Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment

JAMES L HERGENRADER
T11N R7E SEC 15
FINIGAN RIDGE ADDN BLK 2 LOT 2
11800 N 79 ST

Permittee

JAMES L HERGENRADER
5731 LOCUST ST
LINCOLN NE 68516

Permit # 02380257101

Issued 12/05/02
Expires 06/05/03
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

003118

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

A

Permit Number: 02380257101

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 11800 N 79th (no rural route) City Lincoln NE, Zip 68517

Legal Description 1/4 1/4 Section 15 Township 11N Range 7E Subdivision Finigan Ridge Addition Addition 2 Block 2 Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name James L. Hergenrader Signature _____

Address 5731 Locust St. City/State/Zip Lincoln NE 68516

☐ Check if owner designed system Home Phone 402-488-3030 Work Phone 402-489-2070

Cell 402-890-8066

C. Contractor

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 Scott Haes Firm HAES CONTRACTING INC Work Phone 402-499-1166

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 12/5/02 Date frwd 12/5/02 **ACTION** ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12/5/02 Date frwd 12/5/02 **ACTION** ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 12/5/02 Date frwd 12/5/02 **ACTION** ☒ Approved ☐ Disapproved Signature Chase Baker

11-24-03, mm over 300 ft of drainfield
7/7/03 tank, sewer + 1 lateral. J.C.H.

Installation Final Written Approval

10-30-03. extra 50ft added

By Ron Morgan

Date 11-10-03

Business Office Use Only

Date Rec'd 12/05/02
Amt Paid 200.00
Rec'd By _____ ~~Cash~~/Check No. 3944

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:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 11800 N. 79th (no rural route) City Lincoln NE, Zip 68517

Owner James Hergenrader Address 5731 Locust.

Soil Type (SCS): Sharpsburg Silty Clay Loam Percolation Rate: _____ min./inch

Date of Tests _____ to _____ Weather: Precipitation _____ Temperature _____

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)
											30	1 3/4	17
											"	1/2	60
											"	3/4	40
											"	3/4	40
											"	1 1/8	27
											"	2	15
											"		

Person Conducting Percolation Tests

Name: James Hergenrader

Phone: 489-2070

Address 5731 Locust
Lincoln NE 68516

Sum of Percolation Rates: > 20 min/in Variation

Average of Rates: _____

Rate Used for Calculation: use 60 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Need to compare this perc rate with Soils Map of area.

Signature of Reviewing Official Ron Mengarelli Date 12-2-02

FORM 23-101 10-96

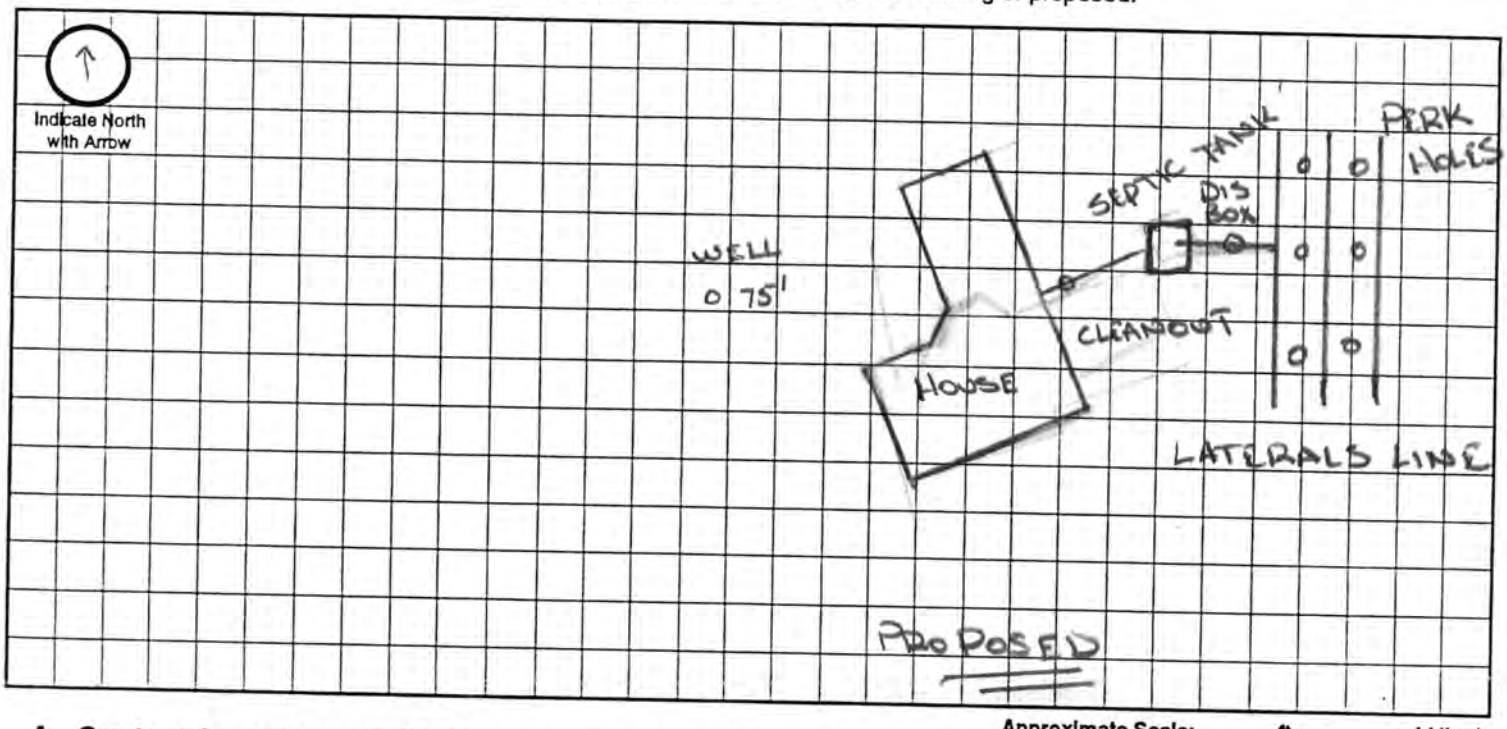
Lincoln-Lancaster County Health Department
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C

