Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
LAGOON

Establishment

LOUIS BARRY
T12N R5E SEC 1
23403 NW 70 ST-AGNEW

Permitee

LOUIS BARRY
1709 N 58 ST
LINCOLN NE 68505

Permit # 99380209501

Issued 10/06/99
Expires 04/06/00
Revenue Code 3157

FEES: $150.00

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

011055

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

A

Permit Number: 99380295

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 23403 N/O-West 70th (no rural route) City AGNEW NE, Zip

Legal Description NE 2 12 5
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 Louis Barry Signature

Address 1709 N/O 58th City/State/Zip

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name Action Plbg Inc Company Name Action Plbg

Address City/State/Zip 4101 So 8th Lincoln NE 68516

☐ Check if contractor designed system Work Phone 402-423-6960

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

Designer Name Jeff Kreifels Firm Action Plbg Work Phone 423-6960 450-5822

E. This System Will Serve a

☑ Residential Dwelling Number of Bedrooms 4 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 10-6-99 Date frwd — ACTION ☑ Approved ☐ Disapproved Signature
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd — Date frwd — ACTION ☐ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 10/8/99 Date frwd 10/12/99 ACTION ☐ Approved ☒ Disapproved Signature PER DOUG PILLARD IN FLOOD PLAIN

10-99 verbal need survey, road fence OK

Installation Final Written Approval

By Paul Patterson

Date 12-29-99

Business Office Use Only

Date Rec'd 10/06/99
Amt Paid 150.00
Rec'd By ~~Cash~~/Check No. 15730

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

B

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

Permit Number: 993802095

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 23403 NW 70th (no rural route) City Agnew NE, Zip NE

Owner Louis Barry Addresss 1709 N 58th (Current Home Addy)

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

Date of Tests 9/30 to 10/1 Weather: Precipitation clear / Dry Temperature 50°

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. 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	30"	9-30	9:00	10-1	9:30	10-1	9:30	20"	10-1	1:30	240 M	15.5	15.48 (BC) 1"
2	30"	"	"	"	"	"	"	"	"	"	"	7.5	32. (30) 1"
3	30"	"	"	"	"	"	"	"	"	"	"	9.5	25.26 (30) 1"
4	30"	"	"	"	"	"	"	"	"	"	"	11	21.82 (30) 1"
5	30"	"	"	"	"	"	"	"	"	"	"	8	30 (30) 3/4"
6	30"	"	"	"	"	"	"	"	"	"	"	10.5	22.86 (30) 3/4"

Last 30 min

Sum of Percolation Rates: 200
Average of Rates: 33.33
Rate Used for Calculation: 33

Person Conducting Percolation Tests

Name: Steve Sass
Phone: 432 3051
Address 706 192nd Eagle NE

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks: LAST MEASUREMENT TO RIGHT OF FORM WAS DROP IN LAST 30 MIN
APPROVED AT 33 MIN/INCH

