LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 98380171901

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 02/12/98
Expires 08/12/98
Revenue Code 3157

Establishment

THOMAS J PEED
T10N R7E SEC 25 QTR SW
9800 A ST

FEES: $150.00

Permittee

THOMAS J PEED
9800 A ST
LINCOLN NE 68520-9405

TOTAL $150.00

5979

Issued By Gregg M Wright MD
~~M. Jane Ford~~
Health Director

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: 983801719

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 9800 'A' STREET (no rural route) City LINCOLN NE, Zip 68520

Legal Description SW 25 TION RTE
1/4 1/4 Section Township Range 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 THOMAS J. REED Signature Thomas J. Reed

Address 9800 'A' ST. City/State/Zip LINCOLN, NE, 68520

☐ Check if owner designed system Home Phone (402) 483-4170 Work Phone (402) 477-8900

C. Contractor

Name GREEN FURNACE & PLUMBING CO. Company Name SAME AS NAME

Address 2747 No. 48TH City/State/Zip LINCOLN, NE, 68504

☐ Check if contractor designed system Work Phone (402) 467-4444

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

Designer Name THOMAS A. THIELE P.E. Firm EHRHART-GRIFFIN Work Phone (402) 551-0631

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 5 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 2/4/98 Date frwd 2/5/98 ACTION ☒ Approved ☐ Disapproved Signature Jerrold E. Head
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 2/5/98 Date frwd 2/6/98 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 2-25-98 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____

* Provisional approval only

Installation Final Written Approval

By Paul Drotzmann

Date 8-27-98

Business Office Use Only

Date Rec'd 02/04/98
Amt Paid 150 ck
Rec'd By _____ Cash/Check No. 018649

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: 98801719

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 9800 'A' ST. (no rural route) City LINCOLN NE, Zip 68520

Owner THOMAS J. PEED Addresss 9800 'A' ST. LINCOLN, NE

Soil Type (SCS): SILTY LOAM Percolation Rate: 31.0 min./inch

Date of Tests 10-24-95 to 10-25-95 Weather: Precipitation 0 Temperature 59°F.

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				
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	14	10-24	10:00	10-25	13:25	10-25	16:25	5.50	10-25	16:55	30	0.625	48
2	14	〃	〃	〃	〃	〃	〃	5.875	〃	〃	〃	0.875	34
3	14	〃	〃	〃	〃	〃	〃	7.00	〃	〃	〃	1.125	27
4	14	〃	〃	〃	〃	〃	〃	9.50	〃	〃	〃	0.750	40
5	14	〃	〃	〃	〃	〃	〃	8.50	〃	〃	〃	1.625	18
6	14	〃	〃	〃	〃	〃	〃	8.375	〃	〃	〃	1.750	17

Person Conducting Percolation Tests

Name: GEOTECHNICAL SERVICES, INC.
Phone: (402) 466-8154
Address 4817 NO. 56TH STREET
LINCOLN, NE, 68504

Sum of Percolation Rates: 184.0
Average of Rates: 31.0
Rate Used for Calculation: 48.0

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

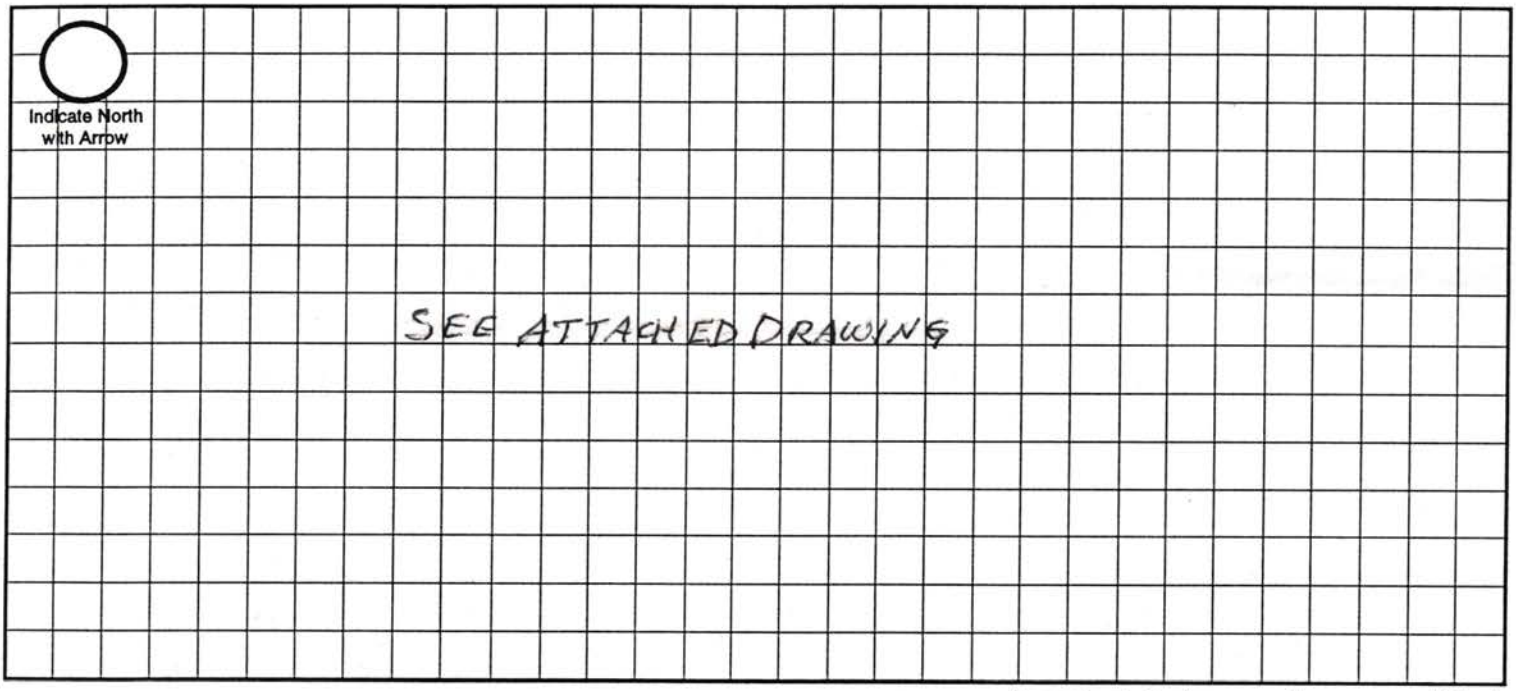
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 98380171?

