# Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003712

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 04380279301

Issued 03/15/04
Expires 09/15/04
Revenue Code 3157

Establishment

MATT & STEPH SHERNIKAU
T11N R7E SEC 9 QTR SE
VIEW POINTE NORTH BLK 1 LOT 11
12301 EMMA WALTER RD

FEES: $200.00

Permittee

MATT & STEPH SHERNIKAU
2300 SHEFFIELD PL
LINCOLN NE 68512-1438

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

**A**

Permit Number: 04380279301

# 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 12301 Emma Walter Rd (no rural route) City Lincoln NE, Zip 68517

Legal Description View Pointe North Block 1 Lot 11
1/4 SE 1/4 Section 9 Township 11N Range 7E Subdivision Addition

Geographical Location (if known): Longitude _____ Latitude _____

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

### B. Owner

Name Matt + Steph Shernikau Signature _____

Address 2300 Sheffield Dr. City/State/Zip Lincoln, NE 68512

☐ Check if owner designed system Home Phone 402-421-3661 Work Phone _____

### C. Contractor

Name Jerry maher Company Name Mahris Construction

Address 4110 Sheridan Blvd City/State/Zip Lincoln, NE 68506

☐ Check if contractor designed system Work Phone 402-432-1505

### 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 3 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day 400 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 3/15/04 Date frwd 3/16/04 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
8-16-04

2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3-16-04 Date frwd 3-16-04 ACTION ☒ Approved ☐ Disapproved Signature Shawn Johnson

3. **City or County Engineer** Date rec'd 3-16-04 Date frwd 3-16-04 ACTION ☒ Approved ☐ Disapproved Signature Jim Blough

### Installation Final Written Approval

By Ron Magnuson

Date 8-19-04

***Business Office Use Only***

Date Rec'd 03/15/04

Amt Paid 200.00

Rec'd By LC ~~Cash~~/Check No. 5259

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

Lincoln-Lancaster County Health Department
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B

Permit Number: 043802793

# Sewage Disposal System

## Soil Absorption Test Data Report

## Annex to Application

PLEASE PRINT OR TYPE

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

Address Lot 11, Emma Walter Rd (no rural route) City Lincoln NE, Zip 68517

Owner Matt + Steph Shernikau Addresss 2300 Sheffield Dr. Lincoln, NE 68512

Soil Type (SCS): Sharpsburg Percolation Rate: 60 min./inch

Date of Tests 12/6/03 to 12/7/03 . Weather: Precipitation 0 Temperature 48°

## 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 | 27 | 12/6 | 10:30 | 12/6 | 2:30 | 12/7 | 10:30 | 6 | 12/7 | 2:30 | 30 | 7/8 | .88 - 34 |
| 2 | 30 | " | " | " | " | " | " | " | " | " | " | 1/2 | .50 - 60 |
| 3 | 27 | " | " | " | " | " | " | " | " | " | " | 1/2 | .50 - 60 |
| 4 | 29 | " | " | " | " | " | " | " | " | " | " | 5/8 | .63 - 47 |
| 5 | 30 | " | " | " | " | " | " | " | " | " | " | 1/2 | .50 - 60 |
| 6 | 28 | " | " | " | " | " | " | " | " | " | " | 1/2 | .50 - 60 |
| 7 | 27 | " | " | " | " | " | " | " | " | " | " | 3/8 | .38 - 79 |
| 8 | 30 | " | " | " | " | " | " | " | " | " | " | 1/4 | .25 - 120 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

**Person Conducting Percolation Tests**

Name: Terri Jakoubek, Raymond Contracting Inc.

