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

RECEIVED
MAY 20 2005

A

Permit Number: 05380302801

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 20401 NW 70th (no rural route) City Raymond NE, Zip 68428

Legal Description SEE ATTACHED 14 12N 5E 32 LT.
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 John Osmera Signature John L Osmera (curtis watson)

Address 201 Benton Ct City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone 474-9515 Work Phone 440-5311

C. Contractor

Name Steve Machacek Company Name M + W Const.

Address _____ City/State/Zip Weston Ne 68070

☐ Check if contractor designed system Work Phone 642-5788

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

Designer Name STEVE MACHACEK Firm M+W CONST. Work Phone 402 642-5788

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** (11-2-05, need Spec.)
   Date rec'd 5/24/05 Date frwd 5/24/05
   ACTION ☒ Approved ☐ Disapproved
   Signature Jerrold C. Hood

2. **Supt. Bldg. Insp. or Village Clerk**
   Date rec'd 5-24-05 Date frwd 5-24-05
   ACTION ☐ Approved ☐ Disapproved
   Signature _____

3. **City or County Engineer**
   Date rec'd 5/24/05 Date frwd 5/24/05
   ACTION ☒ Approved ☐ Disapproved
   Signature _____

Installation Final Written Approval

By _____

Date 7/3/07

Business Office Use Only
Date Rec'd 05/24/05
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 8811

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

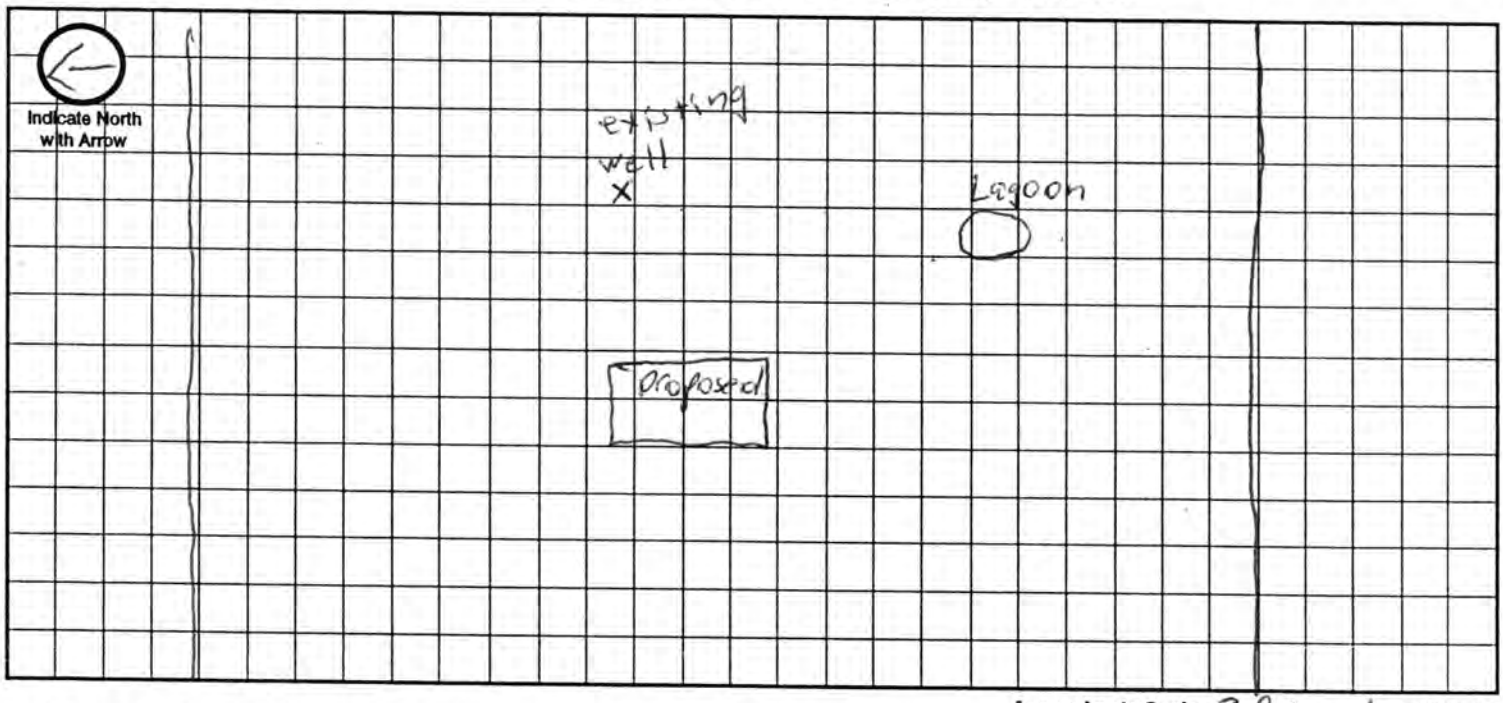
Lincoln-Lancaster County Health Department
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Phone: 402-441-8022