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) 9800 'A' STREET City LINCOLN NE, Zip 68520

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 48 (min. per inch) Soil Type: PEORIA LOESS Land Slope: 4 %

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

Total Square Feet of Field Required: 1650 sq. ft.

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

Capacity of Septic Tank 3000 gals (2@1500) Number of Absorption Beds: 2 Number of Distribution Laterals per Bed 7

Total Length of Laterals 840 ft. Number of Trenches 14 Trench Width 2 FT

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 Wally Willms Date 01-30-98

Installer Peggy Green Date 01-30-98

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: 98380 1719

Sewage Disposal System

As Built Plans & Specifications

Date 01-30-98

System Location (Indicate correct number and street)

Address 9800 'A' STREET (no rural route) City LINCOLN NE, Zip 68520

A. Building Sewer

1. Material: PLASTIC
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 40 in.
3. Distance between dwelling and septic tank: 1000 ft.
4. Number of clean-outs: 14
5. Distances to: well or suction line 200 ft.
   stream N/A ft.
   pressure line 200 ft.
   property line 100 ft.

B. Septic Tank Two(2)

1. Material: CONCRETE
   Number of compartments: 3
2. Capacity: 3000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter ____ in.
   Riser: ☒ above ☐ below grade 4 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 200 ft.
   Stream N/A ft.
   Pressure line 300 ft.
   Property line 130 ft.

C. Distribution Box

1. Material: CONCRETE
   Number available outlets: 7
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 85 ft.

D. Absorption Field

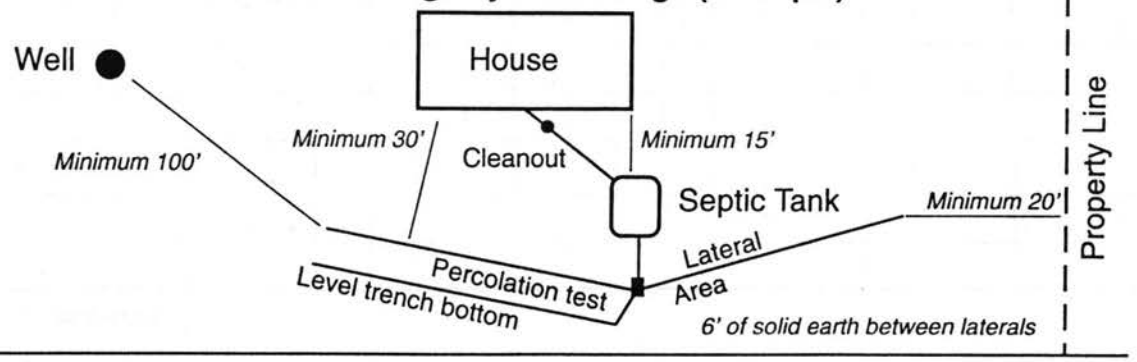
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: 4 INCH
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 14
   Length of each line: 60 ft. ____ ft.
   ____ ft. ____ ft., ____ ft.
3. Trench dimensions: Width 2 ft.
   Slope 5 in/100 ft.
   Average depth 1 in
4. Filter material: ROAD GRAVEL
   Depth of material 3 TO 4 in.
5. Distances to: Well or suction line 1000 ft.
   Stream NA ft.
   Pressure line 1000 ft.
   Property line 75 ft.

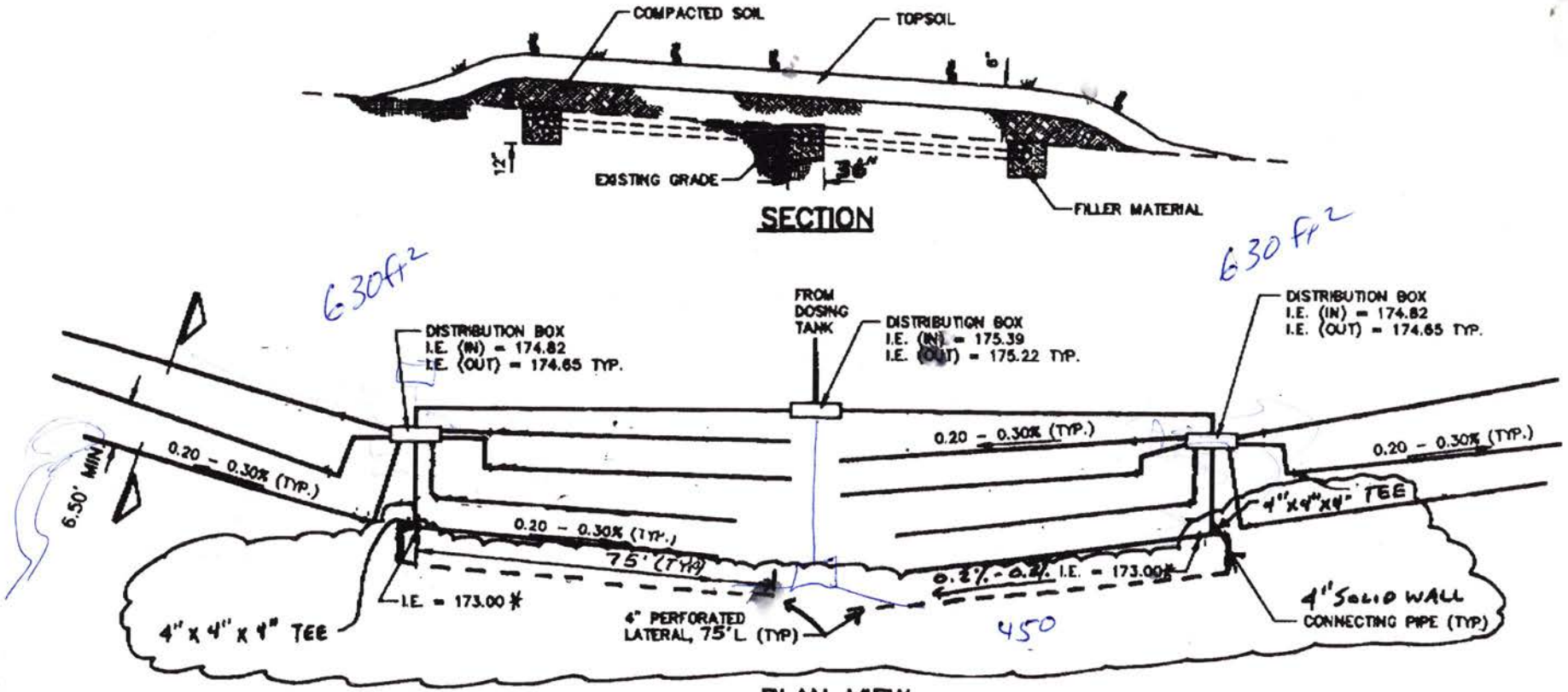
Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96