Signature of Reviewing Official _____ Date 10-6-99

REPLACEMENT

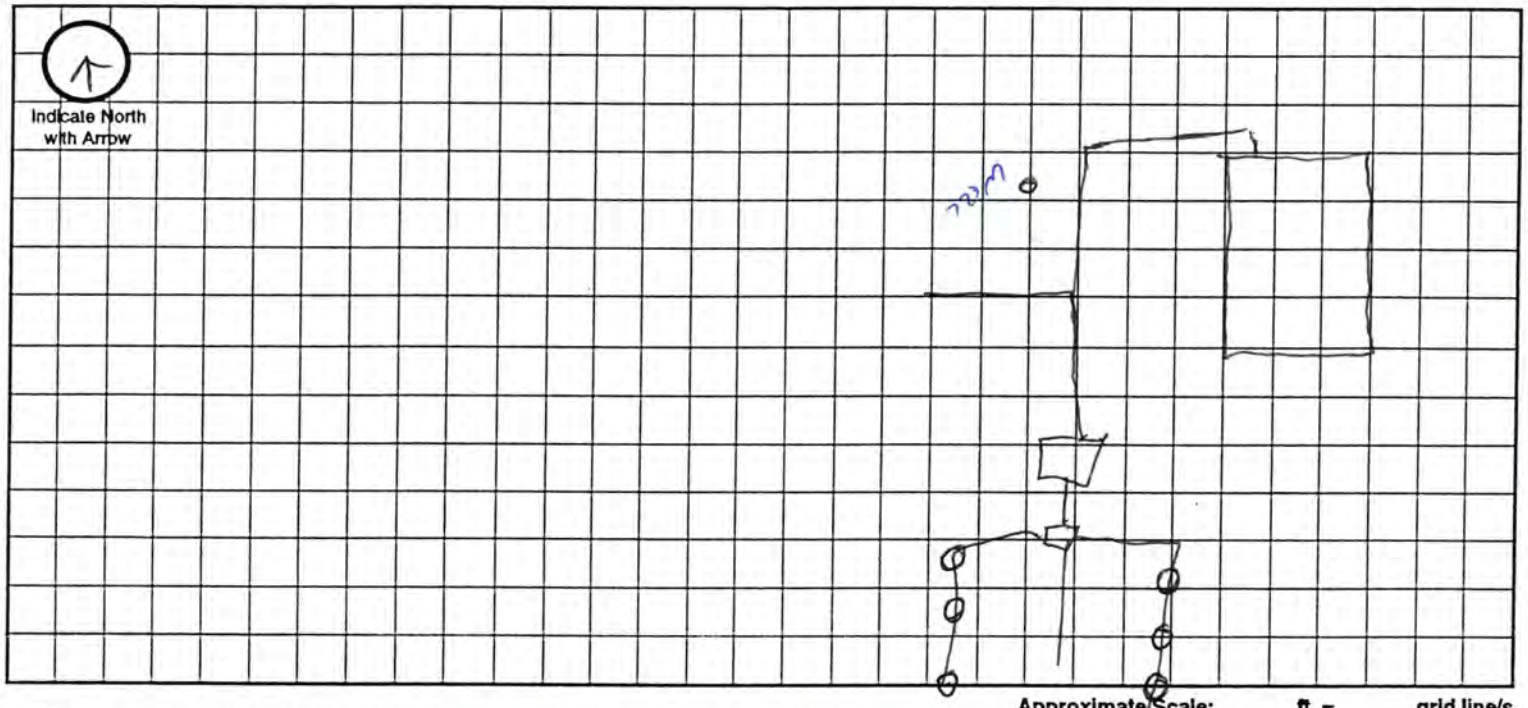
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 99380 2095

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) 23403 NW 70th City ARNEW NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 33 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: 1048 sq. ft.

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

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

Total Length of Laterals 262 ft. Number of Trenches 3 Trench Width 4'

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 EXISTING Date _____

Installer Jeff Kreifels Date 10/6/99

FORM 23-102 10-96

NOV 2 2 1999

D

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

Permit Number: 993802095

Sewage Disposal System

As Built Plans & Specifications

Date 11-17-99 Action Plbg & Htg Inc.

System Location (Indicate correct number and street)

Address 23403 NW 70th (no rural route) City Agnew NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: 4 ft 0" in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: No tank ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ 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

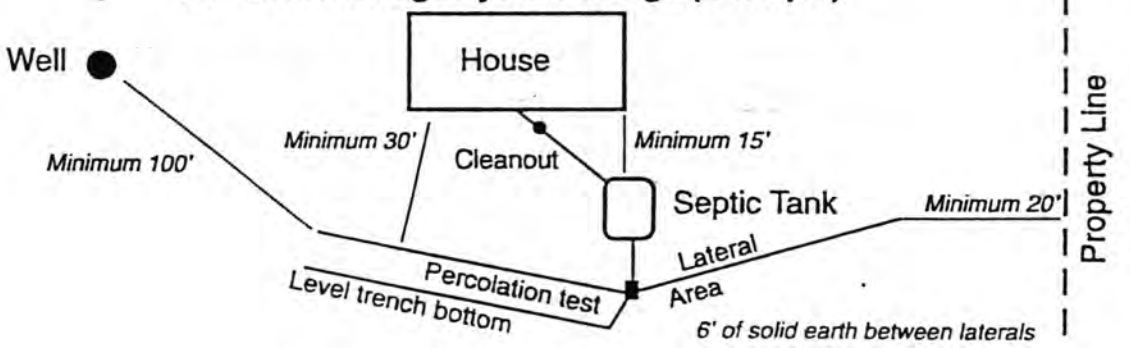
(Provide as-built drawings on back of this form)

