# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

## PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380190001

Issued 12/01/98
Expires 06/01/99
Revenue Code 3157

FEES: $150.00

PAID

Establishment

JIM KRUPICKA
T1ON R5E SEC 32
12300 W VAN DORN ST-DENTON

TOTAL $150.00

Permittee

JIM KRUPICKA
7131 CASS ST
DENTON NE 68339

Issued By Health Director
Lincoln-Lancaster County Health Department

008350

**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: 98801900

# 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 12300 W. VANDORN STREET City DENTON NE, Zip 68339
(no rural route)

Legal Description Sec 32 T10N R5E 2
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 JIM KRUPICKA Signature [signature]

Address 7131 CASS ST City/State/Zip DENTON, NE 68339

☐ Check if owner designed system Home Phone 797-2772 Work Phone 434-5446

### C. Contractor

Name MELVIN GAGNER Company Name GAGNER CONSTRUCTION

Address 4810 W. CLAIRE City/State/Zip LINCOLN NE

☒ Check if contractor designed system Work Phone 432-5698

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

Designer Name Melvin Gagner Firm Gagner Const Work Phone 432-5698

### E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 1 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 12-1-98 Date frwd 12/3/98 ACTION ☒ Approved ☐ Disapproved Signature [signature]
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12.3.98 Date frwd 12.3.98 ACTION ☒ Approved ☐ Disapproved Signature [signature]
3. **City or County Engineer** Date rec'd 12/03/98 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature [signature]

12-4-98, mm

## Installation Final Written Approval

By Ron Mayeux

Date 12-4-98

***Business Office Use Only***
Date Rec'd 12/01/98
Amt Paid 150.00
Rec'd By [signature] ~~Cash~~/Check No. 222

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

**B**

Permit Number: 98380 1900

# Sewage Disposal System

## Soil Absorption Test Data Report

## Annex to Application

PLEASE PRINT OR TYPE

### System Location (Indicate correct number and street)

Address 12300 West VAN DORN ST. City DENTON NE, Zip 68339
(no rural route)

Owner JIM KRUPICKA Addresss 7131 CASS DENTON 68339.

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

Date of Tests 25 NOV to 26 NOV Weather: Precipitation 0 Temperature 65

### 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 | 29 | 25 NOV | 10:00 | 26 NOV | 9:30 | 26 NOV | 11:00 | 6 | 26 NOV | 11:30 | 30 | 1/2 | 60 |
| 2 | 31 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| 3 | 28 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| 4 | 30 | " | " | " | " | " | " | " | " | " | " | 3/4 | 40 |
| 5 | 30 | " | " | " | " | " | " | " | " | " | " | 1/2 | 60 |
| 6 | 32 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Sum of Percolation Rates: 304
Average of Rates: 50.6
Rate Used for Calculation: 60 MIN/IN