NOTE:
Additional Lateral Area
= 2 * (75i * 3'w) = 450 S.F.

Required Additional S.F. = 390 S.F.
450 > 390 .: OKAY

2/05 **SEPTIC FIELD**
NO SCALE

P9

STATE OF NEBRASKA
DEPARTMENT OF WATER RESOURCES
WATER WELL REGISTRATION

FOR DEPARTMENT USE ONLY

Registration No. _____ Sequence No. _____ Registration Date: _____

Owner Code No. _____ Receipt No. _____ _____ NRD

Well Owner TOM PEED Telephone Number (402) 483-4170

Address 6441 PONDEROSA DRIVE

City LINCOLN State NEBRASKA Zip Code 68510 +

Drilling Firm MOSER WELL DRILLING & SERVICE, INC. Telephone Number (402) 792-2515

Address P. O. BOX 308 Contractor's License No. 19033 Pump Installer License No. 29202

City HICKMAN State NEBRASKA Zip Code 68372 + 0308

Permit Number(s) N/A

Purpose of well (indicate one): ___Dewatering (over 90 days) XX Domestic ___Geothermal ___Ground Heat Exchanger
___Ground Water Source Heat Pump ___Industrial ___Injection ___Irrigation ___Livestock ___Monitoring
___Observation ___Public Water Supply (with spacing (46-638)) ___Public Water Supply (without spacing) ___Recovery
___Other _____ (indicate use)

Replacement and abandoned well information.

A. Is this well a replacement well? ___Yes XX No B. Registration number of abandoned well: _____

C. Replacement well is _____ feet from abandoned well. D. Abandoned well last operated _____, 19____

E. Original well pump column size: _____ inches. F. Abandoned well plugged _____, 19____

A. Well location: ¼ SW ¼ of Section 25, Township 10 North, Range 7E East/West, LANCASTER County.

B. The well is 791.01 feet from the North/South section line and 1219.20 feet from the East/West section line. (indicate one) (indicate one)

C. Street address or block, lot and subdivision, if applicable: _____

D. Location of water use, if applicable (give legal descriptions): N/A

E. If for irrigation, the land to be irrigated is N/A acres.

F. Well reference letter(s), if applicable: N/A

Pump Information.

Is pump installed at this time? XX Yes ___No

If yes, complete items A through E.

If no, complete items A and D with estimated information for those wells in which pump will be installed.

A. Actual pumping rate, if applicable: 25 gallons per minute. Measured ☒ or Estimated ☐

B. Pump column diameter: 2" inches. C. Length of pump column: 180 feet.

D. Pumping equipment installed: 7-11-95, 19____. E. Brand/Type: GRUNDFOS

2/7/95 2 5/8

printed on recycled paper

P9 2

8. Well Construction Information.

A. Total well depth: 254 feet. B. Static water level: 120 feet. C. Pumping water level: NA ft.

D. Construction began: 7-7-95, 19___. E. Construction completed: 7-11-95, 19___.

F. Bore hole diameter: 9" inches.

G. Casing: Diameter 5" ID ___ OD inches. Type of material: PVC

Wall thickness: 200 inches. Joints: ~~Welded~~/Glued/~~Threaded~~/Other: X Guides at ___ ft.

Length(s) and placement(s) depth from 6 ft. to 234 ft. from ___ ft. to ___ ft.

H. Screen: 5" ID ___ OD in.: Type of material PVC WOP

Screen openings (slot size): .030 & .0325 Trade name: JAYCO Guides at ___ ft.

Length(s) and placement(s) depth from 234 ft. to 254 ft. from ___ ft. to ___ ft.

I. Gravel pack interval(s) from 110 ft. to 225 ft. from 225 ft. to 255 ft. Grade size: "B"

J. Grouted/Sealed from 6 ft. to 110 ft., with HOLEPLUG (type)

from ___ ft. to ___ ft., with ___ (type)

K. Drilling method: ROTO L. Drilling fluid: WATER

M. Well development technique (total time and method): AIR/TESTED AT 25 GPM

N. Will chemicals, fertilizer or antifreeze be injected or utilized in the system? ___ Yes XX No
If yes, what will be used: ___

9. Geologic Materials Logged

DEPTH IN FEET FROM	TO	DESCRIPTION	DEPTH IN FEET FROM	TO	DESCRIPTION
0	10	BRN CLAY			
10	100	YEL CLAY			
100	105	BLUE CLAY			
105	115	SANDY TAN CLAY			
115	210	MED FINE TO MED YEL SS			
210	220	VERY CRS SS			
220	232	MED FINE SS			
232	254	VERY CRS SS			
254	260	YEL & BLUE SHALE			
260+		LIMESTONE			

(Additional sheets may be submitted)

10. I am familiar with the information submitted on this registration, and to the best of my knowledge it is true.

Water Well Contractor's Signature — Date: 31 July 95

Water Well Owner's Signature — Date

Owner THOMAS J. PEED
Location 9800 "A" ST., LINCOLN, NE.
Installer GREEN'S FURNACE & PLUMBING
Designer EHRHART-GRIFFIN & ASSOC.

