LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380191901

Issued 12/21/98
Expires 06/21/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment

STEVE SPADER
T11N R7E SEC 10 QTR NW
NW
7111 MILL RD

Permittee

STEVE SPADER
BOX00371
BOX 00371
CERESCO NE 68017

Issued By Health Director
Lincoln-Lancaster County Health Department

008402

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

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

A

Permit Number:

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 7111 MILLARD (no rural route) City Lincoln NE, Zip 68517

Legal Description NW (1/4) NW (1/4) 10 (Section) 11N. (Township) 7E (Range) 21.45 Acres (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 Steve Spader Signature Steve Spader

Address PO BOX 371 Cerosco NE City/State/Zip 68017

☐ Check if owner designed system Home Phone 432-7529 Work Phone 786-2421

C. Contractor

Name Mike Norman Company Name Norman Plbg.

Address 4217 Progressive Ave City/State/Zip Lincoln NE 68504

☑ Check if contractor designed system Work Phone 464-5721

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

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 2 Is there a Whirlpool Bathtub YES NO

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day 125 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 12-18-98 Date frwd 12-18-98 ACTION ☒ Approved ☐ Disapproved Signature Ron Moyer
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12-24-98 Date frwd 12-24-98 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** RON INSPT PANKTLINE Date rec'd 12-24-98 Date frwd 12-24-98 ACTION ☒ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By _____ need "D" Street

Date 4-8-99

Business Office Use Only

Date Rec'd 12/18/98

Amt Paid 150.00

Rec'd By _____ Cash/Check No. 1622

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 7111 Mill RD (no rural route) City Lincoln NE, Zip 68517

Owner Steve Spader Addresss P.O. Box 371 Ceresco Ne. 68017

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

Date of Tests 11-26 to 11-27 Weather: Precipitation NONE Temperature 40

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	36"	11-26	11:30	11-26	4:30	11-27	1:00	6"	11-27	1:30	30	3 1/4"	9 mpi
2	36"	11-26	"	"	"	"	1:00	"	"	"	"	4 3/4"	7
3	36"	"	"	"	"	"	"	"	"	"	"	4 3/4	7
4	36"	"	"	"	"	"	"	"	"	"	"	1 1/2	20 mpi
5	36"	"	"	"	"	"	"	"	"	"	"	1 3/4	17
6	36"	"	"	"	"	"	"	"	"	"	"	1"	30 mpi

Person Conducting Percolation Tests

Name: Steve Spader

Phone: 432.7529

Address PO Box 371 Ceresco Neb 68017

Sum of Percolation Rates: Variation of 20 mpi or more

Average of Rates: _____

Rate Used for Calculation: 30 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Soil map indicates Sharpsburg soil