### Person Conducting Percolation Tests

Name: JIM KRUPICKA
Phone: 797-2772
Address 7131 CASS St
DENTON, NE 68339

DO NOT WRITE BELOW THIS LINE

### Reviewing Action

Remarks VARIABLE SOILES USE 60 MIN/IN FOR CALCULATING SIZE OF SYSTEM,

Signature of Reviewing Official _____ Date 12-1-98

FORM 23-101 10-96

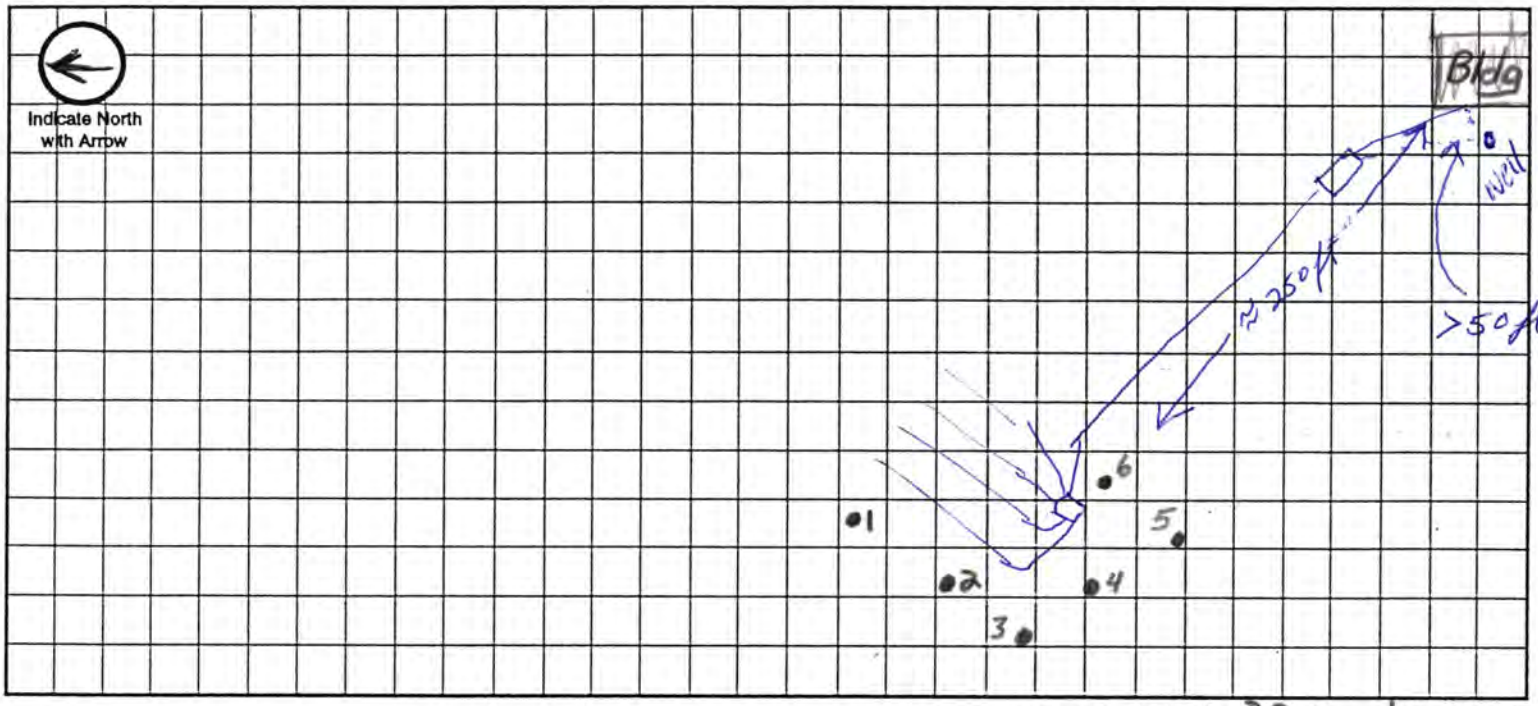
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 98380/900

# 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) 12300 West Vandorn Street City Denton NE, Zip 68339

## B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: SILTY CLAY LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 330 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 400 ft. Number of Trenches ~~3~~ 4 Trench Width 36

## 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 N/A EXISTING STRUCTURE Date _____

Installer Melvin J. Gagner Date 30 NOV 98

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: 98380190D

# Sewage Disposal System

## As Built Plans & Specifications

Date 12/4/98

**System Location (Indicate correct number and street)**

Address 2300 "W" VAN DORN City DENTON NE, Zip 68
(no rural route)

### A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: NA in.
   or distance below basement floor: NA in.
3. Distance between dwelling and septic tank: 138 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 20 ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

### B. Septic Tank

1. Material: CEMENT
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade 6 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line 100 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

### C. Distribution Box

1. Material: PLASTIC
   Number available outlets: 7
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 162'6" ft.

### D. Absorption Field

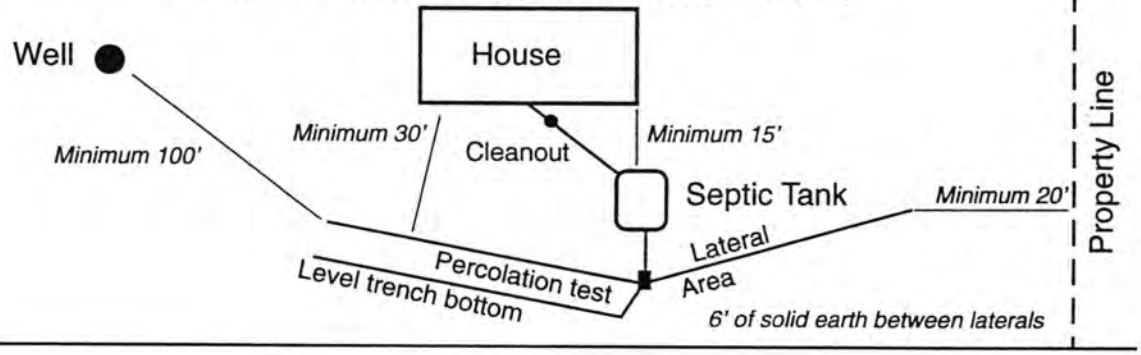
*(Provide as-built drawings on back of this form)*