On-Site Wastewater Treatment Worksheet
For
Standard Lateral Field For Dwellings

1. Enter Percolation Rate: = 48 min/in:

2. Enter Number of Bedrooms: = 5

3. Select ft² for the percolation rate and number of bedrooms from table A: = 1650 ft²:

TABLE A

Square Feet of Drain Field Trench Required for Standard Single Family Dwelling

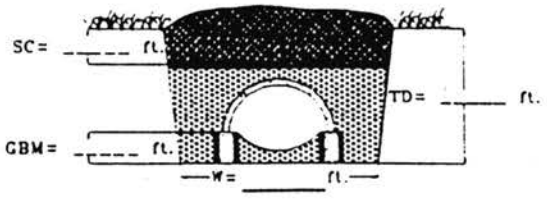
Perc Rate in minutes per inch	1 Bedroom	2 Bedroom	3 Bedroom	4 Bedroom	5 Bedroom	6 Bedroom	7 Bedroom	8 Bedroom	9 Bedroom
<1	Systems must be designed by a qualified individual or professional engineer. Construction Permit Needed								
1-10	165	330	495	660	825	990	1155	1320	1485
11-20	210	420	630	840	1050	1260	1470	1680	1890
21-30	250	500	750	1000	1250	1500	1750	2000	2250
31-40	275	550	825	1100	1375	1650	1925	2200	2475
41-50	330	660	990	1320	1650	1980	2310	2640	2970
51-60	350	700	1050	1400	1750	2100	2450	2800	3150
>60	Systems must be designed by a qualified individual or professional engineer. Construction Permit Needed								

4. Available trench length (100 ft Max.): = 60 ft.

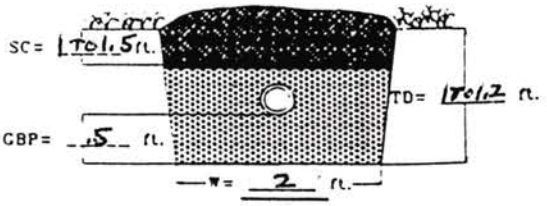
5. Divide needed ft² from **line 3** by trench length available from **line 4**. 1650 (line 3) ÷ 60 (line 4) = 27.5 ft. = answer line 5

6. Trench width that will be used: = 2 ft (5 ft. Max.)

7. To get Number of trenches divide **line 5** by **line 6**: 27.5 (line 5) ÷ 2 (line 6) = 13.75 (line 7)



SC = soil cover
GBM = gravel below half-moon
GBP = gravel below pipe
TD = total depth
W = trench width



SETBACKS: Check the Boxes Below If the Required Setback from the Lateral Field Has Been Satisfied:

Distance From	Private Wells	Public Wells	Surface Water	Trench to Ground Water	Pressure Water Lines	Property Lines	Foundation Yours	Foundation Neighbor	All Other Setbacks
Field ( ) ft.	100 ✓	500 ✓	50 ✓	4 ✓	25 ✓	10 ✓	30 ✓	40 ✓	✓

GS
Geotechnical
Services Inc.

October 26, 1995

Ehrhart Griffin & Associates
3915 Cuming Street
Omaha, Nebraska 68131

Attention: Tom Thiele

RE: PERCOLATION TEST, PEED RESIDENCE, 98TH AND "A" STREET, LINCOLN, NEBRASKA, GSI# 2202280

Dear Mr. Thiele:

Enclosed are the results of the percolation tests for evaluation of soil absorption potential for the above referenced project. The area for the test was found to the West of the North/South tree line at the Northwest corner of the property. Six percolation tests were run. Test hole locations are depicted on the enclosed site plan.

Soils encountered in the 10 foot test boring (DH-701) consisted of 6 to 8 inches of topsoil overlying Peoria loess overlying Loveland formation. The Peoria was described as a light olive gray, moist, firm silty clay. The Loveland was a reddish brown moist lean clay with traces of sand and gravel. Ground water was not encountered in the 10 foot boring. A boring log is enclosed.

The percolation tests were run in general accordance with procedures found in the Lancaster County Health Department, Procedure for Obtaining an Individual Sewage Disposal Permit Within the Boundaries of Lancaster County. One exception was required to the standard procedure. The tests were conducted in the 12 to 14 inch range of the upper material. Conducting the tests in this zone was requested because of the proposed "mound" design for the site. The final percolation rates are as follows:

Test Hole 1	Test Hole 2	Test Hole 3	Test Hole 4	Test Hole 5	Test Hole 6
48 minutes per inch	34 minutes per inch	27 minutes per inch	40 minutes per inch	18 minutes per inch	17 minutes per inch

We have enjoyed working with you on this project, and look forward to working with you in the future. If you have any questions, please contact our office.

