LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514

(402) 441-8000

PERMIT

Permit
SEWAGE INSTALLATION

No. 96380142501

Issued 05/03/96
Expires 10/03/96
Revenue Code 18754

Establishment
JOHN ZAKOVEC
T11N R6E SEC 31
LOT 1

FEES: $150.00

TOTAL $150.00

Permittee
JOHN ZAKOVEC
4801 W HWY 34
LINCOLN NE 68524

Issued By M. Jane Ford
Health Director

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

001746

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☒
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $ 150 00

FILE NO. _____

DATE: 4-17-96

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11N ; Range 6E ; Section 31 ;
   Block _____ : Lot 1 I.T. : Addition _____
   Street Address NW 4801 W Hy 34

2. Property Use: Residential ☐ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 1 . Describe Heritage Center
   CONCESSION STAND
   3 WEEKS OUT OF YEAR

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: 2 Mi ft.

John D Zahner
Signature of Applicant (Owner or Lessee)

NW 4801 W Hy 34 68524
Address

432-1717 2nd
1st 470-2450

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/18/96. Date Frwd. 5/2/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5/2/96. Date Frwd. 5/2/96. ACTION: Approved ☒ Disapproved ☐ Signature: Mel Goddard

3. City or County Engineer: Date Rec'd. 5-2-96. Date Frwd. 5-2-96. ACTION: Approved ☒ Disapproved ☐ Signature: [illegible]

REMARKS OR REASONS FOR DISAPPROVAL APPROVED PENDING OUTCOME OF LAGOON APPEAL TO BOARD OF HEALTH.

Site Visits:
Date: 6/26/96 by: L.C.H. Tanks + sewer
Date: 7-10-96 by: rm
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-12-96 By: Ron Mangant

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 11 ; Range 6 ; Section & ¼ Section NE½ 31
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☒ ; Clay Loam ☐ .
Dates of Tests: 4/4/96 to 4/5/96 . Weather: Precip. dry Temp. _____ .

OWNER: John Zakovec

Address: NW 48th & Hy 36

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Date (Mo./ Day)	Time (Hr./ Min.)	Water Level (in.)	Time (Hr./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	28"	4/4	1:00	4/5	1:00	4/5	2:30	6	3:00	4 3/4	30	1¼	24 MIN/IN
2	29"	4/4	1:05	4/5	1:00	4/5	2:35	6	3:05	4 7/8	30	1 1/8	27 MIN/IN
3	28"	4/4	1:10	4/5	1:00	4/5	2:40	6	3:10	4½	30	1½	20 MIN/IN
4	24"	4/4	1:15	4/5	1:00	4/5	2:45	6	3:15	4¼	30	1 3/4	17 MIN/IN
5	28"	4/4	1:20	4/5	1:00	4/5	2:50	6	3:20	4 3/4	30	1¼	24 MIN/IN
6	29"	4/4	1:25	4/5	1:00	4/5	2:55	6	3:25	4 7/8	30	1 1/8	27 MIN/IN

John Stahmyer
Signature of Person Conducting Test

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Address 9811 NW. 40th Phone 430-6023

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Kennebec Silt Loam
Date: _____

Approved Percolation Rate (a)
A. 23 min./inch
B. _____ min./inch
C. _____ min./inch

Signature of Reviewing Official

BUT IS IN OLD ABANDONED ROAD BED (REWORKED SOIL, NOT ORIGINAL)

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are exisiting or proposed.

REVIEWING ACTION

Remarks :_____

_____

Date:_____

Minimum Design Requirement
1. Capacity of Septic Tank_____gals.
2. Total Length of Laterals_____ft.
3. With a Trench Width of_____in.
4. Total Area of Lateral needed_____sq.ft.

_____
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

D

DATE: _____

FILE NO: _____

Pumpkin Johns

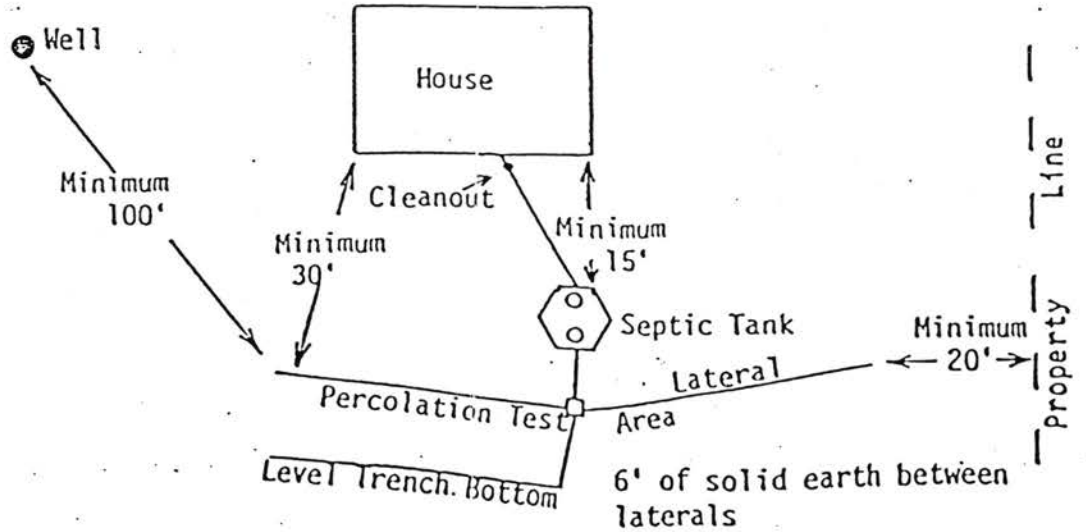
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in. sche 40
2. Distance above basement floor _____ in., or below ~~basement~~ floor 48 in.
3. Distance between dwelling and septic tank 200 ft.
4. Number of clean-outs 3.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream NA ft.; Pressure Line _____ ft.; Property Line NA ft.