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

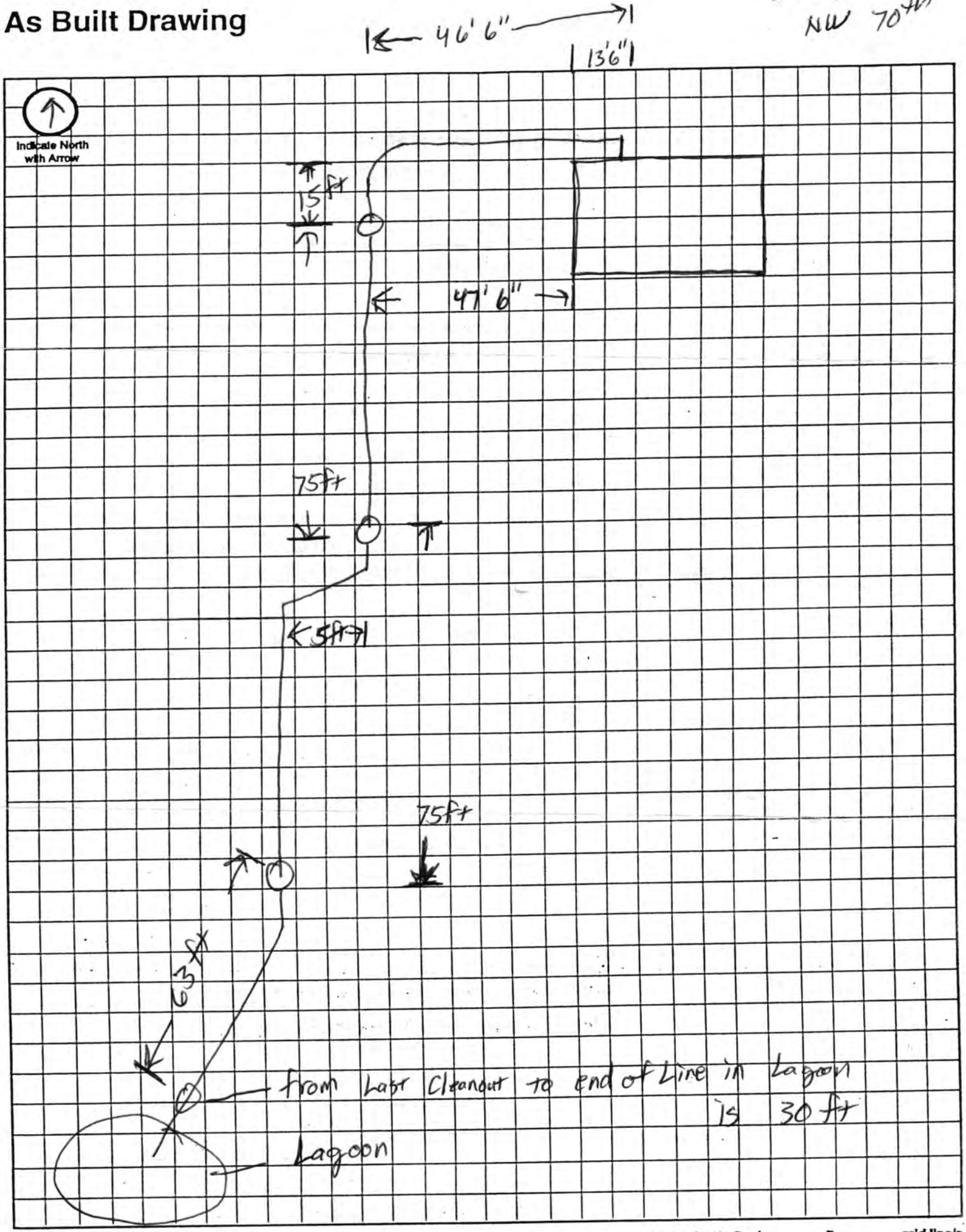
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



