Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit

SEWAGE INSTALLATION
OTHER SEPTIC
ENGINEERED SYSTEM

Establishment

DON JOHNSON HOMES
T11N R7E SEC 15
FINIGAN RIDGE ADDN BLK 1 LOT 6
FINIGAN RIDGE RD

Permittee

DON JOHNSON HOMES
5901 N 27 ST
LINCOLN NE 68521

Permit # 02380252901

Issued 08/30/02
Expires 03/02/03
Revenue Code 3157

FEES: $200.00
$100.00

TOTAL: $300.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002892

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

A

Permit Number: 02380252901

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 ~~11601~~ 11601 N. 79 City Lincoln NE, Zip 68517
(no rural route) 15 11N 7E

Legal Description Lot 6 Block 1 Finigan Ridge Addition 2nd 1 6
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 Don Johnson Homes Inc Signature _____
Address 5901 N. 27 City/State/Zip Lincoln NE 68521
☐ Check if owner designed system Home Phone 436-3228 Work Phone 432-0775

C. Contractor

Name Don Johnson Homes Company Name Don Johnson Home Inc.
Address 5901 N. 27 City/State/Zip Lincoln NE 68521
☐ Check if contractor designed system Work Phone 432-0775

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

Designer Name [signature] Firm D J Hall Work Phone 432-0775

E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms 5 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 8/30/02 Date frwd 9/4/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hook
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd ~~9-3-02~~ 9-3-02 Date frwd 9-3-02 ACTION ☒ Approved ☐ Disapproved Signature [signature]
3. **City or County Engineer** Date rec'd 9-4-02 Date frwd 9-4-02 ACTION ☒ Approved ☐ Disapproved Signature Dennis Bartels

1-6-03 mm
1-8-03 mm

Installation Final Written Approval

By ~~Ron~~ Ron Mangum
Date Jan-9-03

Business Office Use Only
Date Rec'd 08/30/02
Amt Paid 200.00
Rec'd By ms Cash/Check No. 11046 ms

100 Dac Rec'd 9-3-02 TW

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

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

B

Permit Number: 023802529

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 17601 N. 79 (no rural route) City Lincoln NE, Zip 68517

Owner Don Johnson Homes Inc Addresss 5901 N. 27 Lincoln NE 68521

Soil Type (SCS): _____ Percolation Rate: 70 min./inch

Date of Tests 4-14-02 to 4-15-02 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)
1	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	3/8	80
2	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	1/4	120
3	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	1/2	60
4	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	3/4	40
5	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	1/2	60
6	30	4-14-02	3:00 PM	4-15-02	17:30	4-15-02	17:30	6	4-15-02	18:00	30	1/2	60

