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

A

Permit Number: 0038 02155

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 330 Fletcher (no rural route) City Lincoln NE, Zip 68521

Legal Description ~~Lot 28~~ 35 T11N R6E Cumberland Heights CUMBERLAND HEIGHTS 28
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude 11-6-35 Latitude

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

B. Owner

Name Alm, Jerry Signature [signature]

Address 300 Fletcher City/State/Zip Lincoln

☐ Check if owner designed system Home Phone 402 486 3241 Work Phone

C. Contractor

Name Vogt Company Name Vogt excavating

Address - PO Box 181 Elmwood Nebr City/State/Zip 68349

☐ Check if contractor designed system Work Phone 560-4267

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 3 x 3 Future in Basement 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 3/14/00 Date frwd 3/16/00	**ACTION** ☒ Approved ☐ Disapproved Signature Carroll C. Hood	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd 8-4-00 Date frwd 8-4-00	**ACTION** ☒ Approved ☐ Disapproved Signature [signature]	
3. **City or County Engineer**	Date rec'd 3-16-00 Date frwd 3-16-00	**ACTION** ☒ Approved ☐ Disapproved Signature [signature]	

Installation Final Written Approval

By [redacted] Ron Mayer

Date 8-9-00

Business Office Use Only

Date Rec'd 03/16/00
Amt Paid 150 ck
Rec'd By [signature] Cash/Check No. 16137

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

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B

Permit Number: 00380215 5

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address _____ City _____ NE, Zip _____
(no rural route)

Owner _____ Addresss _____

Soil Type (SCS): _____ Percolation Rate: 240 min./inch

Date of Tests 3-8-00 to 3-9-00 Weather: Precipitation None Temperature 58

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	3-8	12:00	3-9	12:00	3-9	12:00	6	3-9	12:30	30	1/8	240
~~2~~	30	"	"	"	"	"	"	6	"	"	30	1/8	240
~~3~~	30	"	"	"	"	"	"	6	"	"	30	1/8	240
~~4~~	30	"	"	"	"	"	"	6	"	"	30	1/8	240
~~5~~	30	"	"	"	"	"	"	6	"	"	30	1/8	240
~~6~~	30	"	"	"	"	"	"	6	"	"	30	1/8	240

Sum of Percolation Rates: 1440
Average of Rates: 240
Rate Used for Calculation: 240