Respectfully,
GEOTECHNICAL SERVICES, INC

Gregory M. Shafer
Project Engineer

GEOTECHNICAL ENGINEERING & GEOENVIRONMENTAL CONSULTANTS

4817 NORTH 56th STREET, STE. A1
LINCOLN, NEBRASKA 68504
TELEPHONE (402) 466-8154

OMAHA • LINCOLN • GRAND ISLAND •
DES MOINES • IOWA CITY • WICHITA • SALINA •
DENVER • PUEBLO • COLORADO SPRINGS • CHEYENNE

FOR NDEQ USE ONLY	
PERMIT NUMBER:	985004
APPROVED BY:	SMG
DATE APPROVED:	1-26-98

FORM B

APPLICATION FOR CONSTRUCTION / OPERATING PERMIT FOR A SEPTIC SYSTEM

(PLEASE PRINT OR TYPE)

A. Owner Information:

☐ Check here if owner designed system

Owner: THOMAS J. PEED (Name)

Owner: Thomas J Peed (Signature)

9800 'A' STREET (Street, P.O. Box, or Route) — LINCOLN (City)

NE (State) — 68520 (Zip) — (402)483-4170 (Phone (Home)) — 479-2181 (Work)

B. Contractor Information:

☐ Check here if contractor designed system

Contractor: GREEN'S FURNACE & PLUMBING CO. (Name)

SAME (Company Name)

2747 NO. 48TH ST. (Street, P.O. Box, or Route) — LINCOLN (City)

NE (State) — 68504 (Zip) — (402)467-4444 (Phone (Work))

C. Engineer Information:

☑ Check and complete if engineer designed system

Designer: THOMAS A. THIELE P.E. (Name) — EHRHART-GRIFFIN & ASSOCIATES (Firm) — (402)551-0631 (Phone (Work))

D. System Location:

Legal Description: ____ (1/4) of SW (1/4) — 25 (Section) — T10N (Township) — R7E (Range) — N/A (Subdivision) — N/A (Block) — N/A (Lot#)

County: LANCASTER — Is a County Permit Required: ☒ Yes ☐ No

☐ Check here if system mailing address is not the same as the owners and complete mailing information

System mailing Address: ____ (Street, P.O. Box, or Route) — ____ (City) — NE (State) — ____ (Zip)

E. This System Will Serve A:

☑ Dwelling

Number of Bedrooms: 5

Is There a Whirlpool Bathtub: ☑ Yes ☐ No

☐ Establishment (name) ____

Design Flow in Gallons per day: ____

Type of Wastewater: ☐ Domestic ☐ Non-Domestic

F. Septic Tanks:

Number of Tanks in Series: 2 — Tank Size (gallons) 1st: 1500 — 2nd: 1500 — 3rd: ____ — 4th: ____ — 5th: ____

Tank Material: ☐ Concrete ☑ Plastic ☐ Other ____

G. Absorption system: (See Attachment C for Percolation Information)

Percolation Rate: 48 (min. per inch) — Soil Type: PEORIA LOESS — Land Slope: 4 %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Gravelless ☐ Other ____

Total Square Feet of Field Required: 1650 (ft. sq.)

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

Number of Trenches: 14 — Number of Absorption Beds: 2

Trench Width: 2 FT. — Number of Distribution Laterals per Bed: 7

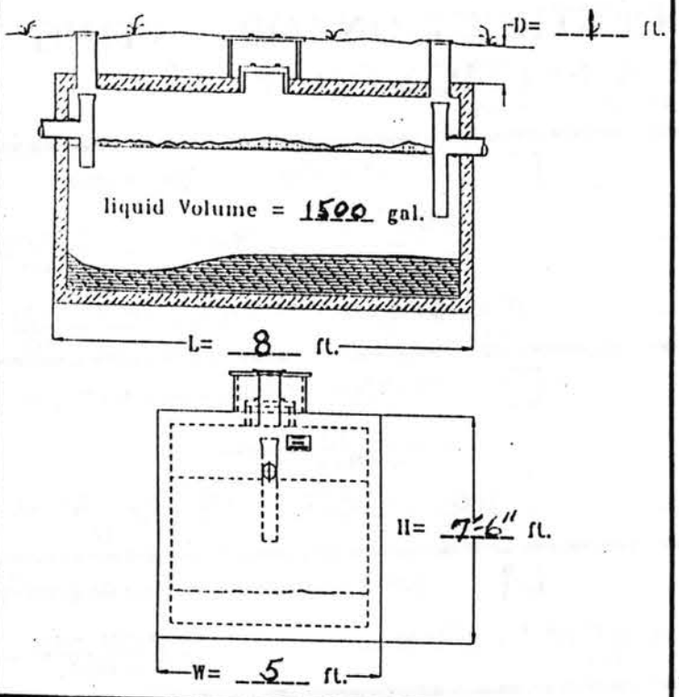
H. Setbacks: Check the Boxes Below If the Required Setback Has Been Satisfied:

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 ☑	50 ☑	NA ☐	10 ☑	10 ☑	15 ☑	25 ☑	☑
Field (ft)	100 ☑	500 ☑	50 ☑	4 ☑	25 ☑	10 ☑	30 ☑	40 ☑	☑

(OVER)

COMPLETE SECTIONS I & J AND IF NECESSARY SECTION K FOR SUBDIVISIONS

I. SEPTIC TANK DIMENSIONS

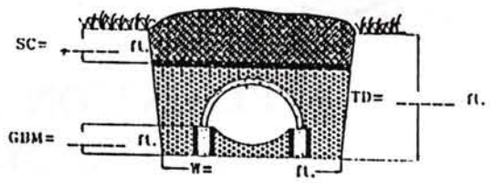


KEY

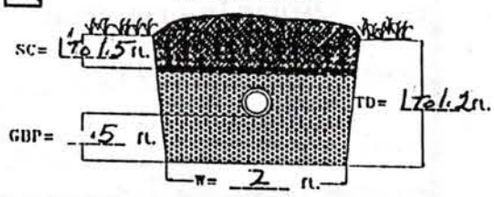
SC= SOIL COVER, TD= TRENCH DEPTH, W= WIDTH
GBM= GRAVEL BELOW HALF MOON, L= TANK DEPTH
GBP = GRAVEL BELOW PIPE, H= TANK HEIGHT,
D= DEPTH OF COVER

