Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

009001

Permit
SEWAGE SYSTEM REPAIR
SEWAGE REPAIR

Permit # 06390085301

Issued 05/30/06
Expires 05/30/07
Revenue Code 3157

Establishment
LARRY E ZIMAN
T11N R8E SEC 22 QTR SW
LOT 22IT
9802 N 148 ST-WAVERLY

FEES: $150.00

Permittee
LARRY E ZIMAN
9802 N 148 ST
WAVERLY NE 68462

TOTAL: $150.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

MAY 3 0 2006

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

☐ Municipal Code 24.38 ☒ County Resolution Number 2832

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 11N Range 5E Section 22 1/4 Section SW
   Block ____ Lot 22 E.T. Addition ____
   Parcel ID 24 - 22 - 300 - 008 - 000 (i.e. 99-99-999-999-999)
   Street Address 9802 N. 148th St Waverly, NE 68462

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

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

4. **Description of proposed alteration, extension or repair** extend laterals

5. **Work to be done by:** ☐ owner ☒ contractor's name Lloyd Jirkovsky, Raymond Contracting, Inc.

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 Larry E. Zlman Address 9802 N. 148th St, Phone 402-786-3150
Applicant Signature (owner or lessee) Larry E Zlman Waverly, NE 68462

Please include the permit fee ($100) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

HEALTH DEPARTMENT USE ONLY

Date received 5/30/06 REVIEW: ☒ Approved ☐ Disapproved By: Jerrold C. Hood

Site visits
Date 5/__/06 By Jerrold Hood
Date __/__/__ By ____
Date __/__/__ By ____

Installation final written approval
Date 5/30/06 By Jerrold Hood

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: 5/30/06 Amount $150.00 Check No. 6161 Initials CW

White - Division Copy Pink - Business Office Revised 9/00

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 5-25-06 Ziman

System Location (Indicate correct number and street)

Address 9802 N 149th St (no rural route) City Waverly NE, Zip 68462

A. Building Sewer old SewerLine.

1. Material: _____
   Diameter: _____ 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. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: concrete.
   Number of compartments: one
2. Capacity: _____ gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter [illegible] in.
   Over outlet, diameter 6" in.
   Riser: ☒ above ☐ below grade middle Tank at grade in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 30 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50+ ft.

C. Distribution Box

1. Material: PLASTIC
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8' ft.

D. Absorption Field

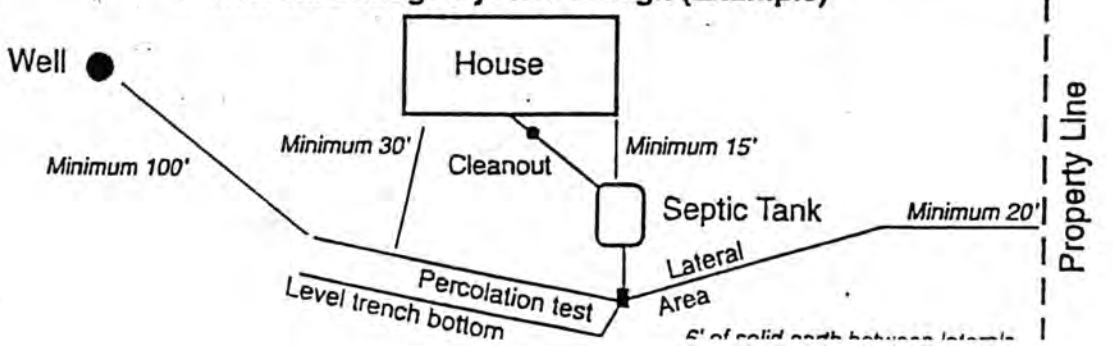
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 34" wide 12" Tall
   or perforated pipe: Quick 4
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 90' ft. 25' ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 40" ft.
   Slope Flat in/100 ft.
   Average depth 4'6" in
4. Filter material: Dirt
   Depth of material 4'6" in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 50+ ft.