Sum of Percolation Rates: 420
Average of Rates: 70
Rate Used for Calculation: 70

Person Conducting Percolation Tests

Name: Dave Vogt
Phone: 560-4267
Address P.O. Box 22753
Lincoln, NE 68542-2753

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

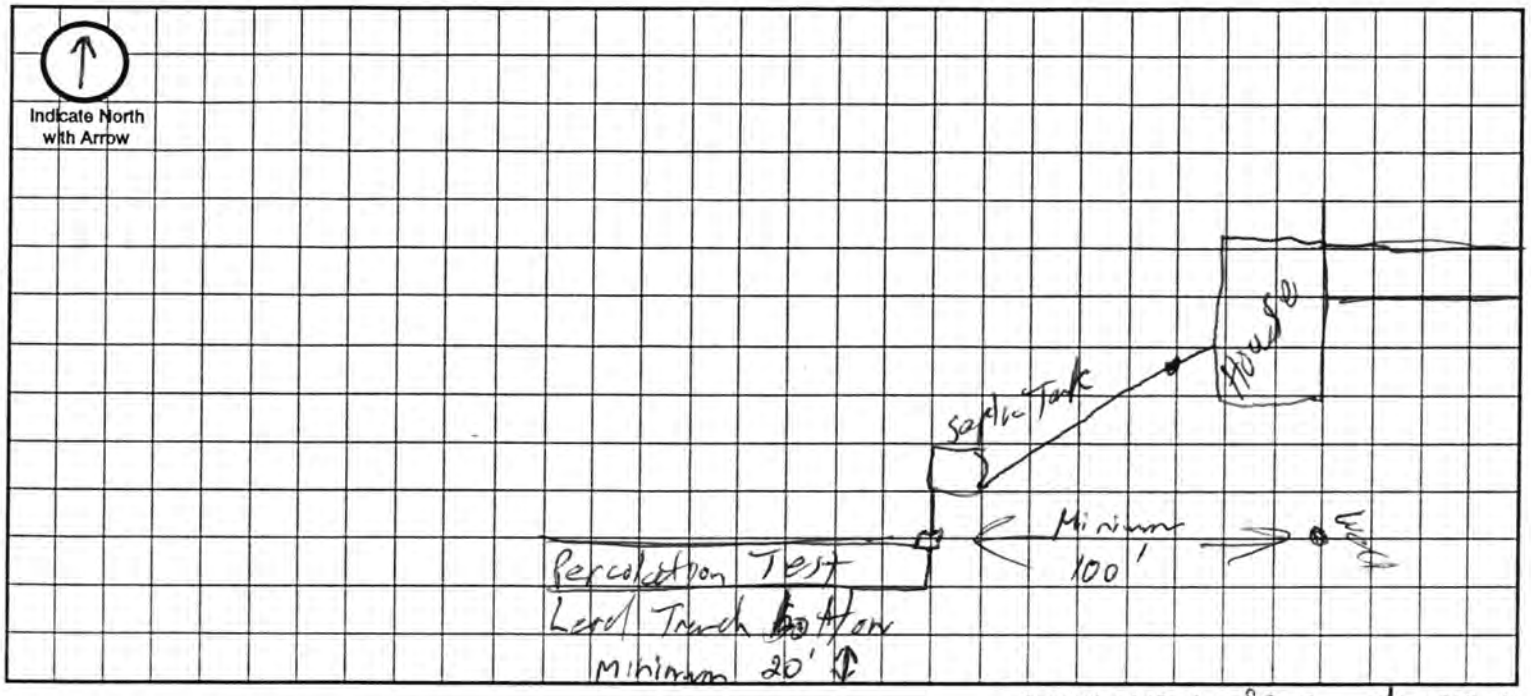
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 023802529

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 17601 N. 79 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 _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

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

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

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 8-30-02

Installer _____ Date 8-30-02

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:

Sewage Disposal System

As Built Plans & Specifications

Date 1-8-03

System Location (Indicate correct number and street)

Address 17601 North 79th (no rural route) City _____ NE, Zip _____

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 325 ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line ~~100~~ 100+ ft.
   stream NA ft.
   pressure line 75+ ft.
   property line 50+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 2000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 16 in.
   Over outlet, diameter 12 in.
   Riser: ☒ above ☐ below grade 3 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 100+ ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 50+ ft.

C. Distribution Box

1. Material: ~~4~~ PVC - Drop Box
   Number available outlets: 2 - Ea
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: 12' 6" ft.

D. Absorption Field

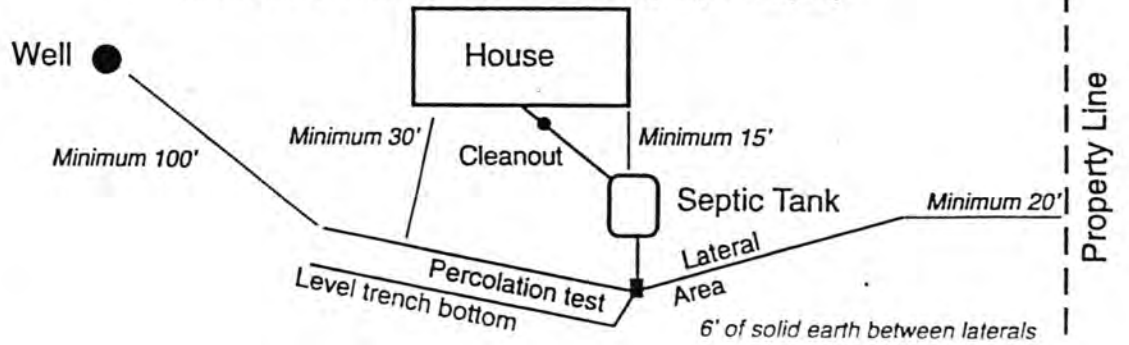
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: To Filtrator
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 80 ft. 80 ft.
   80 ft. 74 ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope Level in/100 ft.
   Average depth 28 in
4. Filter material: Sand
   Depth of material 20 in.
5. Distances to: Well or suction line 100+ ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 50+ ft.