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: 30 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 20401 NW 70th 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 _____ (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 John F Damera Date 5/19/05

Installer Steve Mackenzie #0021 Date 5/19/05

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: 05380328

Sewage Disposal System

As Built Plans & Specifications

Date 11/1/05 JOHN OSMERA

System Location (Indicate correct number and street)

Address 20401 NW 70TH (no rural route) City RAYMOND NE, Zip 68428

A. Building Sewer

1. Material: PLASTIC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: NA ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line 200+ ft.
   stream NA ft.
   pressure line 100+ ft.
   property line 75 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

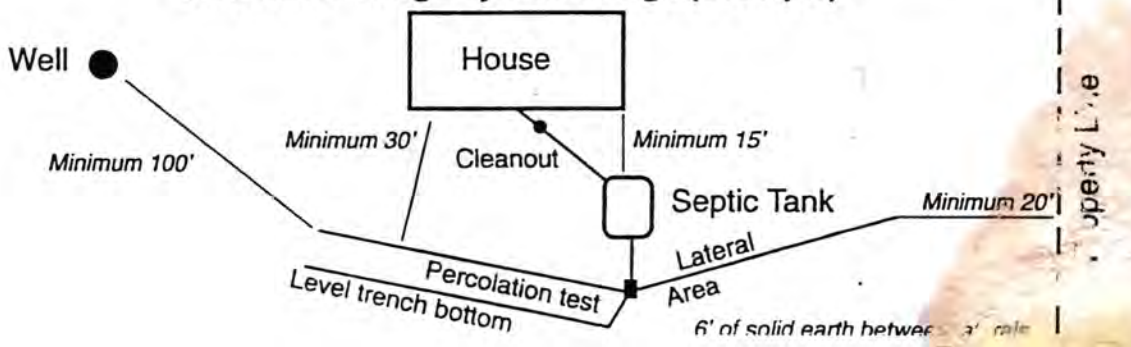
(Provide as-built drawings on back of this form)

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.