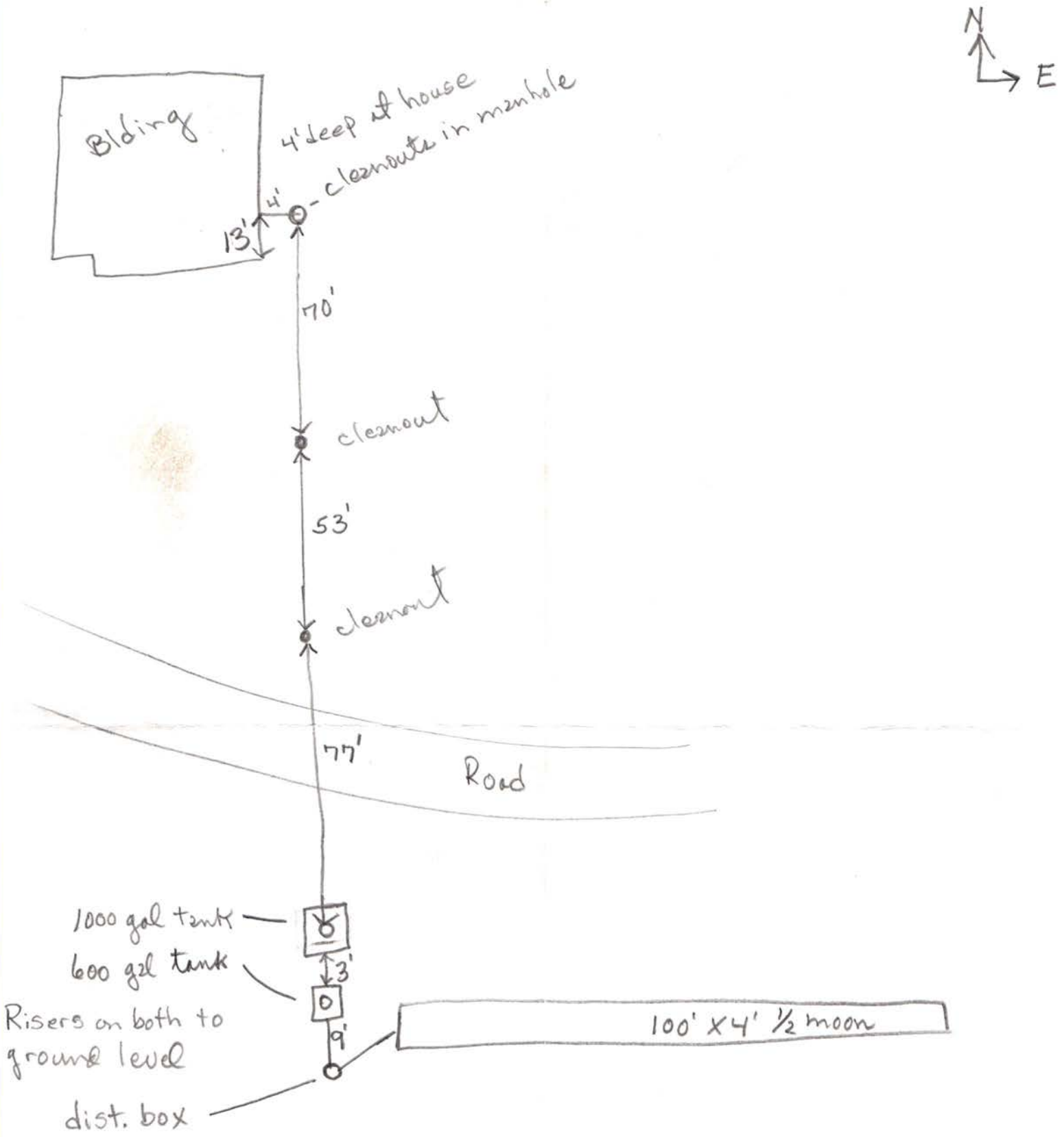
B. SEPTIC TANK: (Two Septic tanks)
1. Material concrete ; No. of compartments _____.
2. Capacity 1000 and 600 gals.;
3. Factory Built: Yes ☑ No ☐
(Company Pre-cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 24 in. Riser to Grade on Tanks & dist Box
8. Distances to:
Well or Suction Line 100'+ ft.; Stream NA ft.; Pressure Line _____ ft.; Property Line NA ft.