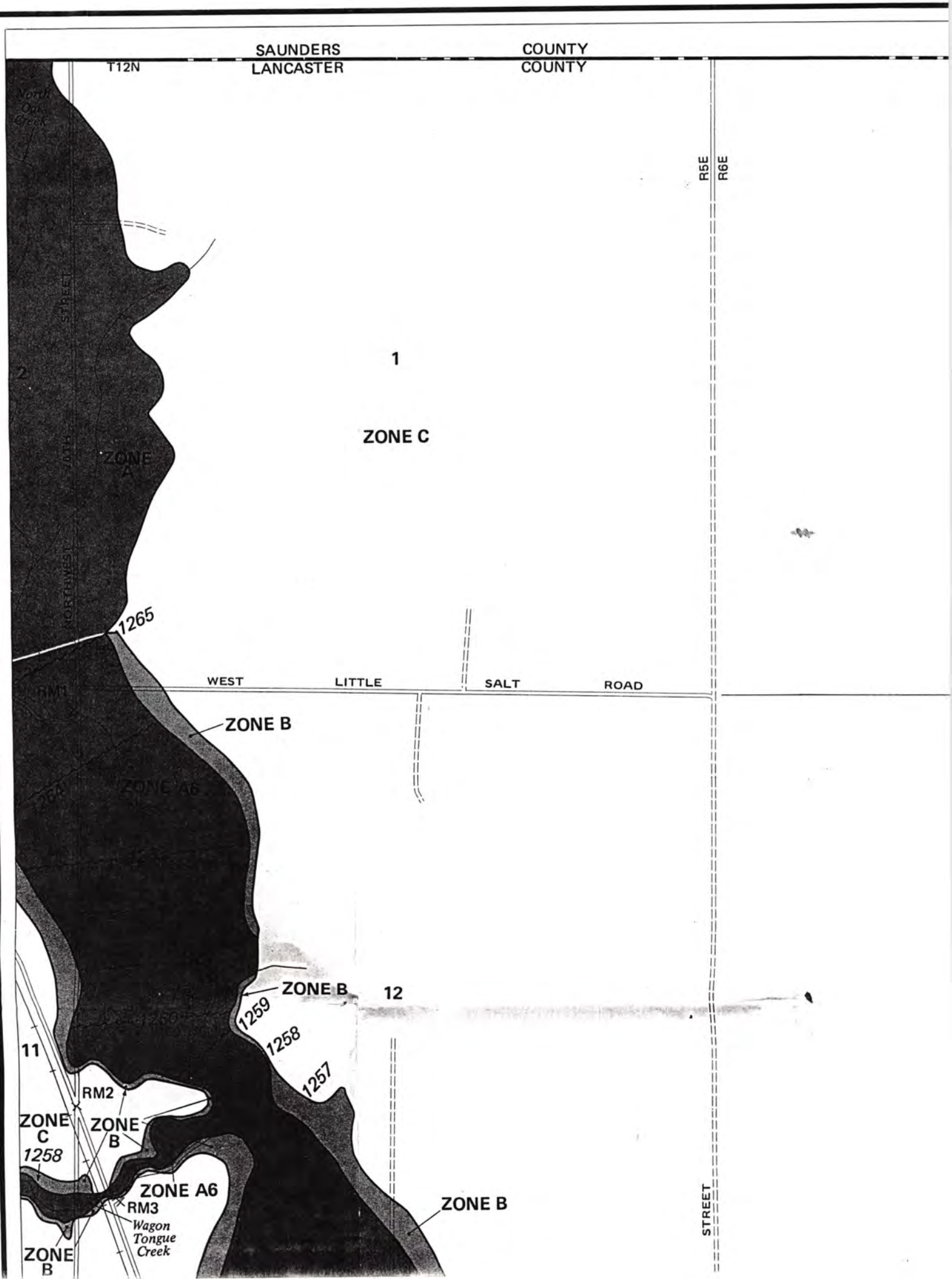
As Built Drawing

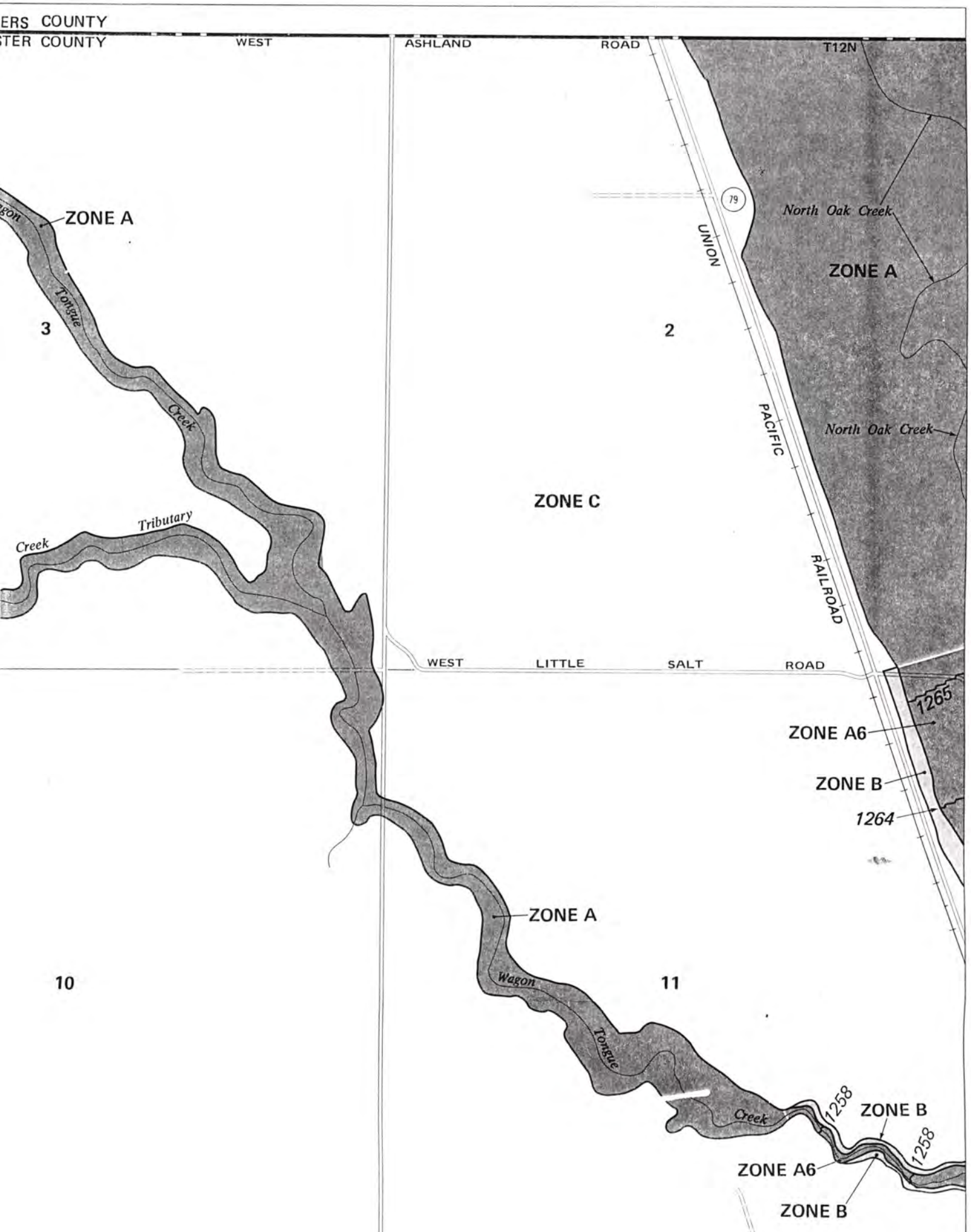
23403
NW 70th



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


2
N
lagoon
R. 5 E.
R. 6 E.
1 Mile
5000 Feet
Scale 1:20000
(Joins sheet 1)
(Joins sheet 8)
2 740 000 FEET
500 000 FEET
Oak Creek
Wagon Tongue Creek
North
UNION PACIFIC
Agnew
1
2
6
7
11
12
13
14
18


SAUNDERS COUNTY
LANCASTER COUNTY
T12N
R5E
R6E
North Oak Creek
70TH STREET
NORTHWEST
1
2
ZONE C
ZONE A
1265
WEST LITTLE SALT ROAD
RM1
ZONE B
ZONE A6
ZONE B
12
1259
1258
1257
11
RM2
ZONE C
1258
ZONE B
ZONE A6
RM3
Wagon Tongue Creek
ZONE B
ZONE B
STREET


ERS COUNTY
STER COUNTY
WEST
ASHLAND
ROAD
T12N
79
UNION
PACIFIC
RAILROAD
North Oak Creek
ZONE A
ZONE A
3
2
Tongue
Creek
Creek
Tributary
ZONE C
North Oak Creek
WEST
LITTLE
SALT
ROAD
1265
ZONE A6
ZONE B
1264
ZONE A
10
11
Wagon
Tongue
Creek
1258
ZONE B
1258
ZONE A6
ZONE B