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

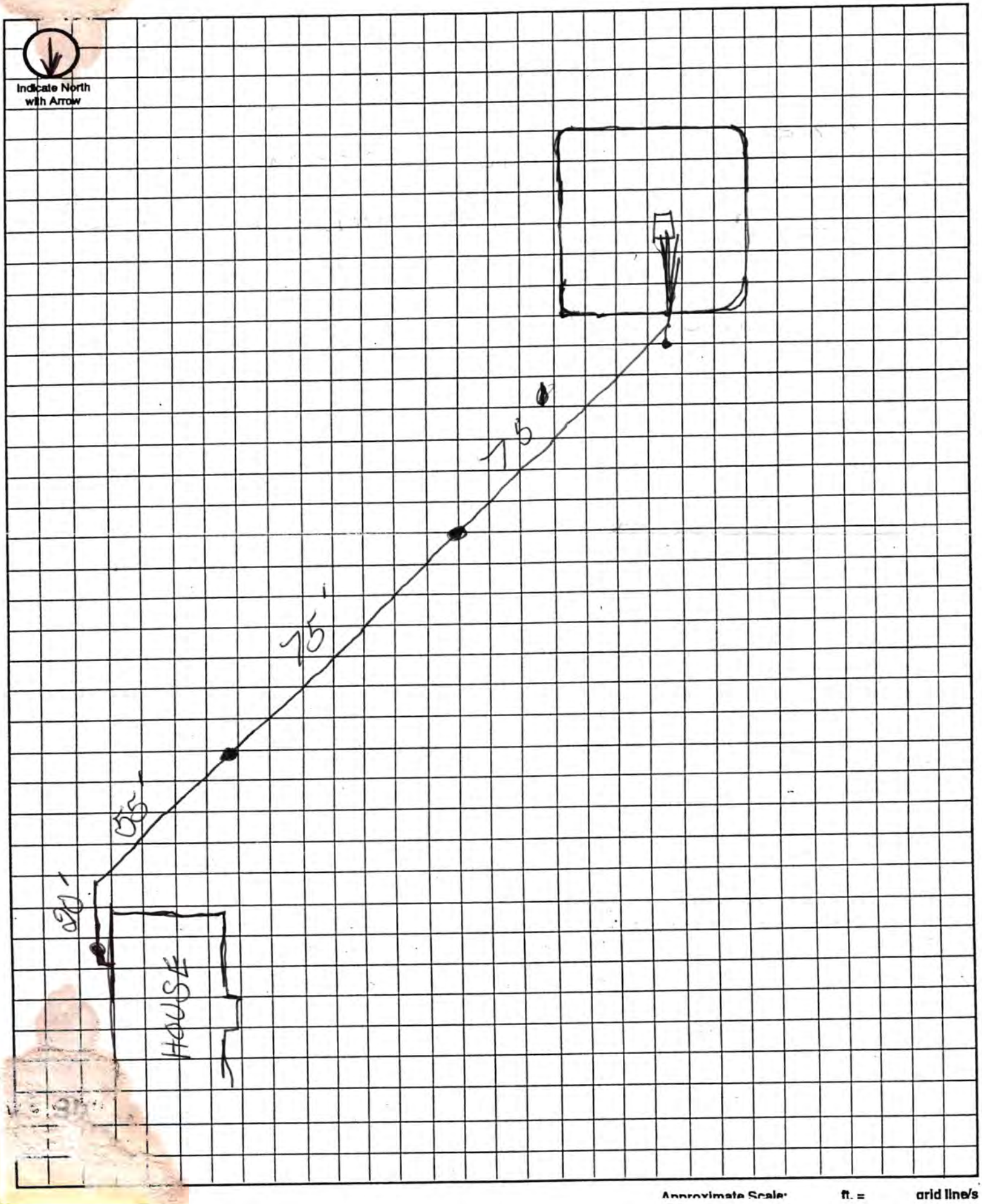
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: ft. = grid line/s