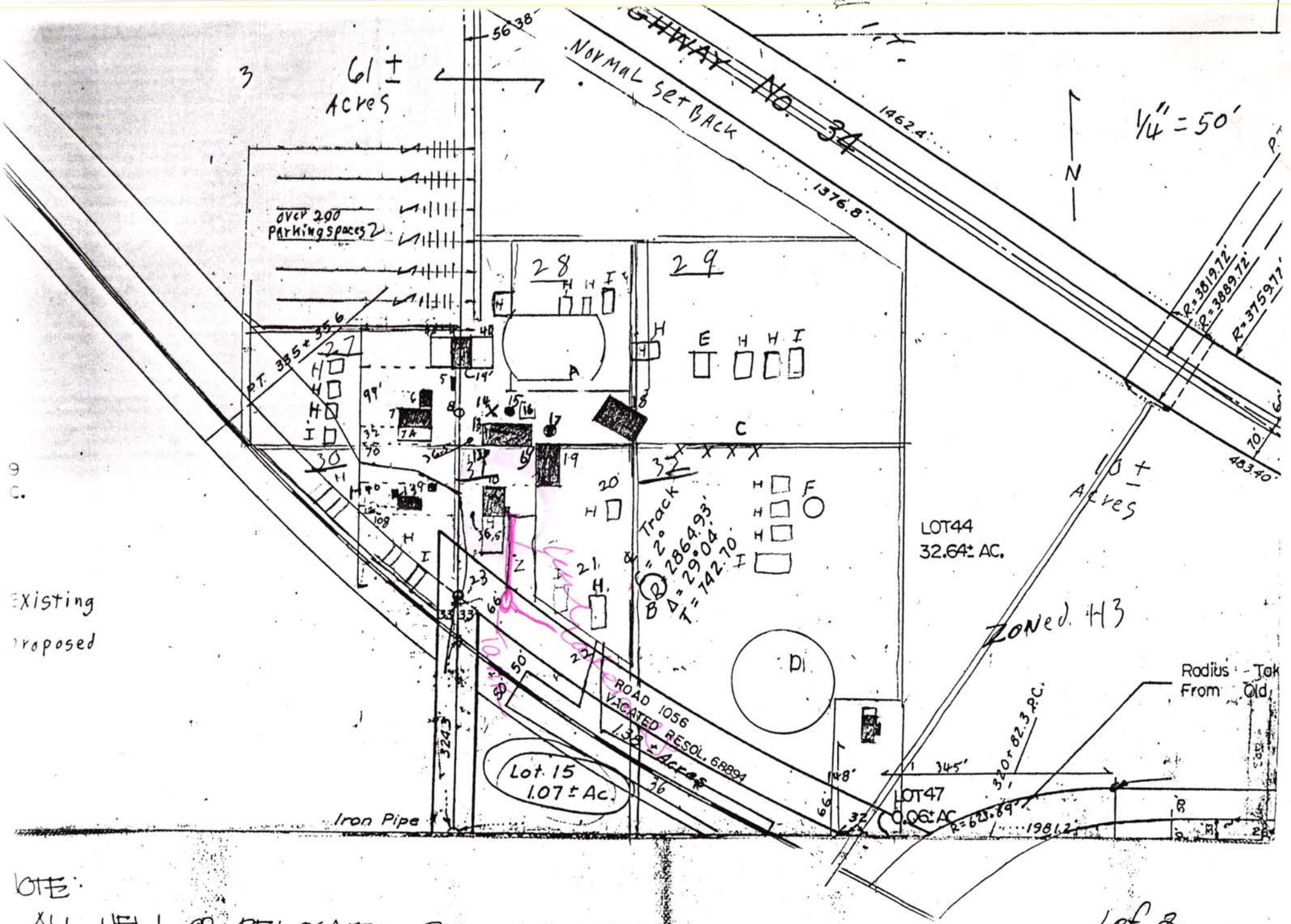
C. DISTRIBUTION BOX:
1. Material concrete ; Number - available outlets 6.
2. Factory Built: Yes ☑ No ☐
(Company Pre-cast)
3. Distance from Septic Tank _____ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☑ Perforated Pipe ☐
Diameter of Half Round 18 or Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other Polyurethane.
2. Lateral Lines:
Number 1 ; Length of each line 100', _____, _____, _____, _____ ft.;
Total length of laterals 100'x4' ft.;
Distance between lateral lines _____ ft.
3. Trench dimensions: Width 4 ft.; Slope 1-3 in/100 ft.; Average Depth 30" in.
4. Filter Material: Rd. Gravel
Depth of Material 20 in.
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
E
Bldng
4' deep at house
- cleanouts in manhole
4'
13'
70'
cleanout
53'
cleanout
77'
Road
1000 gal tank
600 gal tank
3'
Risers on both to ground level
9'
100' x 4' ½ moon
dist. box



NOTE:

ALL NEW OR RELOCATED BUILDINGS SHALL COMPLY WITH APPLICABLE BUILDING & LIFE SAFETY CODES.

1 of 2.

APRIL 1, 1996.