Indicate North with Arrow

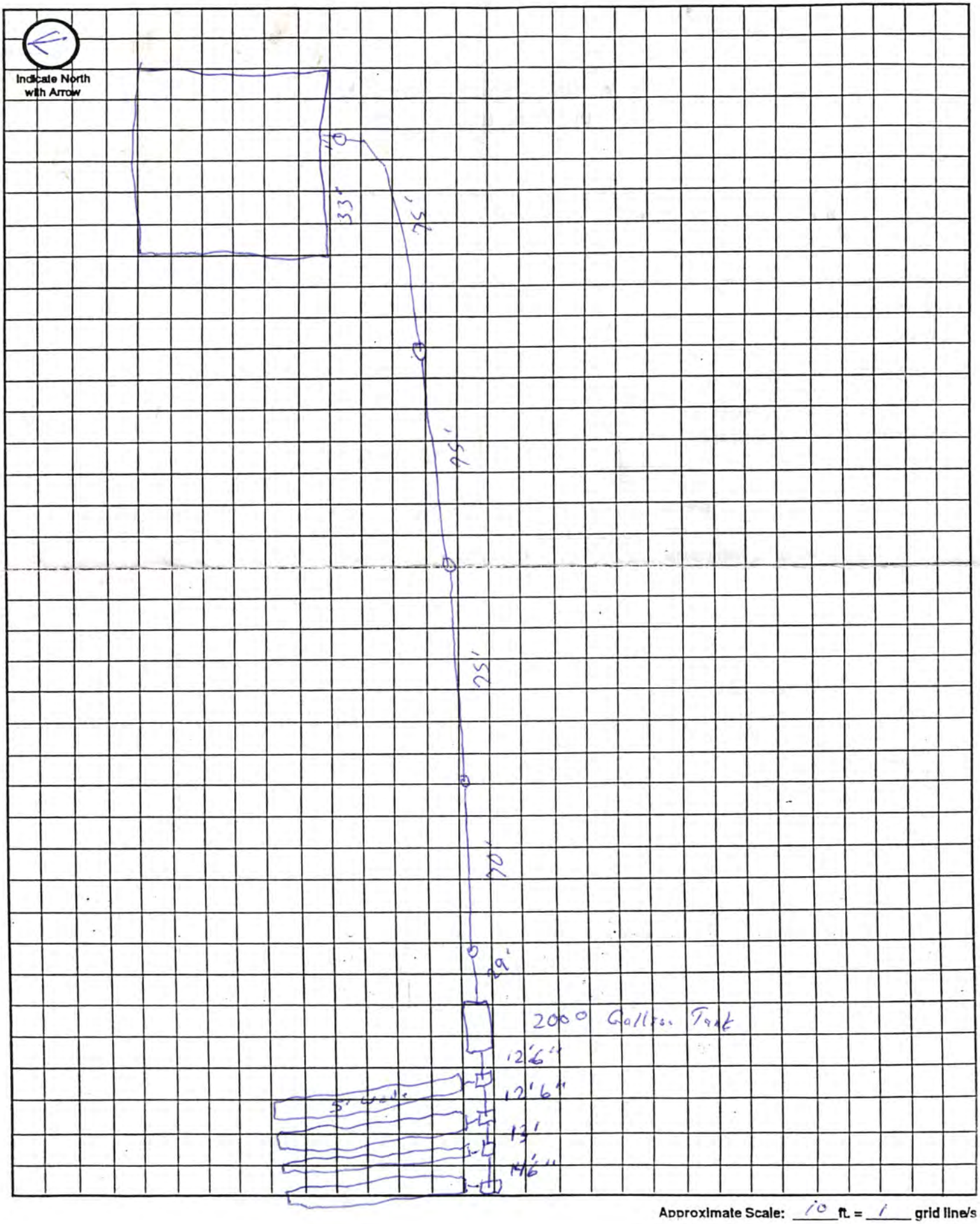
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)