Indicate North with Arrow

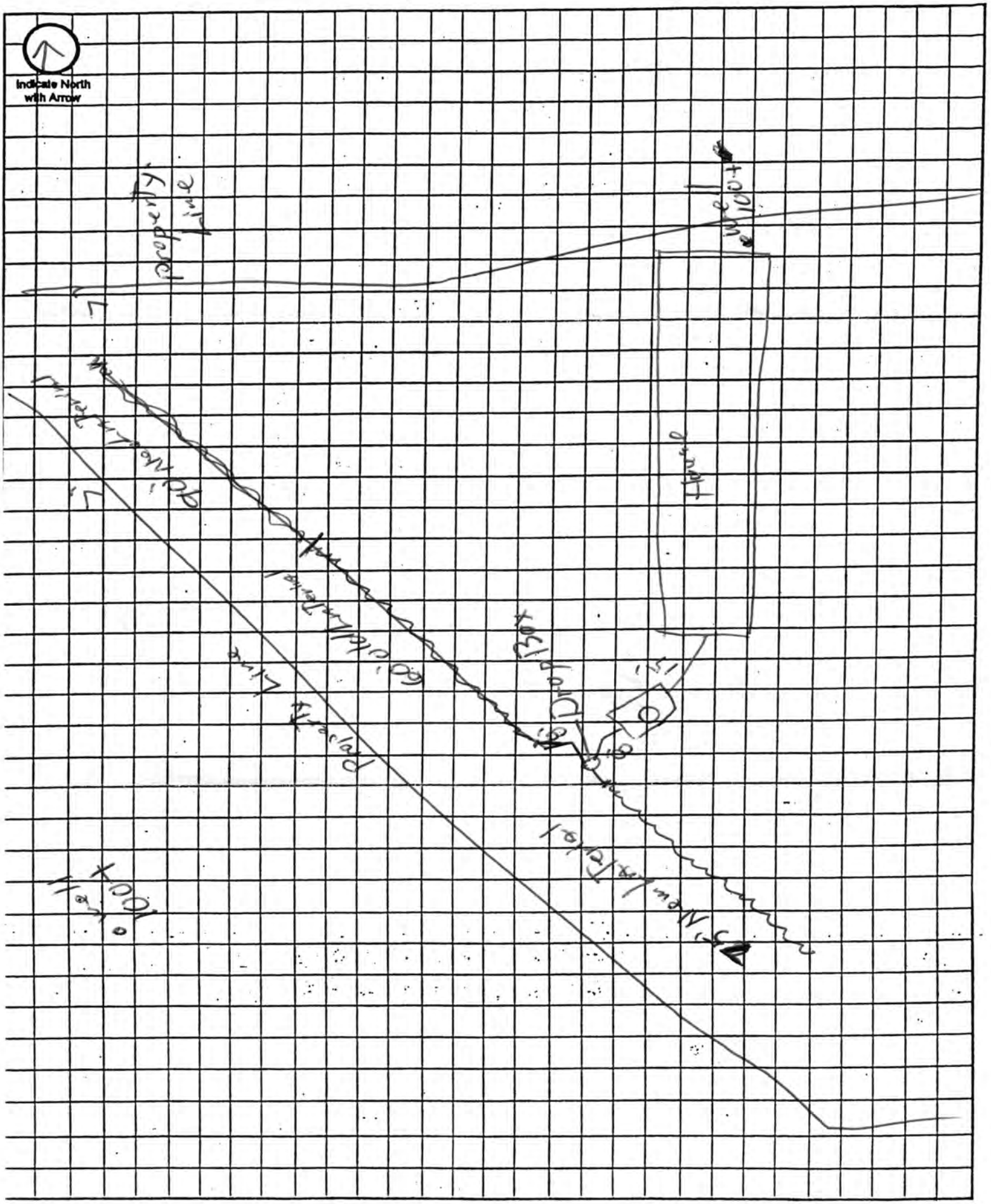
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1371-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JANUARY 20, 1979 — THIS PERMIT EXPIRES

Eldon Kroese, Waverly, NE 68462 — ISSUED TO / ADDRESS

T11N, R8E, Section 22 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

A

FILING FEE: $ 30.00

FILE NO. 1371-C

DATE: 7-10-78

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11N ; Range 8E ; Section 22 ; Block _____ : Lot _____ : Addition SEE ATTACHED
   Street Address _____

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☐

4. Distance to public sewer: _____ ft.

Eldon Kroese
Signature of Applicant (Owner or Lessee)

Waverly
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/20/78. Date Frwd. 7/20/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7-12-78 Date Frwd. 7-12-78. ACTION: Approved ☒ Disapproved ☐ Signature: Patricia Beeson

3. City or County Engineer: Date Rec'd. 7-20-78. Date Frwd. 7-20-78. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: _____ by: _____
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

B

FILE NO. 1371-C

PROPERTY WHERE SOIL TESTED:

Location: Township 11 N ; Range 8E ; Section & ¼ Section 22 .
Property Dimensions: 792 ft. x 215 ft. Area: 1 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 7-10 to 7-11 . Weather: Precip. ____ Temp. ____ .