Official Survey Record

LANCASTER County, Nebraska

Phone (402) 434-2686
Fax (402) 434-2687

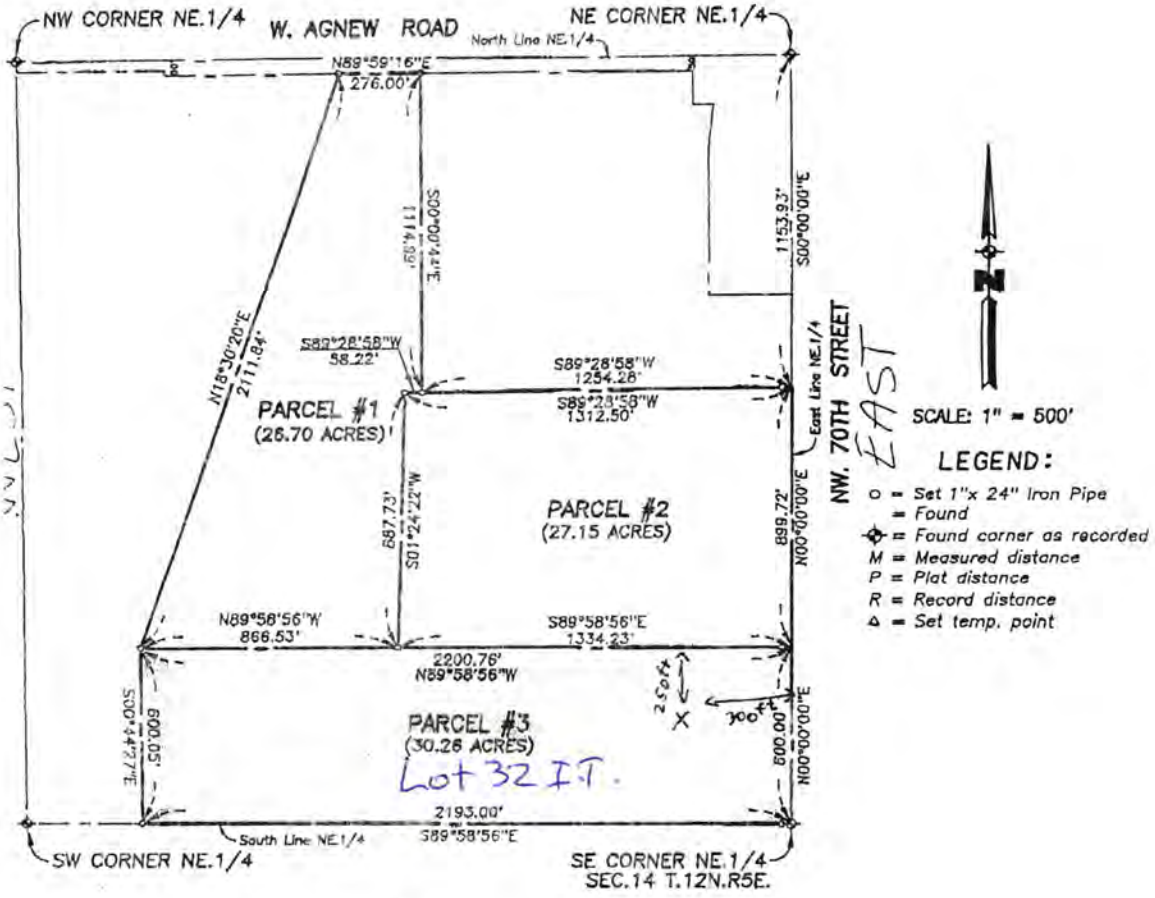
ALLIED SURVEYING AND MAPPING, INC.
6120 South 58th Street – Suite "A" – Lincoln, Nebraska 68516

Survey of a part of Lot 29 and 30 of Irregular Tracts in the Northeast Quarter of Section 14 T. 12 N., R. 5E of the 6th P.M.

Job No. 32375

August 2003

N



S

SCALE: 1" = 500'

LEGEND:

- o = Set 1"x 24" Iron Pipe
- = Found
- ⊕ = Found corner as recorded
- M = Measured distance
- P = Plat distance
- R = Record distance
- Δ = Set temp. point

SURVEYORS CERTIFICATE

I hearby certify that I have accurately surveyed the property in the above plat. Iron Pins were set at points marked o. All dimensions are in feet and decimals of a foot.

Signed this 14th day of August 2003

NAME Kerry W. Simonds
KERRY W. SIMONDS

Surveyor's License #333
Nebraska L.S.

NEBRASKA REGISTERED LAND SURVEYOR LS-333 KERRY W. SIMONDS

(SEAL)