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 100 ft.
   100 ft. 100 ft., _____ ft.
3. Trench dimensions: Width 36 ft.
   Slope 3 in/100 ft.
   Average depth 24 in
4. Filter material: GRAVEL
   Depth of material 12 in.
5. Distances to: Well or suction line 200 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

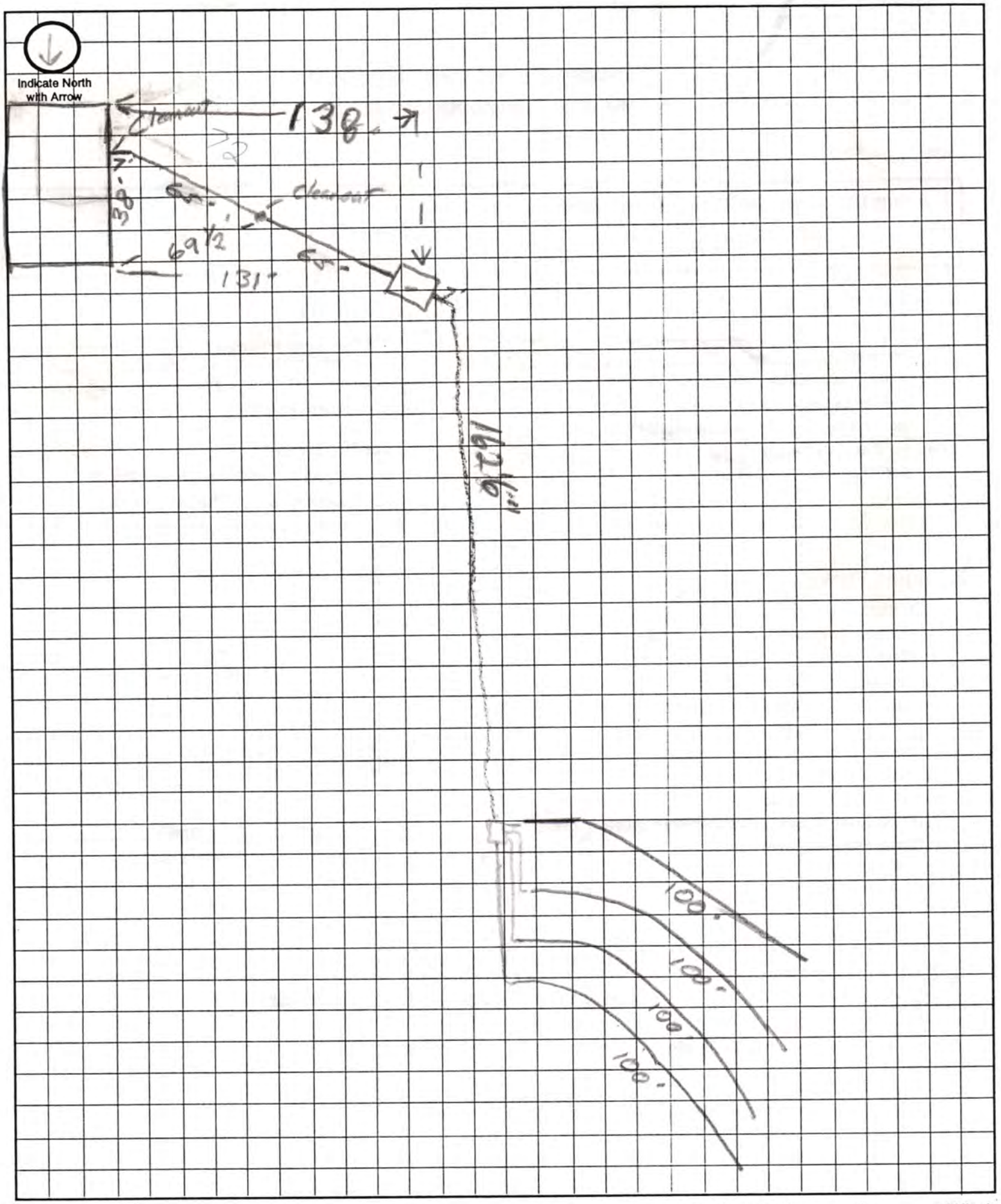
Indicate North with Arrow