Signature of Reviewing Official Ron Mayer Date 12-14-98

FORM 23-101 10-96

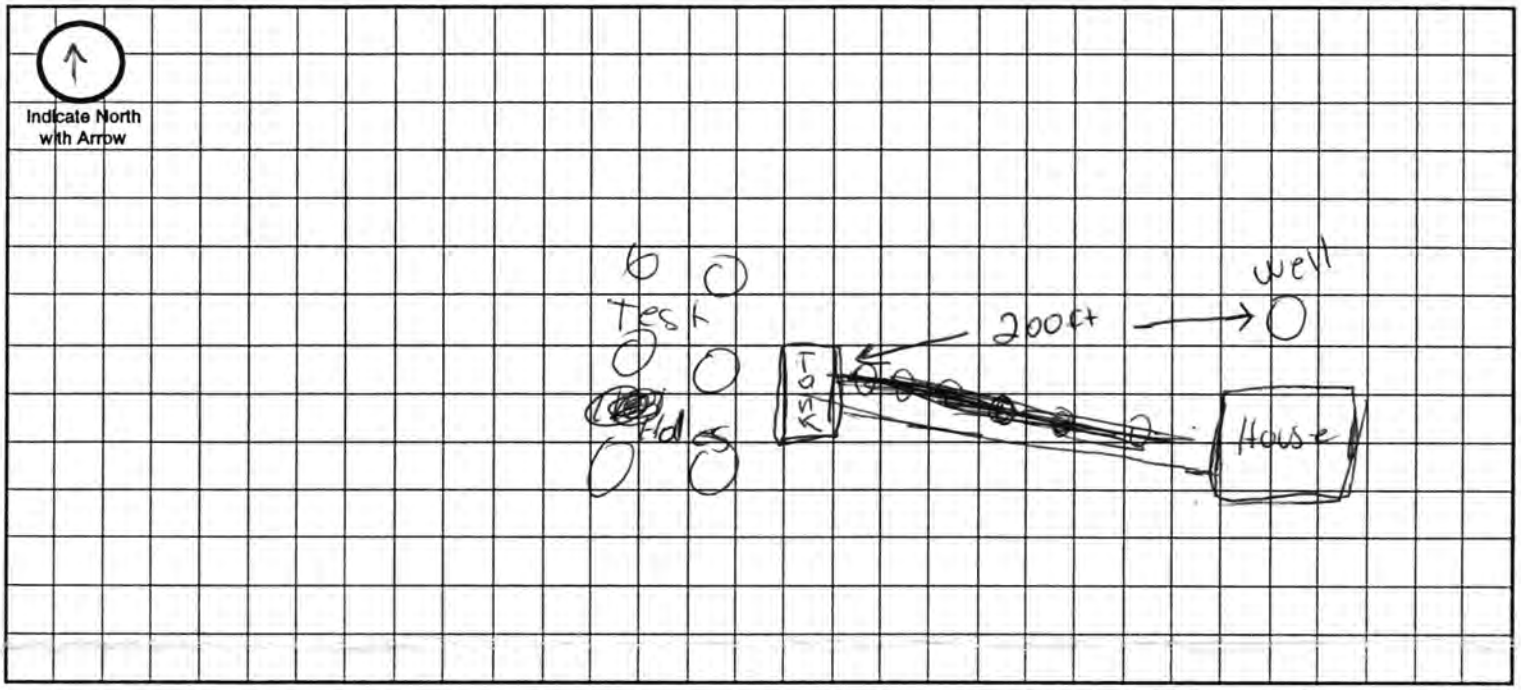
Lincoln-Lancaster County Health Department
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C

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) 7111 Mill 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 30 (min. per inch) Soil Type: Sharpsburg Land Slope: _____ %

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

Total Square Feet of Field Required: 500 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed _____

Total Length of Laterals 125 ft. Number of Trenches 2 Trench Width 3ft - 167
4ft - 125

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 11-13-98

Installer _____ Date 11-14-98

FORM 23-102 10-96

APR 7 1999

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date April 2 1999 10-11-7

System Location (Indicate correct number and street)

Address 7111 Mill Rd. (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: _____
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 24" in.
3. Distance between dwelling and septic tank: 105 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 85' ft.
   stream N-A ft.
   pressure line 85' ft.
   property line 50+ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6" in.
   Over outlet, diameter 6" in.
   Riser: ☐ above ☐ below grade 12" in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 85' ft.
   Stream N-A ft.
   Pressure line 85' ft.
   Property line 50+ ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 26 ft.

D. Absorption Field

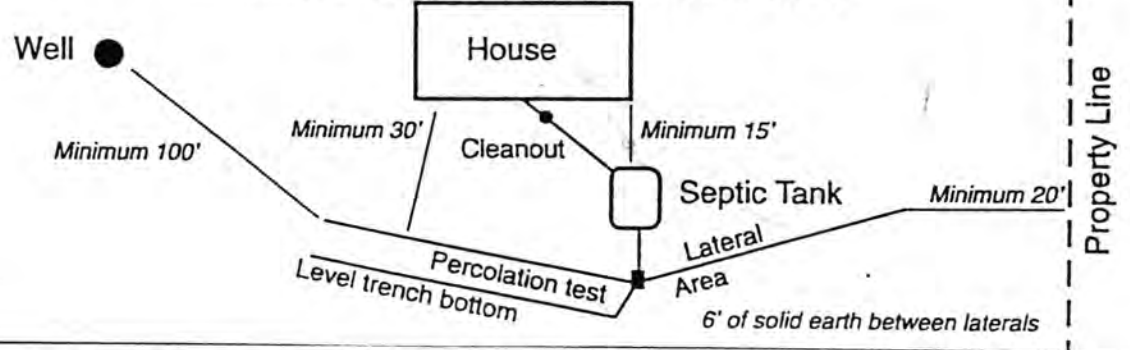
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe InFiltrator
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 83 ft. 83 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 26 in
4. Filter material: gravel
   Depth of material 14" in.
5. Distances to: Well or suction line 100+ ft.
   Stream N-A ft.
   Pressure line 100+ ft.
   Property line 50+ ft.

