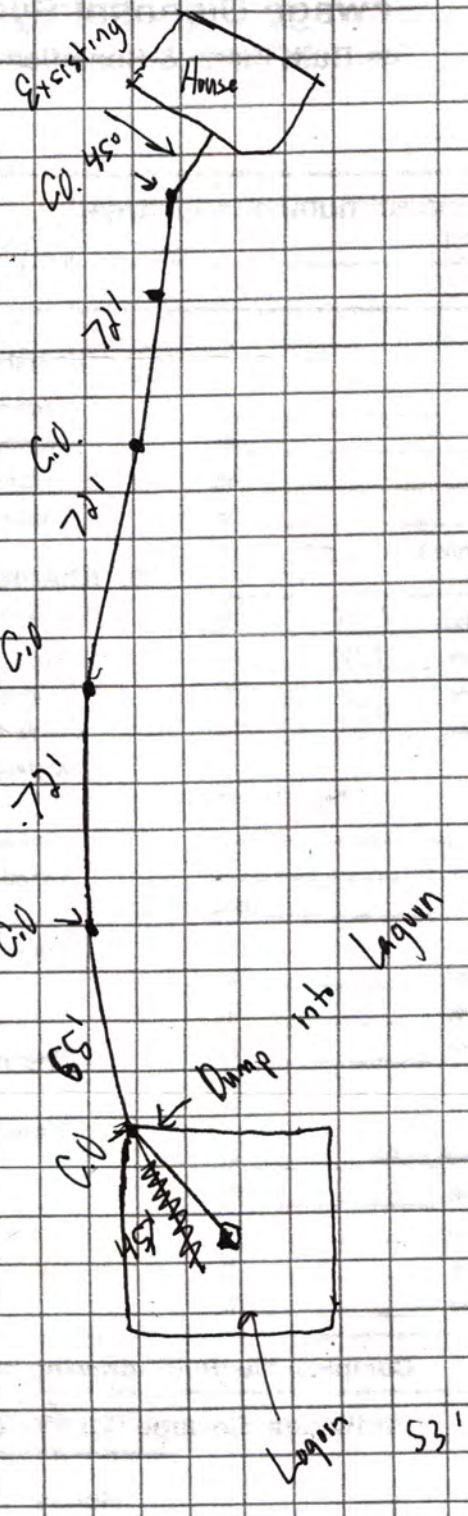
Individual Sewage System Design (Example)



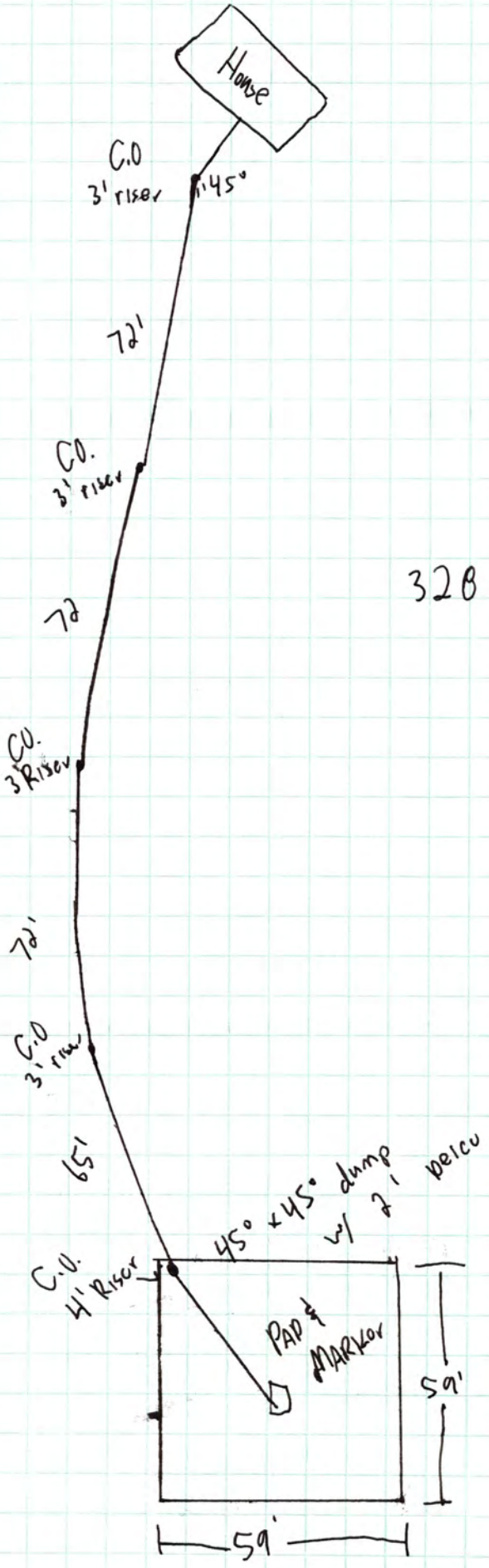
As Built Drawing

1 = 15 ft

Indicate North with Arrow



All setback Req's met
Well is off the map
by at least 1000 feet



328 total feet

All setback
Req. ~~met~~.
Well is off the map
by at least 1000 ft.

KURT VIRGIL
DBA KURT T. VIRGIL EXCAVATING
4620 W. Mary Louise Ln.
Lincoln, Ne 68528
(402) 525-6681
kvirgil1@hotmail.com

December 27, 2006

To Whom It May Concern: (probably Nate)

This particular lagoon is going to encroach into the required 50 ft setback required by the DEQ concerning property lines. I am in the process of having an easement draw up by the homeowner's attorney/bank. I will have a copy of this to be presented to the inspector upon completion. This will not be an issue for me to get because the gentleman (LeRoy Ang) is the owner of both conjoining properties. The situation here is that he cut out 3.3 areas for his son to live in the existing house where the current septic system is failing, The name on the deed has not yet been changed. All involved parties are aware of the situation and are cooperative. I just suggested we do this so the easement can be attached to the deed to avoid future problems. Please let me know it there is a problem with issuing the permit at this time (the easement should be done within the week) as I want to have this system installed before the weather goes bad on me. Thank you, and please call if you have any concerns.

Sincerely,

Kurt T. Virgil