Phone: 402-783-2663, 402-890-3870

Address 13800 NW 70th St
Raymond, NE 68428

Sum of Percolation Rates: 321 - 60

Average of Rates: 54 - 60

Rate Used for Calculation: 60 mpi - Variance to 20

DO NOT WRITE BELOW THIS LINE

**Reviewing Action**

Remarks

Signature of Date

C

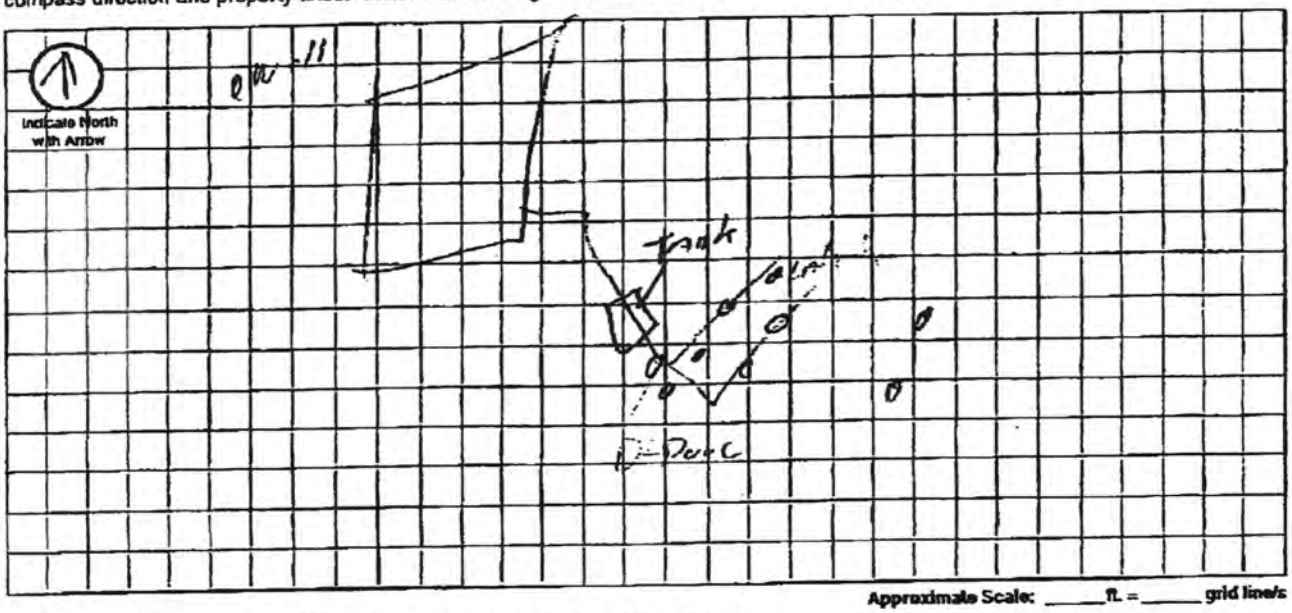
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Permit Number:

# 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) 12301 Emma Walter rd 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: 1,050 sq. ft.

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

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

Total Length of Laterals 262 1/2 ft. Number of Trenches 2 Trench Width 4'

### D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

| Distance From | Private Well | Public Well | Surface Water | Ground Water | Pressure Water Lines | Property Lines | Foundations Yours | Foundations Neighbors | All Other Setbacks |
|---|---|---|---|---|---|---|---|---|---|
| Tank (ft) | 50 ☑ | 500 ☐ NA | 50 ☑ | NA ☐ | 25 ☑ | 20 ☑ | 15 ☑ | 25 ☑ | ☐ |
| Field (ft) | 100 ☑ | 500 ☐ NA | 50 ☑ | 4 ☑ | 30 ☑ | 20 ☑ | 30 ☑ | 40 ☑ | ☐ |
| Lagoon (ft) | 100 ☐ | 500 ☐ | 50 ☐ | N/A ☐ | 30 ☐ | 50 ☐ | 100 ☐ | 200 ☐ | ☐ |

### E. Required Signatures

Home Building Contractor Jerry Maher Date 3-13-04

Installer Ronald L. Hasebroock Date 3-12-04

FORM 23-102 10-96



Mar 12 04 11:22a

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**D**

Permit Number:

# Sewage Disposal System

## As Built Plans & Specifications

Date 8-16-04 Matt Shemitsu

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

Address 12301 Emma Walter Rd. (no rural route) City Lincoln NE, Zip 68517

### A. Building Sewer

1. Material: class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: one
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: one
2. Capacity: 1500 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: 16 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 75' 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

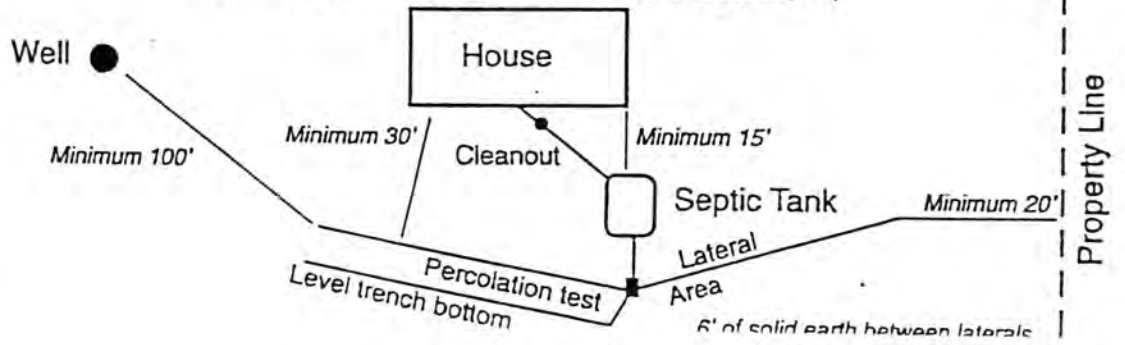
*(Provide as-built drawings on back of this form)*

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 34" wide 12" Tall
   or perforated pipe: _____
   Material: ☒ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 24x625 (150) ft. 18x625 (112.5) ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope Flat in/100 ft.
   Average depth 30" in
4. Filter material: Dirt
   Depth of material _____ in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 20' 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

