Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005736

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 04380290301

Issued 09/24/04
Expires 03/24/05
Revenue Code 3157

Establishment

NICKEL INVESTMENTS LLC
T11N R7E SEC 28 QTR SW
LOT 36
7960 N 56 ST #2

FEES: $200.00

Permittee

NICKEL INVESTMENTS LLC
7551 W WAVERLY RD
MALCOLM NE 68402

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

SEP 2 4 2004

A

Permit Number: 04380290301

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 7960 N. 56th St (no rural route) City Lincoln NE, Zip 68514

Legal Description 28 11N 7E BTW Business Park Condo Unit 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 Nickel Investments LLC Signature James L Nickel

Address 7551 W Waverly Rd City/State/Zip Malcolm, NE 68402

☐ Check if owner designed system Home Phone 402-796-2341 Work Phone 402-796-2321

C. Contractor (Building)

Name Owner Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Lloyd Jakoubek Firm Raymond Contracting, Inc Work Phone 402-890-6009

E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms _____ Is there a Whirlpool Bathtub YES NO

☒ Commercial Establishment/Other Facility Specify Diesel mechanic Repair Shop

Design flow in gallons per day 200 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 9/24/04 Date frwd 9/27/04 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9/27/04 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 9/27/04 Date frwd 9/27/04 ACTION ☒ Approved ☐ Disapproved Signature Chase D. Baker

~~11/17/04 Need drawing for file~~

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date NOVEMBER 22, 2004

Business Office Use Only
Date Rec'd 9/24/04
Amt Paid $200.00
Rec'd By CW Cash/Check No. 5493

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

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

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 7960 N. 56th St (no rural route) City Lincoln NE, Zip 68514

Owner Jim Nickel Addresss 7551 W Waverly Rd. Malcolm NE 68402

Soil Type (SCS): _____ Percolation Rate: 10 min./inch

Date of Tests 8-4-04 to 8-5-04 Weather: Precipitation 0 Temperature 78°

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	8-4	11:45a	8-4	3:45p	8-5	1:00p	6	8-5	5:00p	30	3 3/4	3.75/30 = 8
*2	32	"	"	"	"	"	1:35p	"	"	2:35p	10	2	2.00/10 = 5
3	31	"	"	"	"	"	1:00p	"	"	5:00p	30	2 3/4	2.75/30 = 11
4	30	"	"	"	"	"	"	"	"	"	30	1 7/8	1.88/30 = 16
*5	32	"	"	"	"	"	1:35p	"	"	2:35p	10	1 3/8	1.38/10 = 7
6	28	"	"	"	"	"	1:00p	"	"	5:00p	30	2 1/2	2.50/30 = 12