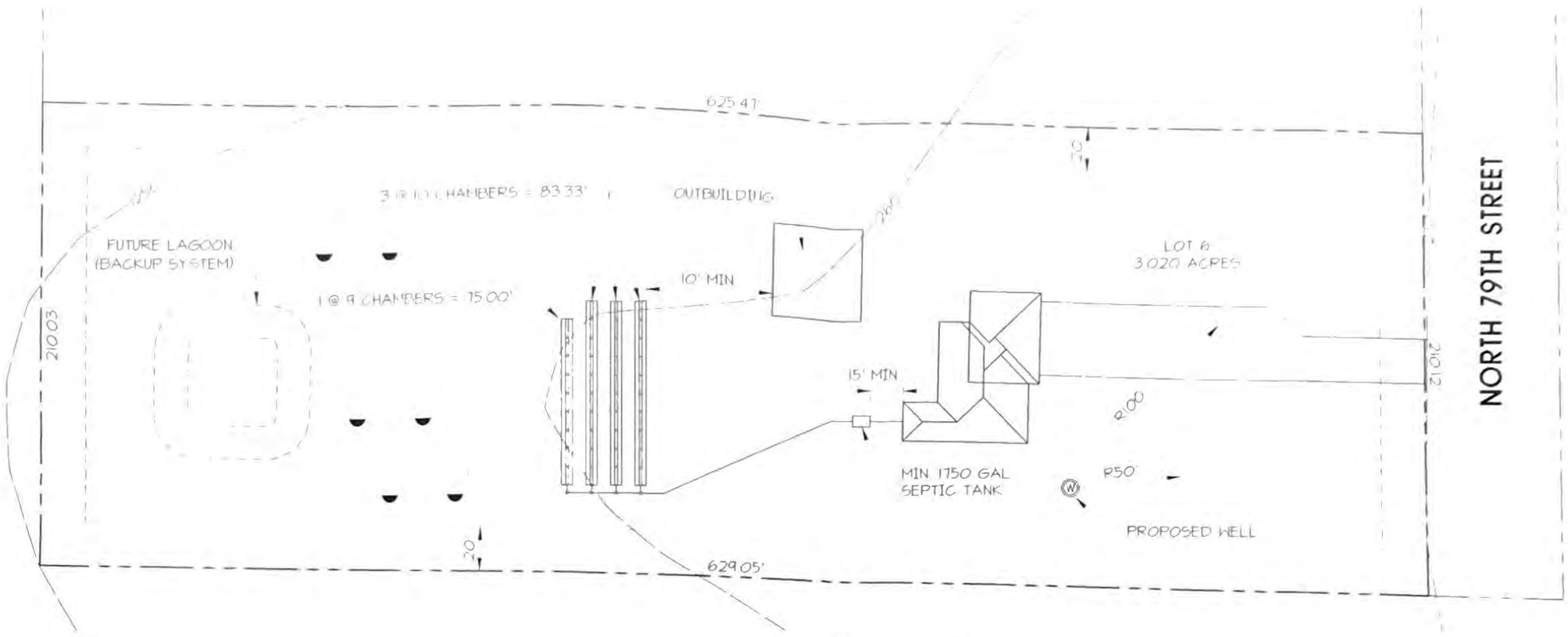


FORM 23-103 10-96

As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s



SITE PLAN

SCALE: 1" = 50'