OWNER: E Krose

Address: Waverly

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
		7-10	1200	7-11	1200	7-11	3.30	6"	4.00	5 3/8	30	5/8	
		7-10	1200	7-11	1200	7-11	3:30	6"	400	5 1/4	30	3/4	
		7-10	1200	7-11	1200	7-11	3-30	6"	400	5 1/2	30	1/2	
		7-10	1200	7-11	1200	7-11	3-30	6"	400	5 1/2	30	1/2	
		7 10	1200	7-11	1200	7-11	3 30	6"	4:00	5 3/8	30	5/8	
		7-10	1200	7-11	1200	7-11	330	6"	400	5 5/8	30	5/8	

Eldon Krose
Signature of Person Conducting Test

Address Waverly Phone 786 5010

Sum of Percolation Rates: ____
Average of Rates: ____
Mean of Rates: ____

(Do not write below this line)

REVIEWING ACTION

Remarks: ____

Soil Type (SCS): Sharpsburg or Wymore Silty Clay Loam

Date: July 17, 1978

Approved Percolation Rate (a)
A. 48 min./inch
B. ____ min./inch
C. ____ min./inch

Gerrold C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

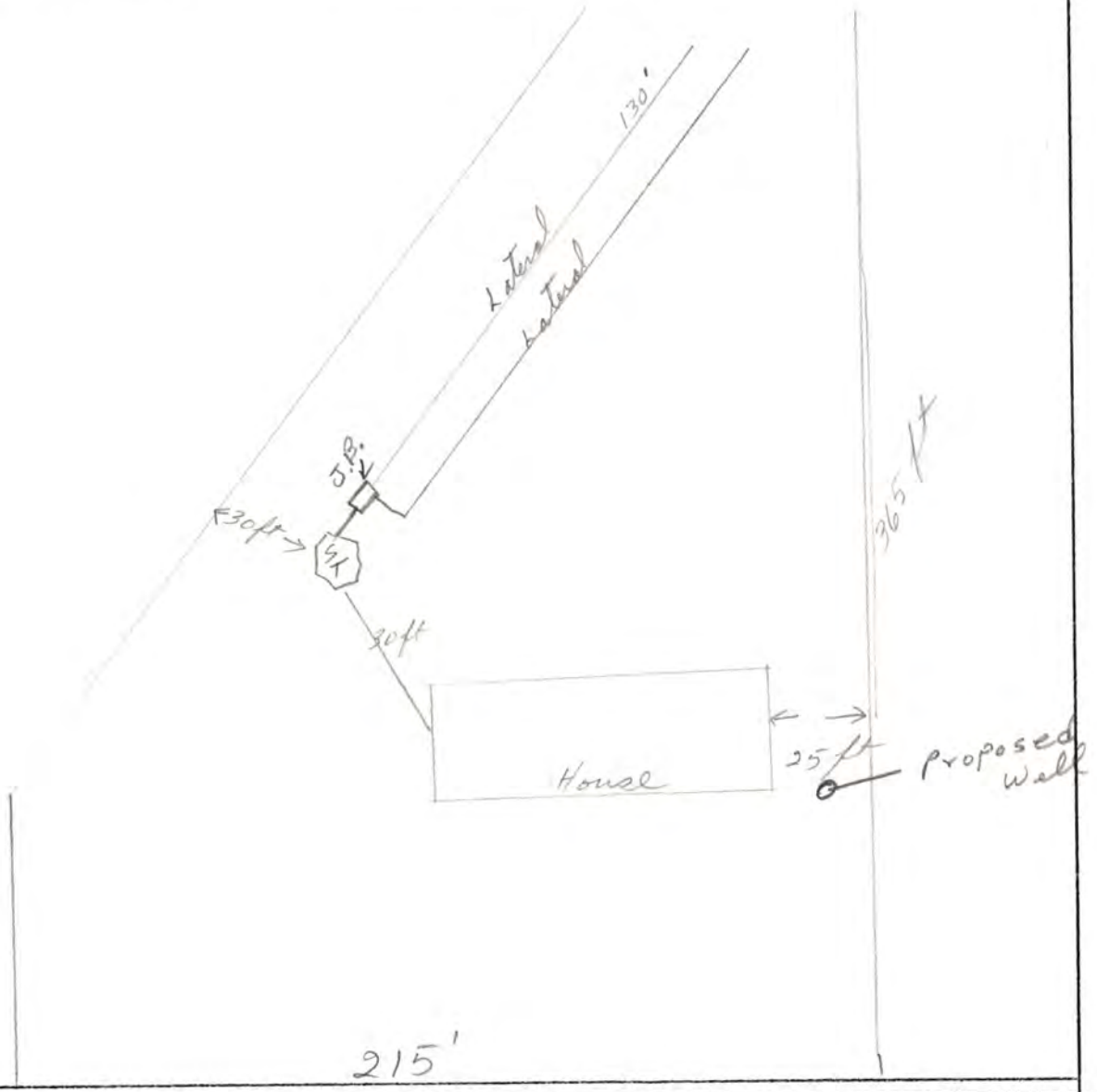
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 1371-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: July 20, 1978

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 611 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

Beginning at a point
50' East of NW corner
of S. W 1/4 Sec. 22, T11N,
R8E, thence East 1257', thence South
160', thence West 269', thence South
55', thence West 293' thence
Northwesterly 341' to
a point 26' South of
the 1/4 section line, thence West
427', thence North 26' to the
point of beginning