J. CHECK THE BOX FOR THE APPROPRAITE ABSORPTION FIELD AND COMPLETE THE BLANKS

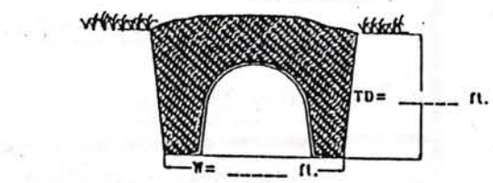
☐ HALF-MOON IN GRAVEL



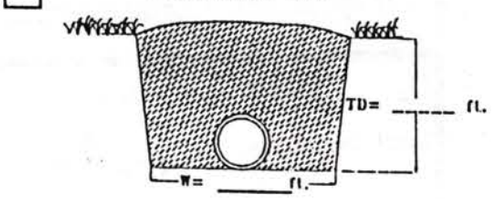
☒ PIPE IN GRAVEL



☐ GRAVELLESS HALF MOON



☐ GRAVELLESS PIPE

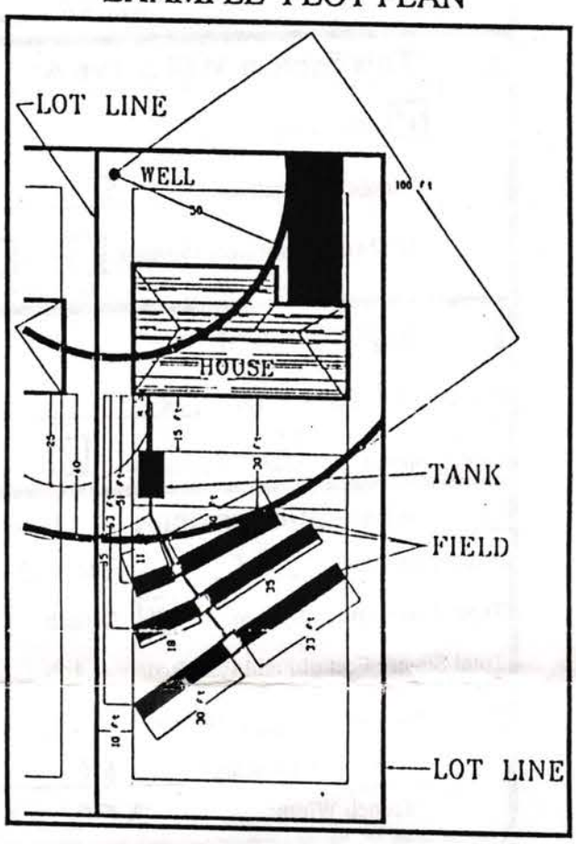


☐ OTHER: Include Drawing

K. Complete Adjacent Lot Worksheet for All Wells and Water Lines Within The Reporting Distance in Chapter 5

NORTHWEST DISTANCE IN FEET FROM: TANK FIELD WELL: 1150 1000 WATER LINES: 850 725	NORTH DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____	NORTHEAST DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____
WEST DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____	PROPOSED SEPTIC SYSTEM INSTALLATION	EAST DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____
SOUTHWEST DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____	SOUTH DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____	SOUTHEAST DISTANCE IN FEET FROM: TANK FIELD WELL: ____ ____ WATER LINES: ____ ____

EXAMPLE PLOT PLAN



Documents Required:

* Completed Form B application
* Directions to the lot with site map
* Dimensioned plot plan (See Example)
* Completed percolation test data (see attachment C)
* Dimensioned drawing showing profile view of septic system and slope of terrain
* All information must be submitted to the Department of Environmental Quality. Show applicant's name, address and phone number on each submitted page

* Send Documents to:

Department of Environmental Quality
Ground Water Section
1200 N Street, Suite 400
P.O. Box 98922
Lincoln, Nebraska 68509-8

Attachment C.

Soil Absorption Test Data Report

Owner Information:

Owner THOMAS J. PEED (NAME) Phone (402) 483-4170

Address: 9800 'A' ST, LINCOLN, NE.

Location:

Township T10N Range R7E Sec. 25 1/4 Sec. ____ 1/4 Sec. SW

County Name LANCASTER Area: 159.4 Acres

Attach a sketch of the property showing the hole location.

Soil Type: (Check one)

Sand ____ Silt ____ Clay ____ Sandy Clay ____ Loamy Sand ____

Silty Clay ____ Silty Clay Loam ____ Sandy Loam X Silt Loam ____

Dates of Test 10-24-95 to 10-25-95 Weather: Precipitation 0 Temp 59°F

Percolation Test Data

a	b	c	d	e	f	g	h	i	j	k	l	m	n	
		Presaturation Period				Percolation Readings					Results			
		Start		End		Start			End					
Hole 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. Min.)	Water Level (in.)	Elapsed Time (min.)	Water Level Drop (in.)	Percolation Rate (Min./Inch)	
1	14	10-24	10:00	10-25	13:25	10-25	16:25	5.50	16:55	4.875	30	0.625	48	1
2	14	↓	↓	↓	↓	↓	↓	5.875	↓	5.00	↓	0.875	34	1
3	14							7.00		5.875		1.125	27	1
4	14							9.50		8.750		0.750	40	1
5	14							8.50		6.875		1.625	18	1
6	14							8.375		6.625		1.750	17	1

GEOTECHNICAL SERVICES, INC.
Signature of Person Conducting Test
Address: 4817 N. 56TH STREET
LINCOLN, NE,
Phone: (402) 466-8154

Sum of Percolation Rates = 184.0

*Average of Rates in Minutes per Inch = 31

* If rates vary more than 20 minutes/inch, do not average but use the slowest rate for design purposes.