VICINITY MAP

NOT TO SCALE

RECEIVED
20
DEPARTMENT OF
ENVIRONMENTAL QUALITY

Pollution ... Project
02-WWT-031
Nebraska DEQ
APPROVED

PROFESSIONAL CIVIL ENGINEER
JEREMY J WILLIAMS
E-10521
20 AUG 2002
STATE OF NEBRASKA

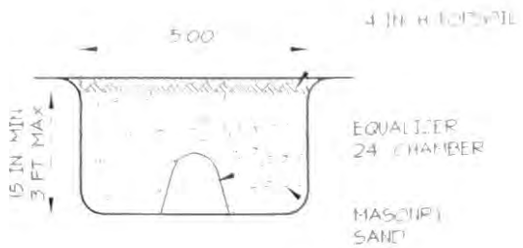
30 JUL 2002
20 AUG 02

17601 NORTH 79TH STREET

LOT 6 BLOCK 1 FINIGAN RIDGE ADDITION
LINCOLN, NEBRASKA

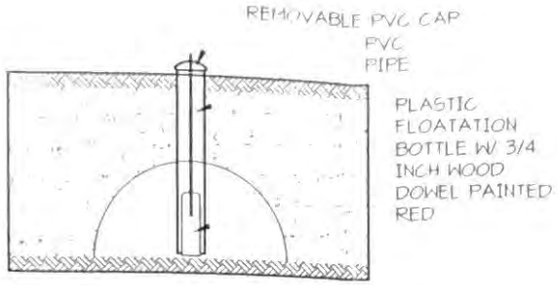
ONE-SITE WASTEWATER TREATMENT SYSTEM

DESIGN ASSOCIATES OF LINCOLN, INC
PERSHING SQUARE
1609 N. 27TH STREET
LINCOLN NEBRASKA 68508
voice 402/474-3000
fax 402/474-4045
desassoc@nebraska.com



SECTION A-A

NO SCALE



HIGH WATER INDICATOR

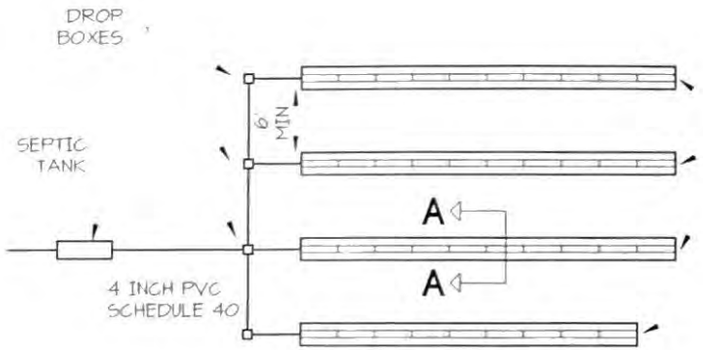
NO SCALE (REQUIRED)

GENERAL NOTES:

1. THE CONTRACTOR SHALL EXCAVATE AN INSPECTION PIT TO CONFIRM THAT A MINIMUM 4' OF SEPARATION CAN BE MAINTAINED FROM ANY SEASONAL WATER TABLE IMPERMEABLE CLAY, OR ROCK LAYER.

2. IT IS RECOMMENDED THAT A WATER METER BE INSTALLED ON THE WATER SUPPLY LINE SO THAT THE OWNER CAN MONITOR WATER USE AND ENSURE THAT NO MORE THAN 750 GALLONS PER DAY IS BEING USED.

3. IT MAY BE NECESSARY TO ADJUST THE ORIENTATION OF THE LATERALS SO THAT THE MINIMUM (1.5FT) AND THE MAXIMUM (3.0FT) DEPTHS ARE NOT EXCEEDED.



ABSORPTION TRENCH PLAN

NO SCALE

RECEIVED
20
DEPARTMENT OF
ENVIRONMENTAL QUALITY



30 JUL 2002
20 AUG 02

17601 NORTH 79TH STREET
LOT 6 BLOCK 1 FINIGAN RIDGE ADDITION
LINCOLN, NEBRASKA

ONSITE WASTEWATER TREATMENT SYSTEM

PERSHING SQUARE
1609 "N" STREET
LINCOLN NEBRASKA 68508
voice 402/474-3000
fax 402/474-4045
desgassoc@nebraska.com
DESIGN ASSOCIATES OF LINCOLN, INC

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