LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

ENVIRONMENTAL HEALTH DIVISION

NON TRANSFERABLE

PERMIT

Permit No. 97380160101

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 06/27/97
Expires 12/27/97
Revenue Code 18754

Establishment

ALLEN BLACKBURN
T11N R6E SEC 5
LOT 30

FEES: $150.00

TOTAL $150.00

Permittee

ALLEN BLACKBURN
4930 W KINGSLEY ST
LINCOLN NE 68524

Issued By M. Jane Ford
Health Director

4912

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: 97380160|

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 3800 ~~NW 40th~~ and Mill Road (no rural route) City Raymond NE, Zip 68428

Legal Description SW 1/4 (1/4) 5 (1/4) 11 (Section) No. 6 (Township) East of the 6th PM (Range) - (Subdivision) - (Addition) 3 (Block) 8 (Lot)

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Allen Blackburn Signature Allen Blackburn

Address 4930 Kingsley City/State/Zip Lincoln, NE 68524

☒ Check if owner designed system Home Phone 470-0451 Work Phone 786-2715

C. Contractor

Name SELF Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name SELF Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 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 6-17-97 Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd Dan L Sgw Date frwd 7-3-97 ACTION ☒ Approved ☐ Disapproved Signature Dan L Sgw
3. **City or County Engineer** Date rec'd 6-20-97 Date frwd 6-20-97 ACTION ☒ Approved ☐ Disapproved Signature Jim Eboogh

12-17-98. one lateral replaced flood.

Installation Final Written Approval

By Jim Bowe

Date 1/7/99

Business Office Use Only 3160

Date Rec'd 06/17/97

Amt Paid 150 ck

Rec'd By _____ Cash/Check No. 2283

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

489-6692 home

B

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

Permit Number: 9738 01601

Sewage Disposal System

Test #1

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Southwest corner of 26 acre

System Location (Indicate correct number and street)

Address NW 40th and Mill Road (no rural route) City Raymond NE, Zip 68428

Owner Alan + Gina Blackburn Address 4930 Kingsley, Lincoln, NE 68524

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

Date of Tests 2-22-97 to 2-23-97 Weather: Precipitation 0 Temperature 30°

12" Frostline

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"	2-22	9:15A	2-23	1050A	2-23	1050A	6"	2-23	1120A	30min	1/4	120 *
2	"	"	"	"	"	"	"	6"	"	"	30	3/4	40
3	"	"	"	"	"	"	"	6"	"	"	30	1 1/8	✓ 27
4	"	"	"	"	"	"	"	6"	"	"	30	1 1/4	✓ 24
5	"	"	"	"	"	"	"	6"	"	"	30	1 3/4	✓ 17
6	"	"	"	"	"	"	"	6"	"	"	30	3/4	40
* Test failed because of a greater than 20 (min/inch) drop between holes 1 and 2													

Sum of Percolation Rates: 268.00

Average of Rates: 44.67

Rate Used for Calculation: 120 - fail

Person Conducting Percolation Tests

Name: BRIAN R. SHAFER

Phone: 464-0638

Address 2700 DAN AVENUE
LINCOLN, NE 68504

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Failed - test was conducted North/South with hole #1 located 75' North of Mill Road. proposed 2nd percolation test to run west/East located near holes 3 and 4 of this test. Allen Blackburn 2-27-97

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

B

Permit Number: 97380160 1

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street) 3800

Address ~~NW 40th~~ and Mill Road (no rural route) City Raymond NE, Zip 68428

Owner Allen Blackburn Addresss 4930 Kingsley, Lincoln Ne

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

Date of Tests 3-8-97 to 3-9-97 Weather: Precipitation Trace Temperature 35° F

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"	3-8	10:15A	3-9	10:20A	3-9	10:20A	6"	3-9	11:10A	30min	3/4	40
2												3/4	40
3												3/4	40
4												1 1/4	24
5												1 1/4	24
6												1 3/4	17

Sum of Percolation Rates: 185
Average of Rates: 30.83
Rate Used for Calculation: 40

Person Conducting Percolation Tests

Name: Brian R. Shafer
Phone: 464-0638
Address 2700 Dan Avenue
Lincoln, Ne. 68504

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks 720 m/in THUS 40 m/in FOR CALCULATION