Send completed Attachment C and Operating/Construction Permit to:

Septic Tank Permits, Nebraska Department of Environmental Quality, P.O. Box 98922, Lincoln, NE 68509-8922

EGA 940275

THE PEED RESIDENCE

98TH & "A" STREETS
LINCOLN, NEBRASKA





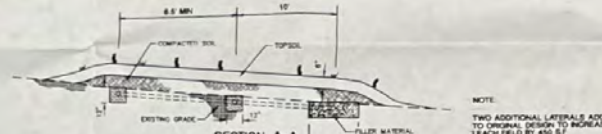
1/05 SEPTIC SYSTEM PROFILE
NO SCALE

RECORD DRAWINGS

THE ENGINEER, EHRHART GRIFFIN & ASSOCIATES, DISCLAIMS ALL LIABILITY OUT OF MISUSE OR MISINTERPRETATION OF THESE PLANS. THESE PLANS ONLY REFLECT THE SURVEY MEASUREMENTS OF THE ACTUAL IMPROVEMENTS PROVIDED FOR BY THESE PLANS THAT CAN BE MEASURED BY A PRUDENT ENGINEER AND RECORDED AFTER COMPLETION OF CONSTRUCTION. NO WARRANTY IS IMPLIED AS TO THE LOCATION OF UTILITY ADJUSTMENTS MADE DURING THE CONSTRUCTION WHICH COULD NOT BE VISUALLY SURVEYED AFTER COMPLETION OF THE PROJECT. IN ANY QUESTION OF INTERPRETING THESE PLANS, EHRHART GRIFFIN & ASSOCIATES MUST BE CONSULTED. FAILURE TO CONSULT THE ENGINEER IN SUCH MATTERS WOULD WAIVE ANY LIABILITY INVOLVED TO HIM BY THE INTERPRETING OF A THIRD PERSON.

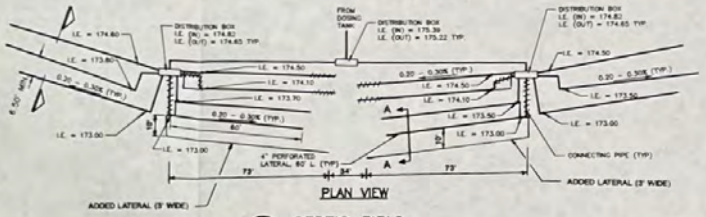
EHRHART GRIFFIN & ASSOCIATES

BY _____ DATE 8/21/98



SECTION A-A

NOTE:
TWO ADDITIONAL LATERALS ADDED TO ORIGINAL DESIGN TO INCREASE LEACH FIELD BY 450 S.F.

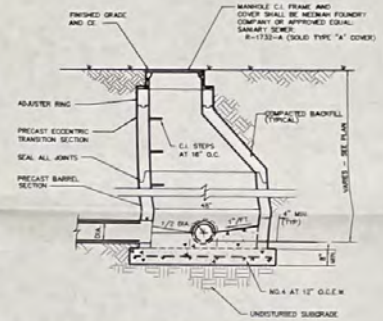


PLAN VIEW

2/05 SEPTIC FIELD
NO SCALE

LEGEND

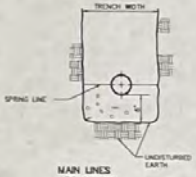
- TP — TELEPHONE POLE
- PP — POWER POLE
- GUY — GUY WIRE
- STEEL PANEL FENCE
- BARBED WIRE FENCE
- TREE
- TREE MASS
- E&T — EXISTING ELECTRIC, TELEPHONE, AND CABLE TV
- G — EXISTING GAS
- E&T — PROPOSED ELECTRIC, TELEPHONE, AND CABLE TV
- G — PROPOSED GAS



6/05 SANITARY SEWER MANHOLE
NO SCALE



3/05 SEPTIC FIELD LAYOUT
NO SCALE



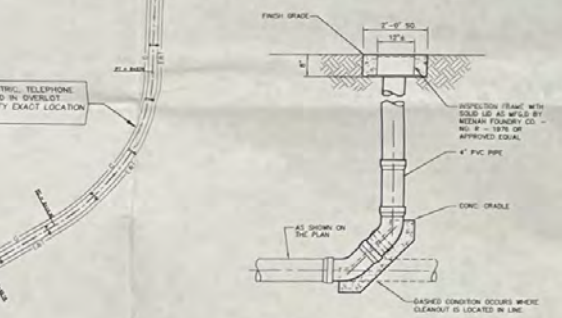
MAIN LINES
ABS OR PVC
(COMPOSITE WALL)

NOTES:
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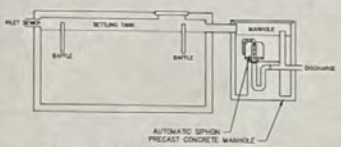
SIEVE SIZE	PERCENTAGE PASSING
3/4 INCH	100
3/8 INCH	80 ± 15
NO. 4	30 ± 15
NO. 10	15 ± 10
NO. 200	5 ± 5

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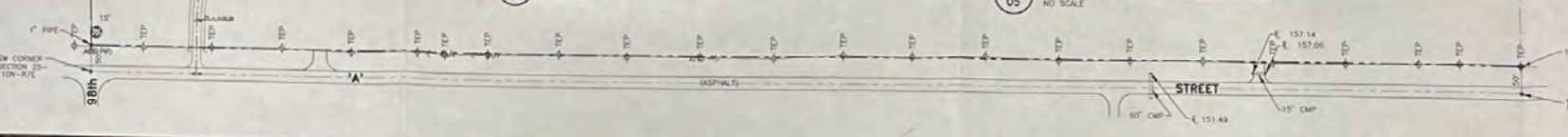
7/05 PIPE ENVELOPE
NO SCALE



4/05 CLEANOUT DETAIL
NO SCALE



5/05 AUTOMATIC SIPHON DETAIL
NO SCALE



UTILITY LAYOUT PLAN

ALLEY-POYNER ARCHITECTURE
PROFESSIONAL CORPORATION
1819 JONES STREET, OMAHA, NEBRASKA 68102
(402) 341-1844 FAX (402) 341-4796