Indicate North with Arrow

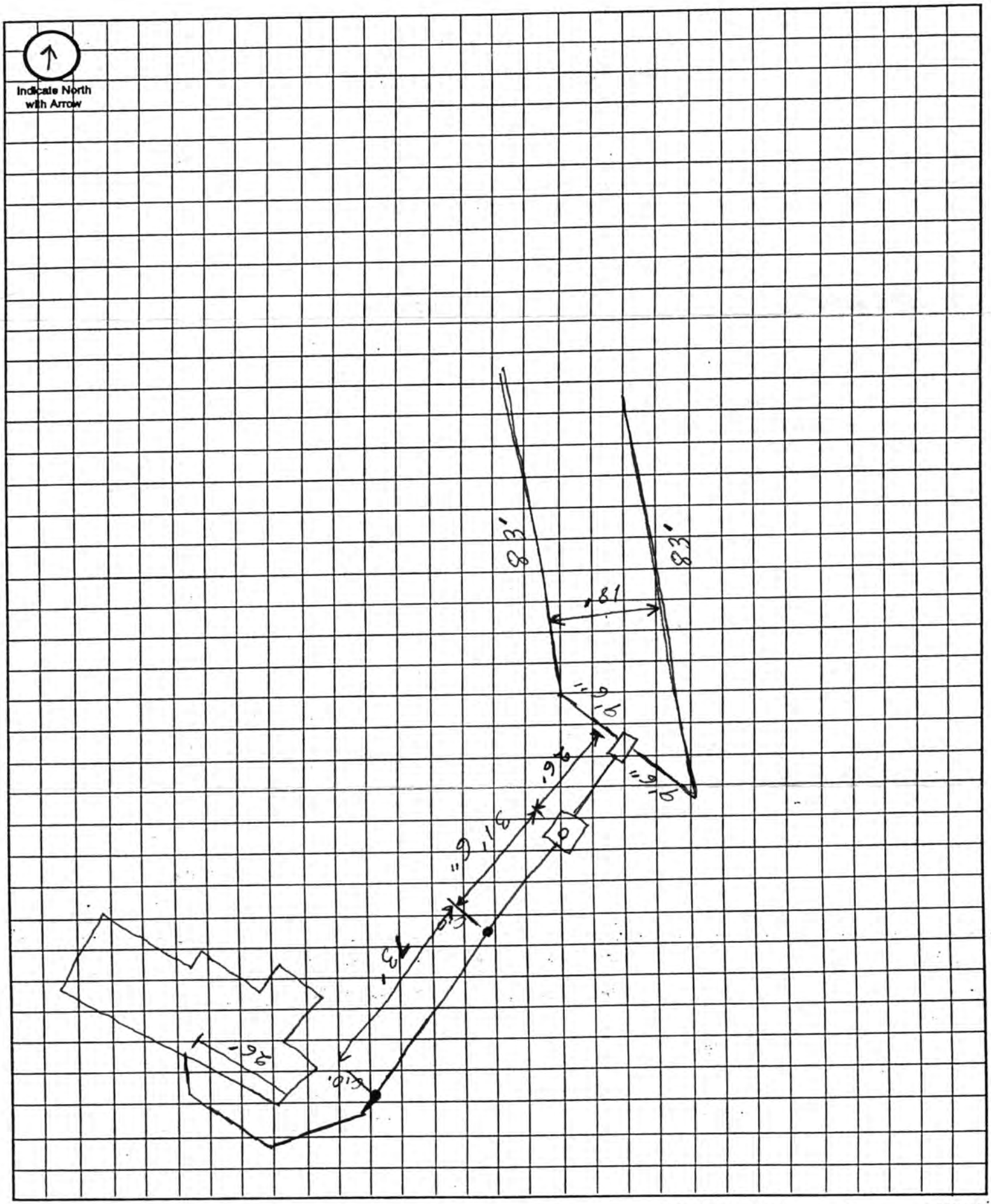
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing




LANCASTER COUNTY, NEBRASKA
N 70th
Middle
R 7 E
5 E
T. 11 N.
480 000 FEET
(Joins sheet 14)
Creek
Gorr
Ke
Ns
JuC
ShD
ShD2
ShC
WtD3
WtC2
PaD2
PaC2
PbC3
MeC2
BpF
BrE
BrD
MrD
GeD
SmD
No
Cp
5
4
3
8
9
10
17
16
15
77