Person Conducting Percolation Tests

Name: Terri Jakoubek, Raymond Contracting, Inc

Phone: 402-783-2663 or 402-850-3870

Address 13800 NW 70th St
Raymond, NE 68428

#P1198

Sum of Percolation Rates: 59

Average of Rates: 10

Rate Used for Calculation: 10

Holes 2 & 5 measured at 10 minute intervals for 1 hour

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

C

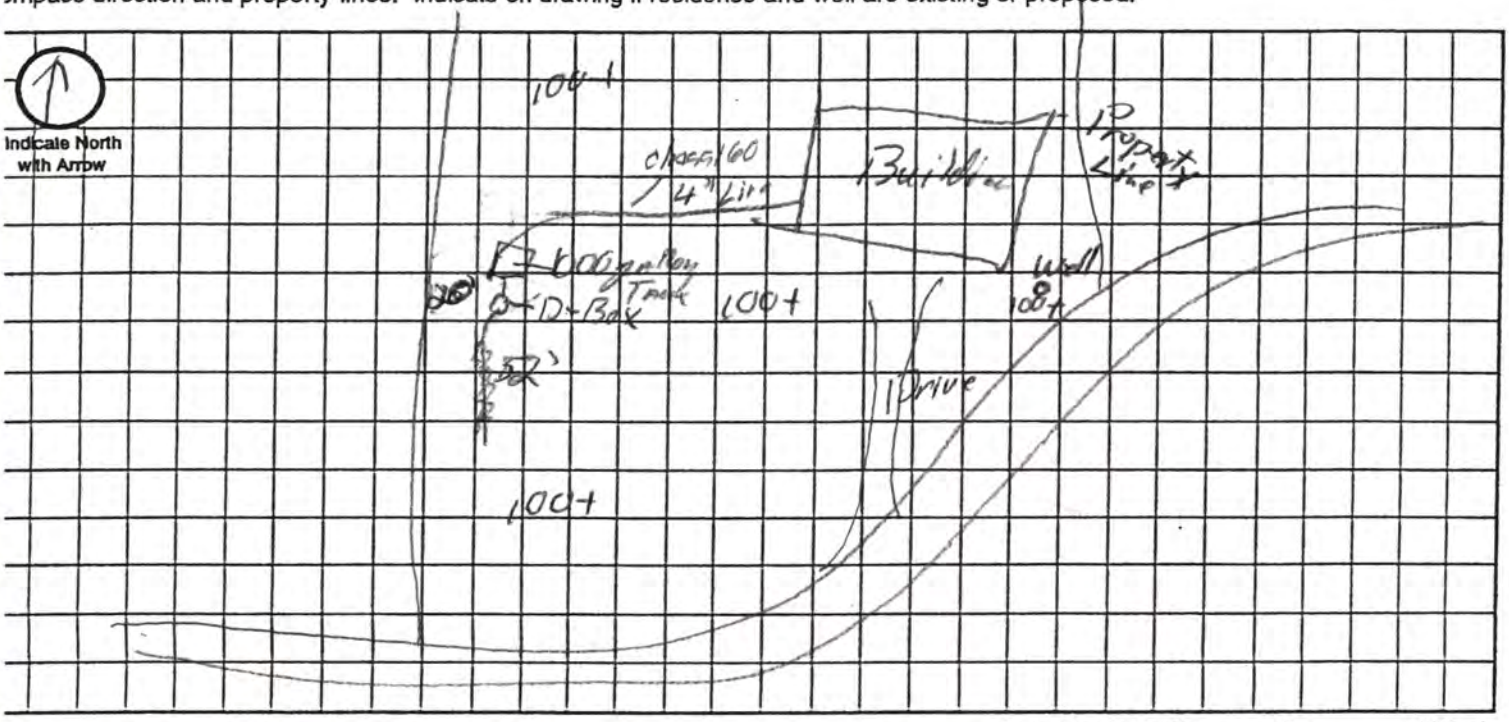
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Permit Number:

Sewage Disposal System

Preliminary Plan Specifications

raw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, ompass 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) 7960 N. 56th St City Lincoln NE, Zip 68514

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 10 mpi (min. per inch) Soil Type: _____ Land Slope: Flat %

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

Total Square Feet of Field Required: 165 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: AOS H-10

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 52 ft. Number of Trenches 1 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 _____ Date 9-19-04

Installer _____ Date 9/19/04

NOV 2 2 2004

D

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Permit Number:

Nickel Investments

Sewage Disposal System
As Built Plans & Specifications

Date 11-17-04

System Location (Indicate correct number and street)

Address 7960 N. 56th St (no rural route) City Lincoln NE, Zip 68514

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 48 in. - frost footing
3. Distance between dwelling and septic tank: 147 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1,000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade at grade 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 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: plastic
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10 ft.

D. Absorption Field

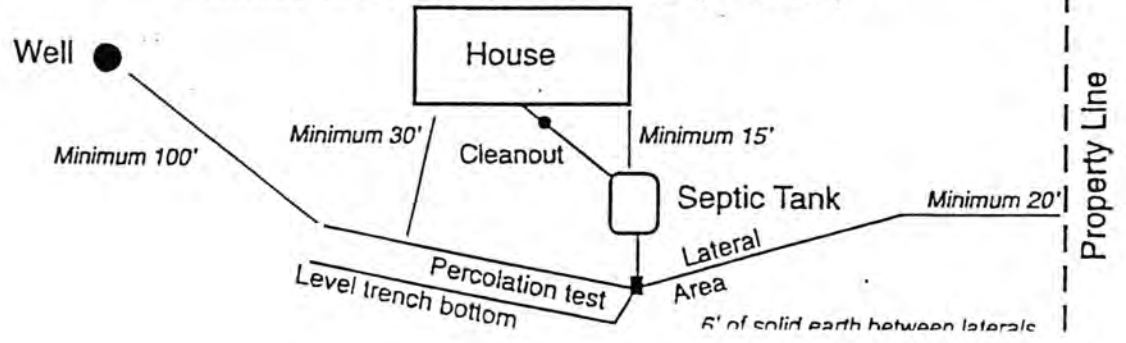
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 11" tall 34" wide
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 1
   Length of each line: 56.25 ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope flat in/100 ft.
   Average depth 36 in
4. Filter material: dirt
   Depth of material 36 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ 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

