LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380180801

Issued 07/23/98
Expires 01/23/99
Revenue Code 3157

FEES: $150.00

PAID

TOTAL $150.00

Establishment
TOM KEEFE
T11N R6E SEC 16 QTR SW
SE QTR OF SW QTR LOT 2IT
10660 NW 27 ST

Permittee
TOM KEEFE
2426 PARK AVE
LINCOLN NE 68502

Issued By Health Director
Lincoln-Lancaster County Health Department

007867

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

JUL 16 1998 **A**

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

Permit Number: 98380808

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 10660 NW 27TH City LNK NE, Zip 68428

Legal Description #1 SE OF SW (no rural route) 16 11 NORTH 6 EAST PARCEL AND L.T.
#2 ~~SE SW~~ 1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude (SEE ATTACHED) Latitude

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

B. Owner

Name TOM KEEFE Signature Tom Keefe

Address 2426 PARK AVE City/State/Zip LNK NE 68502-4060

☐ Check if owner designed system Home Phone 474-2434 Work Phone

C. Contractor

Name STAN KROESE Company Name DIRT WORKS PLUS INC

Address 12800 NW 70TH City/State/Zip RAYMOND NE

☑ Check if contractor designed system Work Phone 560-1208

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 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 7/16/98 Date frwd 7/22/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 7-22-98 Date frwd 7-22-98 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 7/22/98 Date frwd 7/22/98 ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

By

Date 8-11-98

Business Office Use Only
Date Rec'd 07/16/98
Amt Paid 150.00
Rec'd By ~~Cash~~/Check No. 1149

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

JUL 16 1998

B

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

Permit Number: 98 3801 808

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 10060 NW 27 (no rural route) City LNK NE, Zip 68428

Owner Tom KEEFE Addresss 2426 PARK AVE

Soil Type (SCS): DICKENSON SANDY LOAM Percolation Rate: _____ min./inch

Date of Tests 7/13/98 to 7/14/98 Weather: Precipitation -0- Temperature 93°

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	24	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	1"	30 MIN/IN
2	24	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	1"	30 MIN/IN
3	24	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	3/4"	40 MIN/IN
4	27	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	1 1/4"	24 MIN/IN
5	27	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	1 1/4"	24 MIN/IN
6	28	7/13	800AM	7/14	330PM	7/14	330PM	6"	7/14	730PM	30	1"	30 MIN/IN

Person Conducting Percolation Tests

Name: STAN KROESE
Phone: 560-1208
Address 12800 NW 70TH
RAYMOND NE 68428

Sum of Percolation Rates: _____
Average of Rates: _____
Rate Used for Calculation: 30 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date JULY 23, 1998