CONSULTANTS
CIVIL ENGINEERS
STRUCTURAL ENGINEERS

REVISION DATE

PROJECT NUMBER 94.05
DATE: MAY 26, 1998

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PLANS

EGA 940275

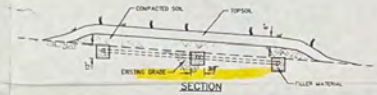
THE PEED RESIDENCE

98TH & "A" STREETS
LINCOLN, NEBRASKA

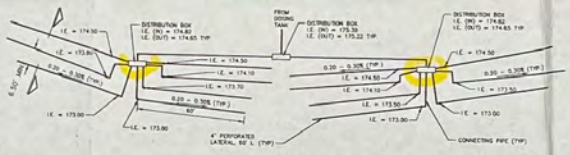




1/05 SEPTIC SYSTEM PROFILE
NO SCALE

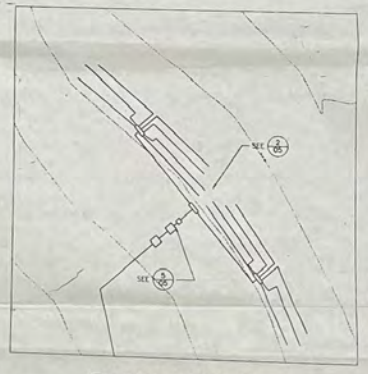


SECTION

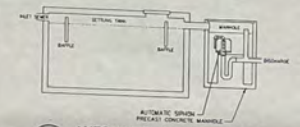


PLAN VIEW

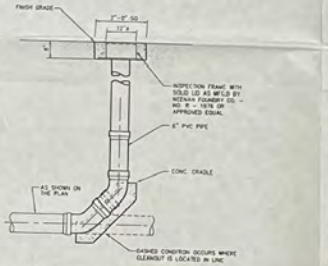
2/05 SEPTIC FIELD
NO SCALE



3/05 SEPTIC FIELD LAYOUT
NO SCALE



5/05 AUTOMATIC SIPHON DETAIL
NO SCALE



4/05 SANITARY SEWER CLEANOUT
NO SCALE

UTILITY LAYOUT PLAN

LEGEND

- TELEPHONE POLE
- PP POWER POLE
- GUY GUY WIRE
- STEEL PANEL FENCE
- BARBED WIRE FENCE
- TREE
- TREE MASS
- EXISTING ELECTRIC, TELEPHONE, AND CABLE TV
- EXT EXISTING GAS
- PROPOSED ELECTRIC, TELEPHONE, AND CABLE TV
- PROPOSED GAS

6/05 SANITARY SEWER MANHOLE
NO SCALE

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SIEVE SIZE	PERCENTAGE PASSING
1-1/4 INCH	100
1.0 INCH	80 ± 15
NO. 4	30 ± 15
NO. 10	15 ± 10
NO. 200	5 ± 5

3. CRUSHED ROCK FOR PIPE BEDDING AND UNSTABLE TRENCH SHALL BE MEASURED AND PAID FOR AS PROVIDED IN THE SPECIFICATIONS AND PROPOSAL.

7/05 PIPE ENVELOPE
NO SCALE

ALLEY-POYNE ARCHITECTURE
PROFESSIONAL CORPORATION
1415 JOHNS STREET, OMAHA, NEBRASKA 68
(402) 341-1544 FAX (402) 341-

CONSULTANTS
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STRUCTURAL ENGINEERS
MECHANICAL ENGINEERS
ELECTRICAL ENGINEERS

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ALLEY POYNE ARCHITECTURE P

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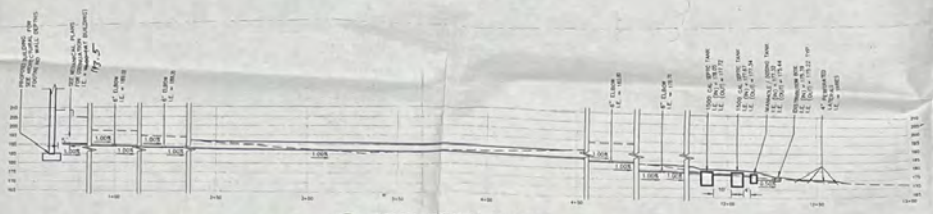
Pollution Control Project
APPROVED
1-26-1998

EGA 940275

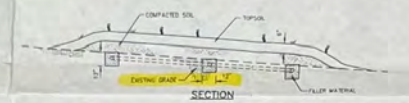
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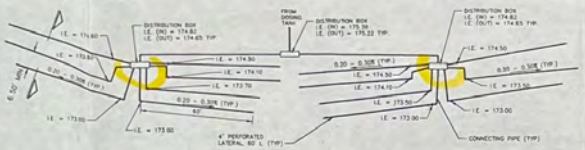




1/05 SEPTIC SYSTEM PROFILE
NO SCALE

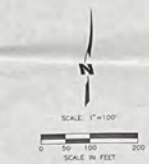


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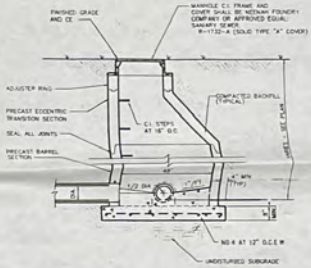
PLAN VIEW

2/05 SEPTIC FIELD
NO SCALE



LEGEND

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- PP-POWER POLE
- GUY — GUY WIRE
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- BARBED WIRE FENCE
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6/05 SANITARY SEWER MANHOLE
NO SCALE

4/05 SANITARY SEWER CLEANOUT
NO SCALE

3/05 SEPTIC FIELD LAYOUT
NO SCALE

5/05 AUTOMATIC SIPHON DETAIL
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(402) 341-1844 FAX (402) 341-4[illegible]

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MECHANICAL ENGINEER
ELECTRICAL ENGINEER
REVISION

PROJECT NUMBER 9[illegible]
DATE [illegible]

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ALLEY POYNER ARCHITECTURE

UTILITY LAYOUT PLAN

C1.05

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