Person Conducting Percolation Tests

Name: Dave Vogt
Phone: 560-4264
Address P.O. Box 181
Elmwood, NE 68349

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

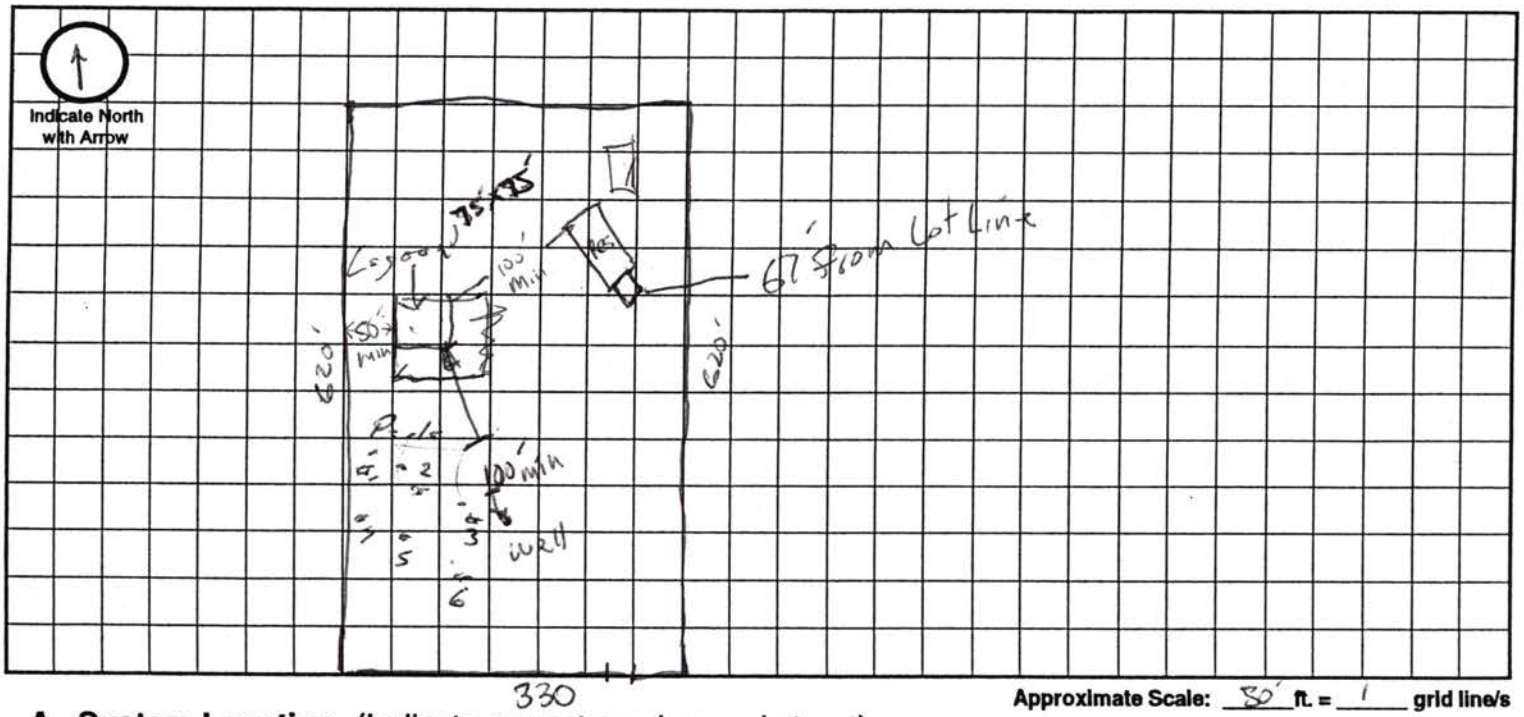
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 00380215S

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: 30' ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 300 Fletcher City Lincoln NE, Zip 68521

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 2~~5~~0 (min. per inch) Soil Type: Clay Land Slope: 5 %

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

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 Rod Hornung Date 3-14-00

Installer Dave Vogt Date 3-14-00

FORM 23-102 10-96

Stubbed out 2 ft below footings

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D

Permit Number: 003802155

Sewage Disposal System

As Built Plans & Specifications

Date July 28, 2000

System Location (Indicate correct number and street)

Address 330 Fletcher Ave. (no rural route) City Lincoln NE, Zip 68521

A. Building Sewer

1. Material: sdr 40
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 60 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line 100 ft.
   stream None ft.
   pressure line 100 ft.
   property line 50 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 18IN in.
   Over outlet, diameter 8 IN in.
   Riser: ☒ above ☐ below 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 None ft.
   Pressure line 100 ft.
   Property line 150 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 6
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10 FT ft.

D. Absorption Field

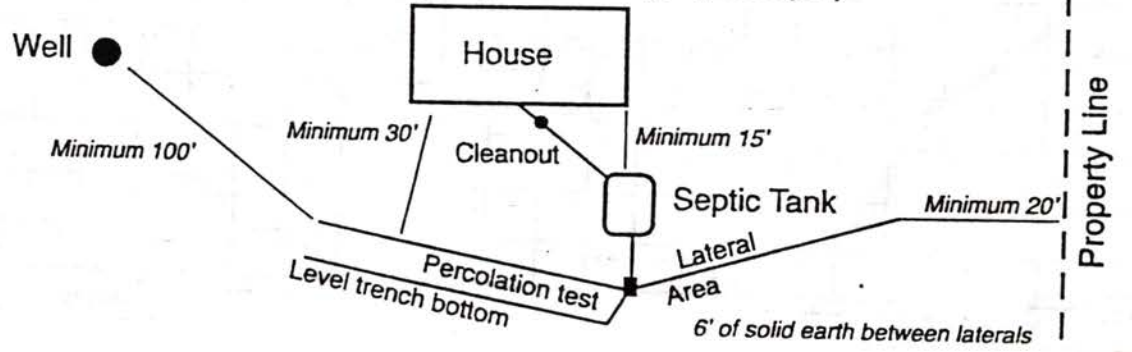
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: INFILTrader
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 5 ft.
   Slope _____ in/100 ft.
   Average depth 24 in
4. Filter material: gravel
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