FORM 23-101 10-96

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

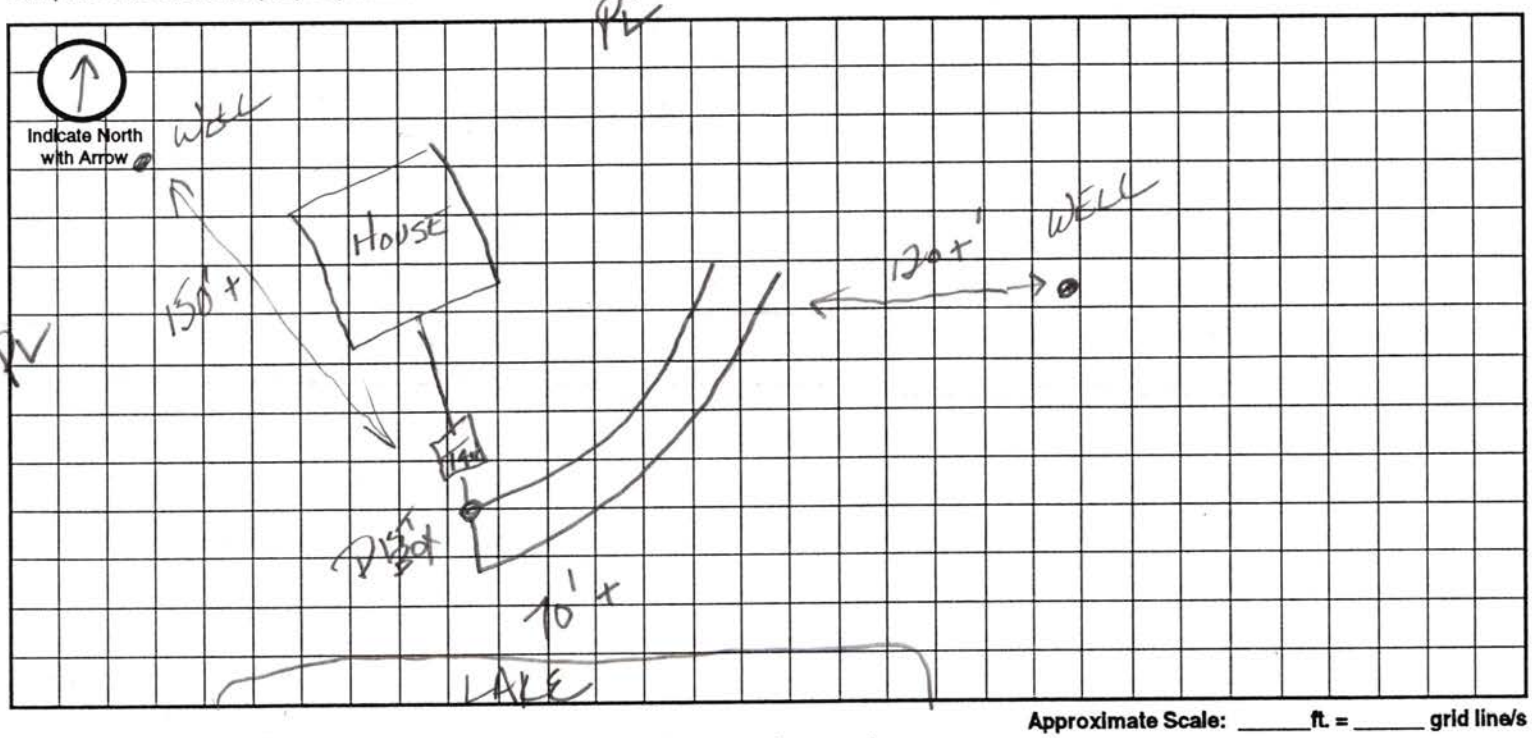
JUL 16 1998

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) 10660 NW 27TH City LNK NE NE, Zip _____

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: TOPSOIL + SANDY CLAY Land Slope: 10 %

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: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 200 / 125 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	Gound 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 ☐ NA	50 ☑	N/A ☐	30 ☑	50 ☑	100 ☑	200 ☑	☑

E. Required Signatures

Home Building Contractor Tom Wolfe Date 7/14/98

Installer Steve Kruse Date 7/14/98

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: 98380808

Sewage Disposal System

As Built Plans & Specifications

Date 8-11-98 TOM + KAY KEEFE

System Location (Indicate correct number and street)

Address 10600 NW 27 (no rural route) City LNK NE, Zip 68528

A. Building Sewer

1. Material: CLS 160
   Diameter: 4" in.
2. Distance above basement floor: 0 in.
   or distance below basement floor: 20 in.
3. Distance between dwelling and septic tank: 84 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 60+ ft.
   property line 100+ ft.

B. Septic Tank

1. Material: CONC
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 0 in.
   Over outlet, diameter 0 in.
   Riser: ☐ above ☐ below grade 0 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 2 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. Distribution Box

1. Material: CONC
   Number available outlets: 6
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 21 ft.

D. Absorption Field

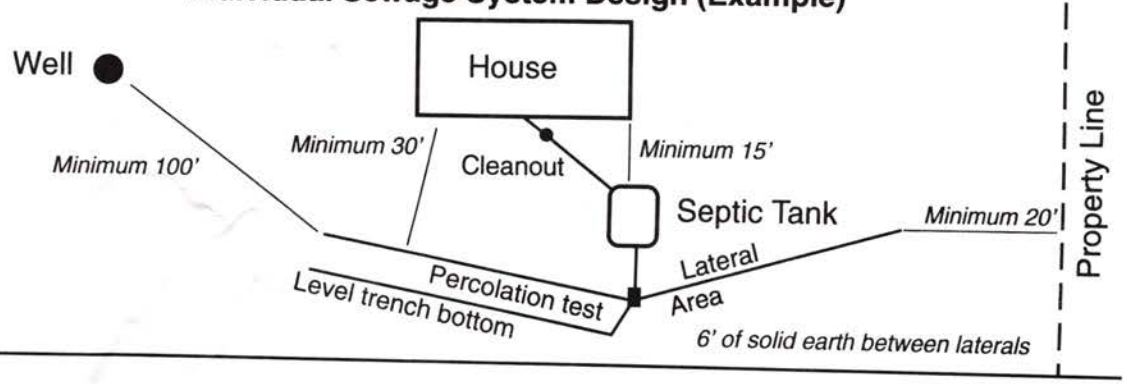
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round:
   or perforated pipe:
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other INFILTRATOR
2. Lateral lines: Number 2
   Length of each line: 100 ft. 52 ft.
   ft. ft., ft.
3. Trench dimensions: Width 4 ft.
   Slope 1/2 in/100 ft.
   Average depth 30 in
4. Filter material: GRAVEL
   Depth of material 20 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