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: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 11800 N 79th City Lincoln NE, Zip 68517

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: _____ Land Slope: _____ %

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

Total Square Feet of Field Required: ~~1750~~ 1400 sq. ft.

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

Capacity of Septic Tank 1750 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals ~~438~~ 350 ft. Number of Trenches 4 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

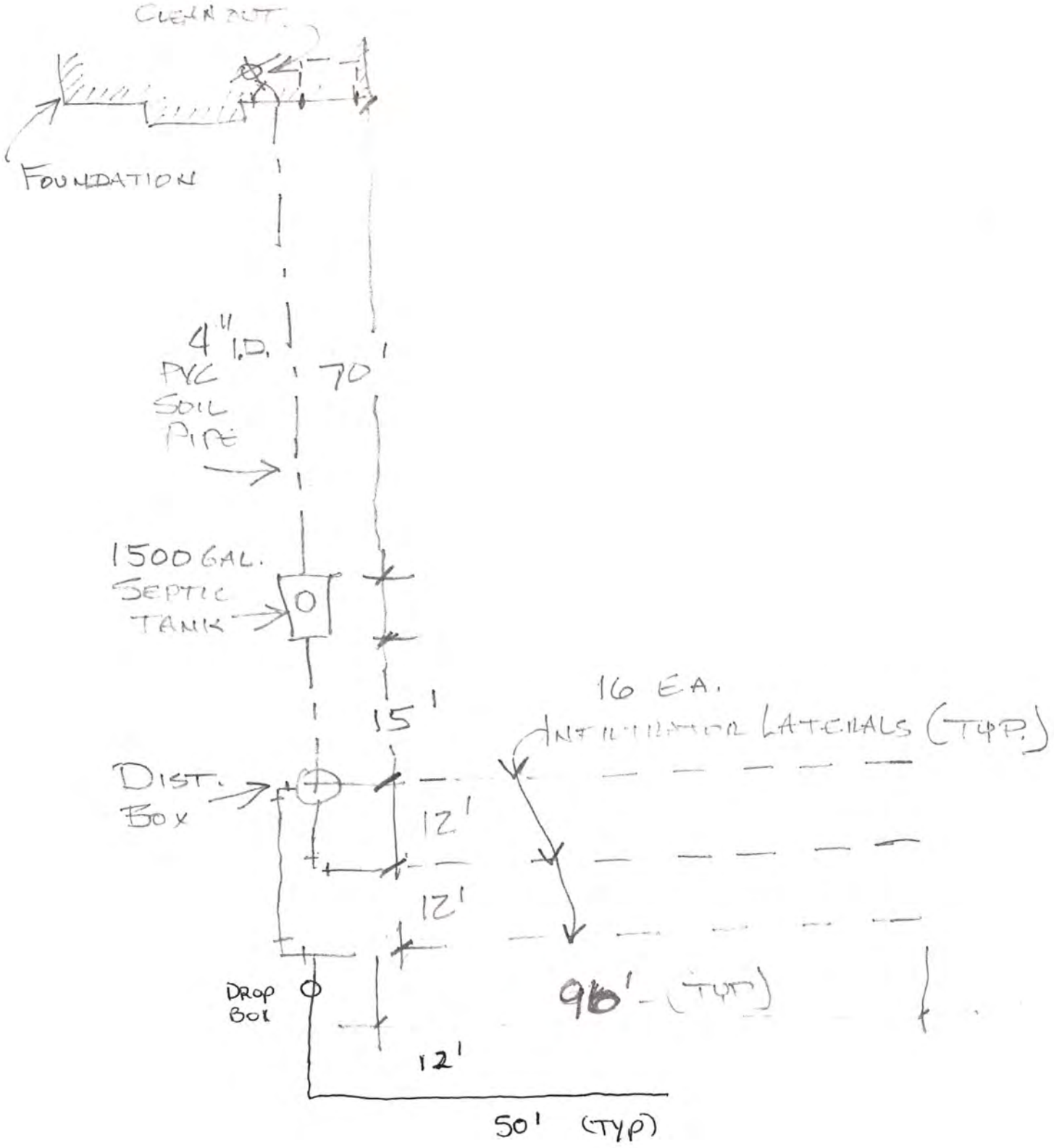
Home Building Contractor _____ Date _____