Signature of Reviewing Official _____ Date 6-17-97

FORM 23-101 10-96

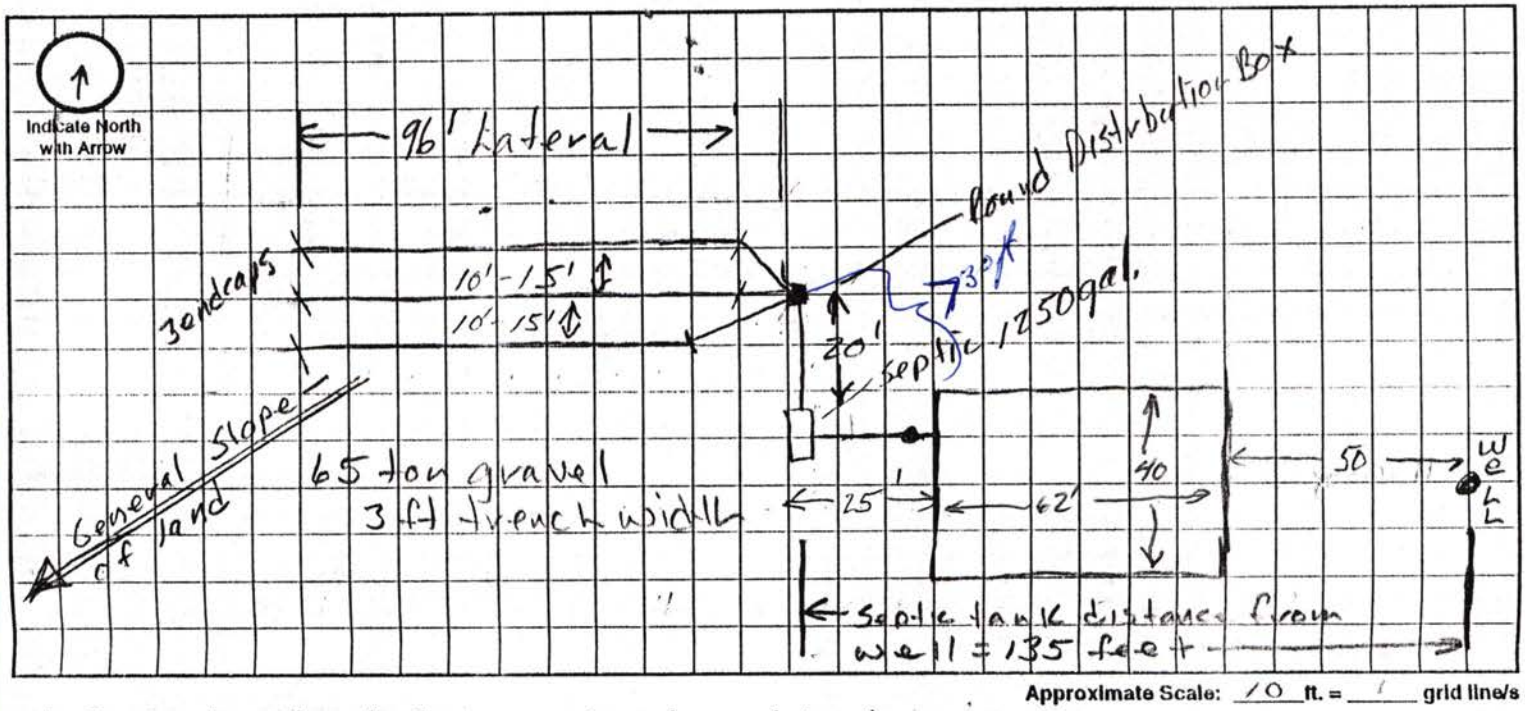
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 9738 01601

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: 10 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) NW 40th + Mill Road City Raymond NE, Zip

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other

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

Percolation Rate 40 (min. per inch) Soil Type: Clay Loam Land Slope: 1 %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other

Total Square Feet of Field Required: 861 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 0 Number of Distribution Laterals per Bed 0

Total Length of Laterals 287 ft. Number of Trenches 3 Trench Width 3'

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 Allen Blaker Date 4-8-97

Installer SELF Date

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

D

Permit Number: 97380601

Sewage Disposal System

As Built Plans & Specifications

Date 12-7-98

System Location (Indicate correct number and street)

Address 3800 WEST MILL ROAD (no rural route) City RAYMOND NE, Zip 68428

A. Building Sewer

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

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 18X18 in.
   Over outlet, diameter 8x6 in.
   Riser: ☒ above ☐ below grade 18 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 120 ft.
   Stream n/a ft.
   Pressure line 75 ft.
   Property line 180 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 9 ft.