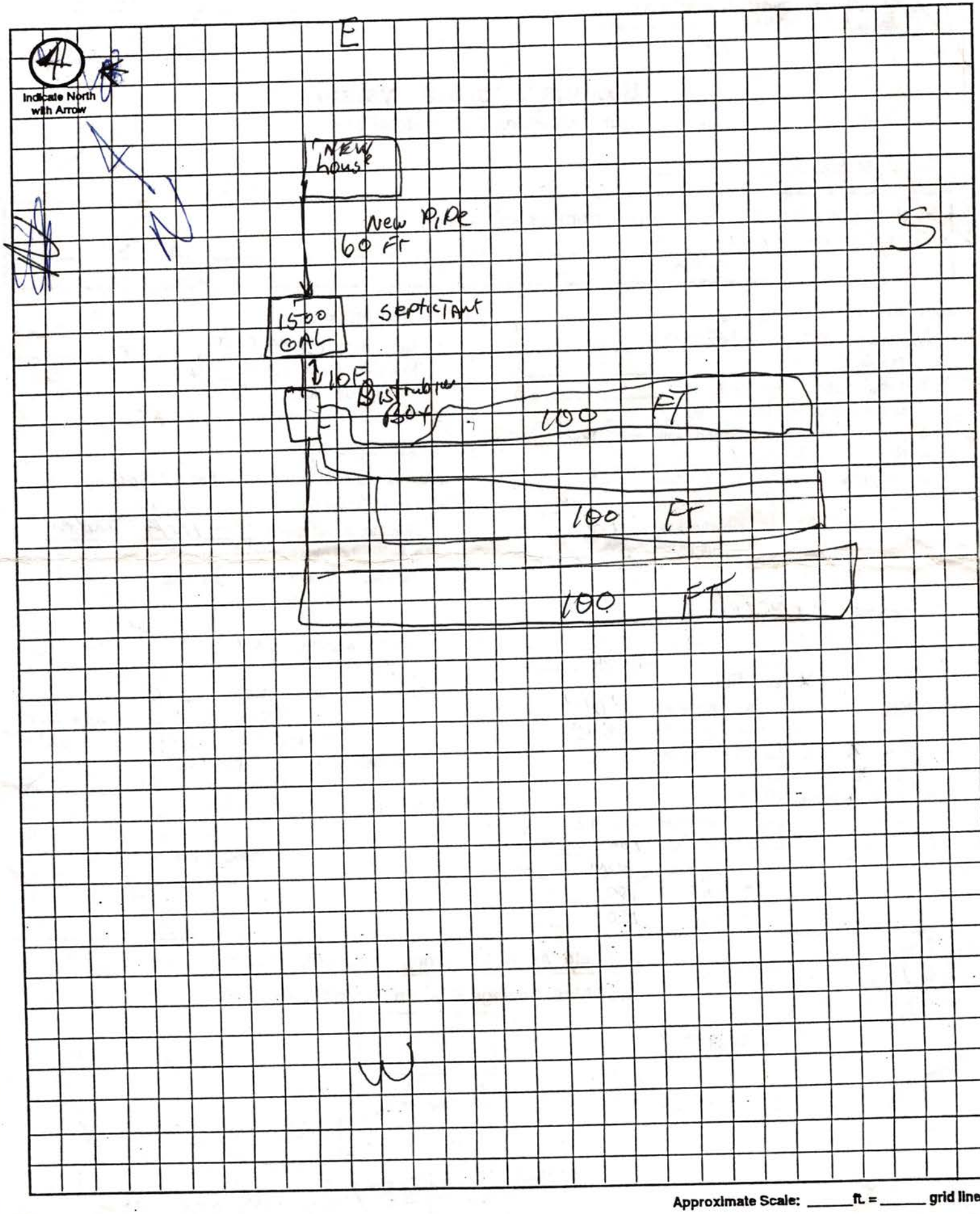
Complete "As Built" drawing on back of this form.

Indicate North with Arrow

Individual Sewage System Design (Example)



As Built Drawing



Approximate Scale: _____ ft. = _____ grid lines