Indicate North with Arrow

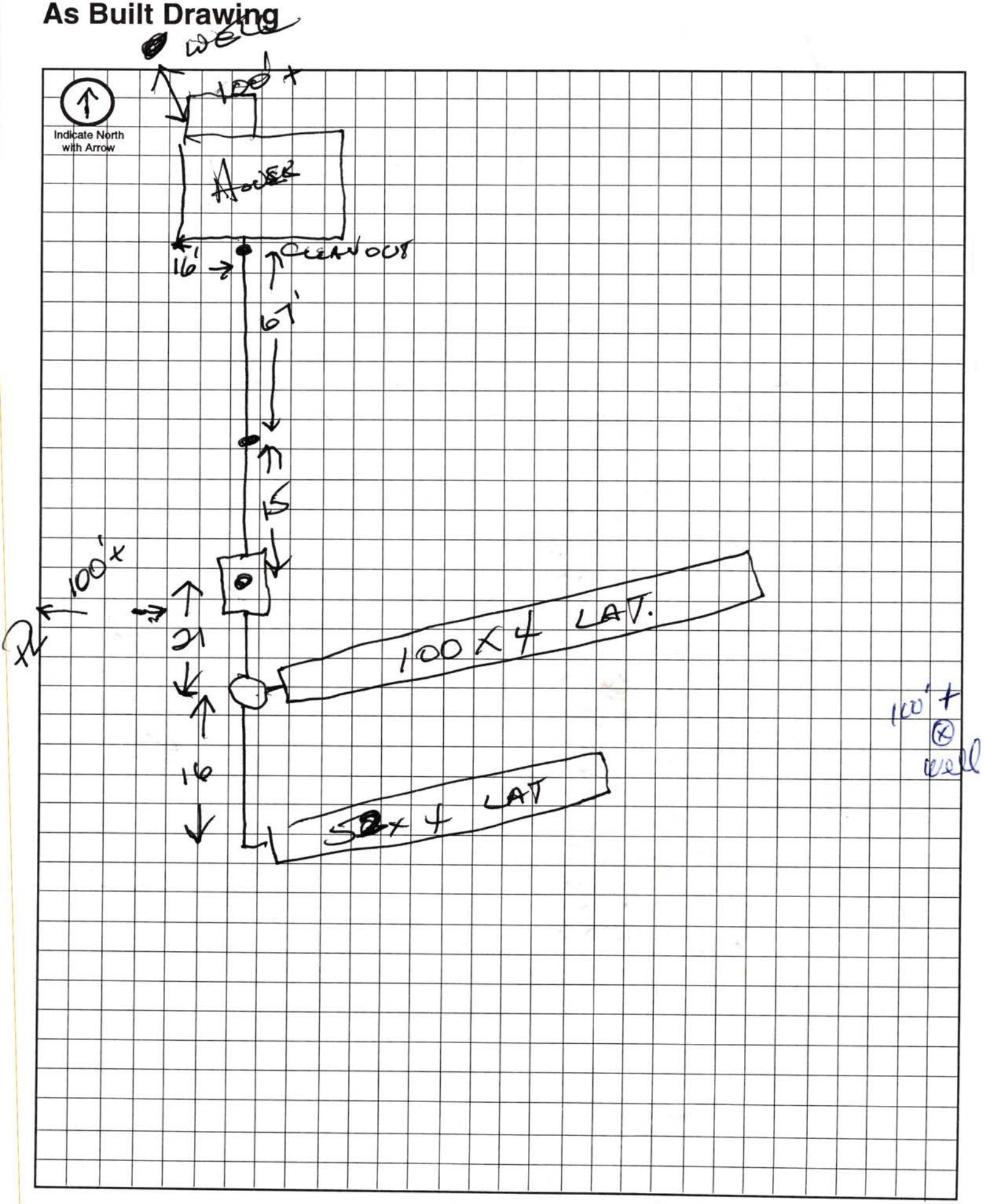
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line/s

JUL 16 1998

7/6/98

Stan:

the legal description of our property at 10660 NW 27th Street, is:

PARCEL 1:
SW 1/4 of SE 1/4 of Section 16, Township 11 North, Range 6 East of th 6th P.M., Lancaster County, NE

PARCEL 2:
SE 1/4 of SW 1/4, AND Lot Two (2) of Irregular Tracts in the SW 1/4 of SW 1/4, ALL in Section 16, Township 11 North, Range 6 East of the P.M., Lancaster County, NE.

Tom & Kay Keefe
2426 Park Ave.
Lincoln, NE 68502-4060
(402) 474-2434