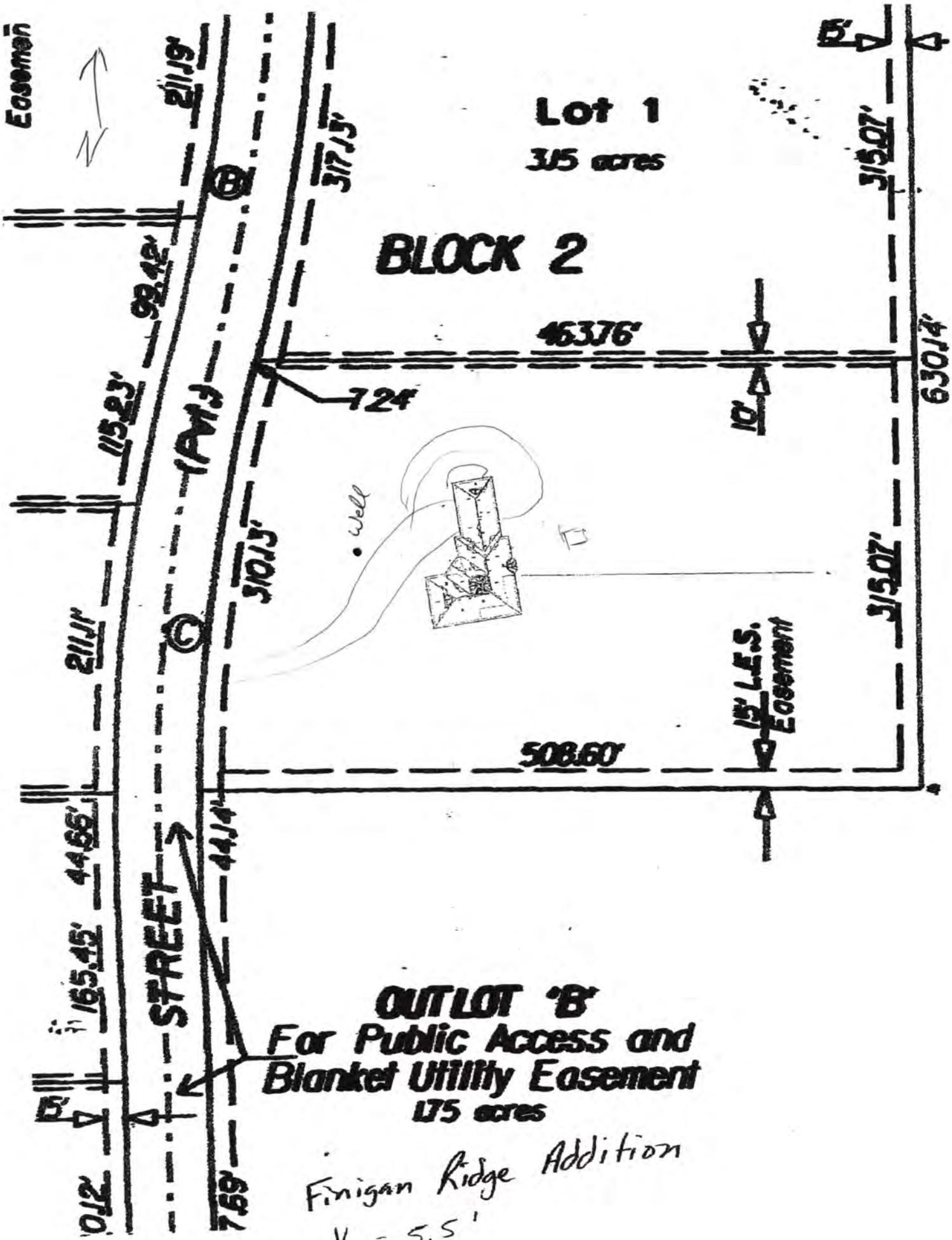
Installer HAES CONTRACTING INC. Date 12-3-02

N 79TH & WAVERLY RD.

JIM HEINZEMANN

SEPTIC SYSTEM




Lot 1
3.5 acres
BLOCK 2
OUTLOT 'B'
For Public Access and
Blanket Utility Easement
1.75 acres
STREET
Finigan Ridge Addition
1/16 = 5.5'
Well
15' U.E.S. Easement
Easement
463.76'
508.60'
630.14'
315.07'
317.15'
310.15'
724'
99.42'
115.23'
211.19'
211.11'
44.66'
44.14'
165.45'
769'
042'