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

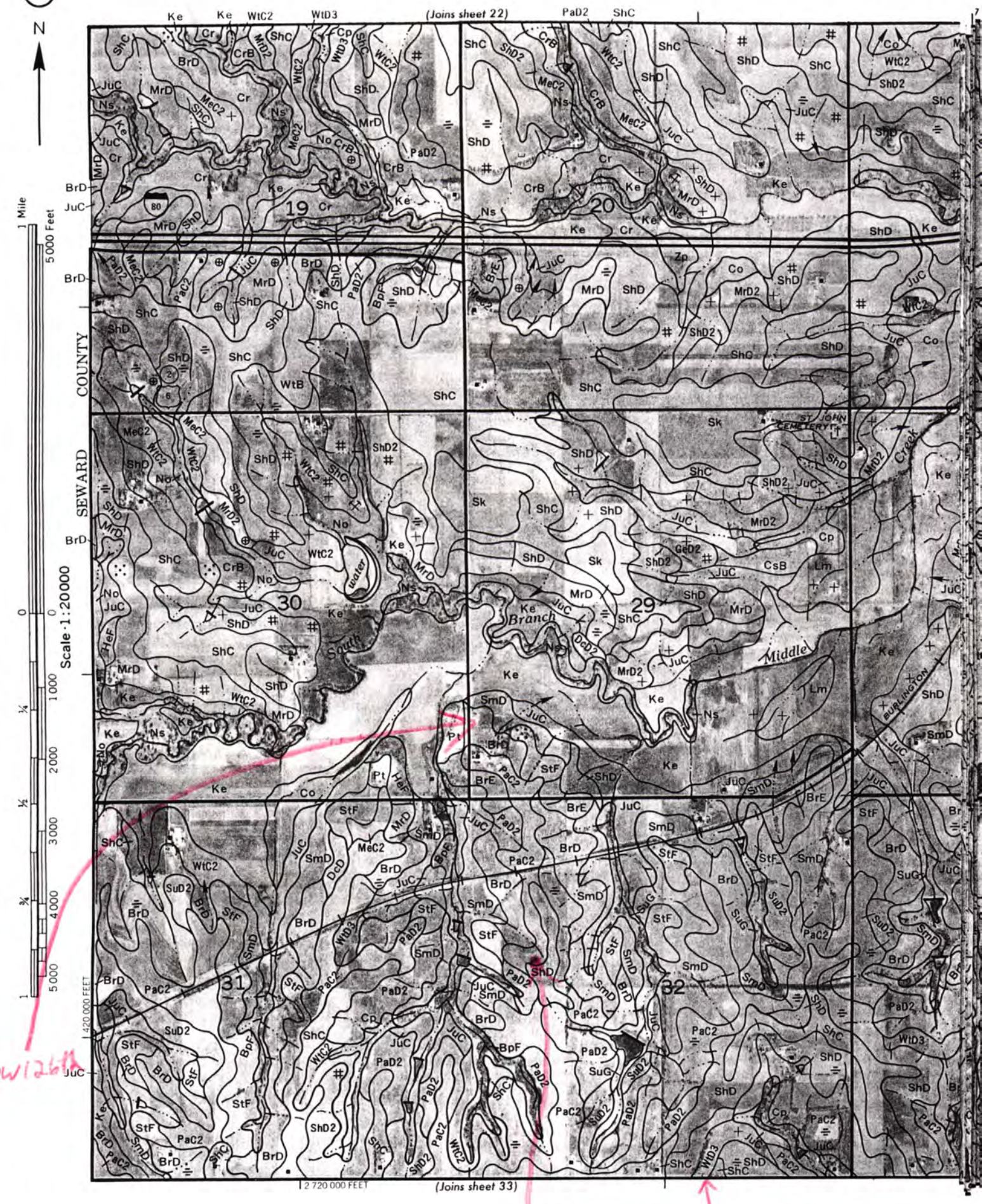
**Individual Sewage System Design (Example)**



# As Built Drawing




Approximate Scale: _____ft. = _____ grid line/s


28
N
(Joins sheet 22)
(Joins sheet 33)
(Joins sheet 26)
SEWARD COUNTY
T 10 N
1 Mile
5000 Feet
Scale 1:20000
1 420 000 FEET
2 720 000 FEET
19
20
29
30
31
32
South Branch
Middle Creek
water
ST JOHN CEMETERY
BURLINGTON