D. Absorption Field

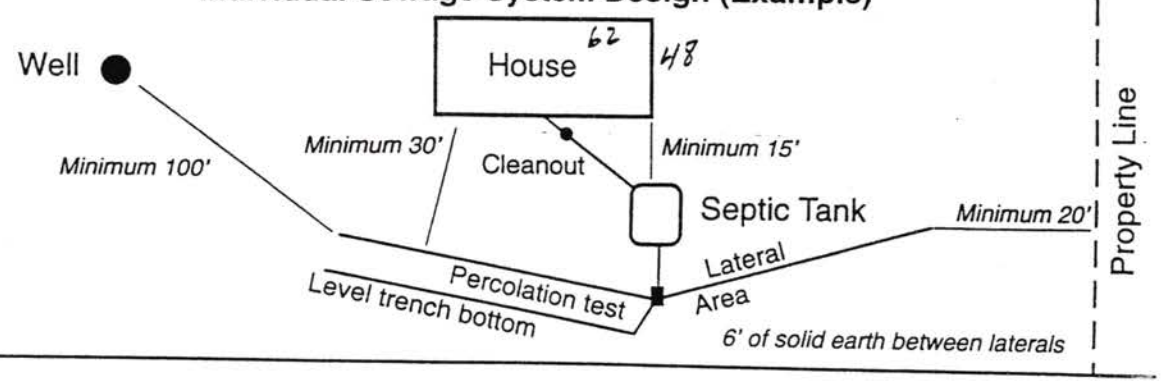
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 15"
   ~~or perforated pipe:~~ See attached
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: ① 101.16 ft. ② 92.73 ft.
   ③ 92.73 ft. — ft., — ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 34 in
4. Filter material: Wood chips
   Depth of material 8 in.
5. Distances to: Well or suction line 150 ft.
   Stream n/a ft.
   Pressure line 105 ft.
   Property line 170 ft.

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

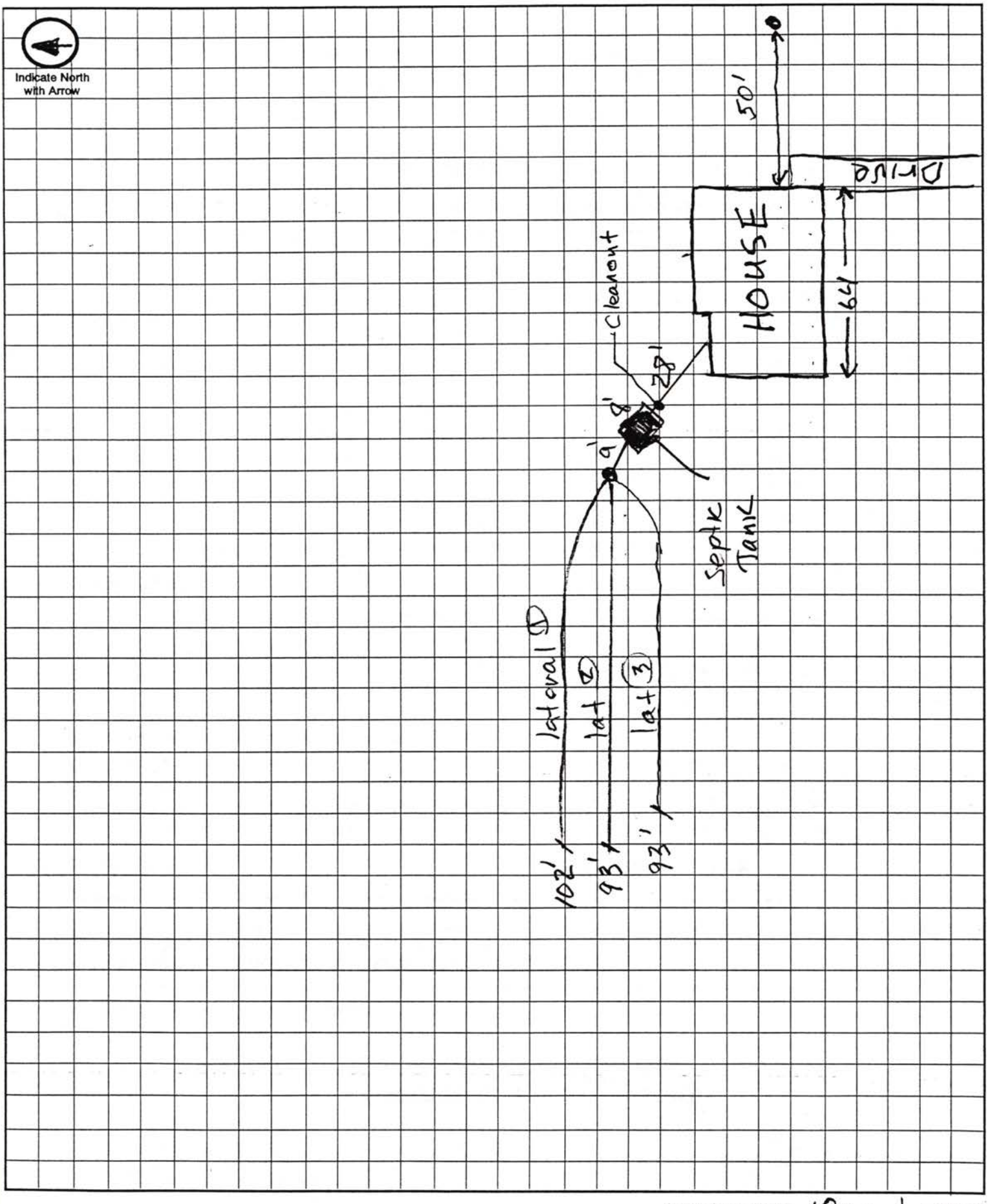
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

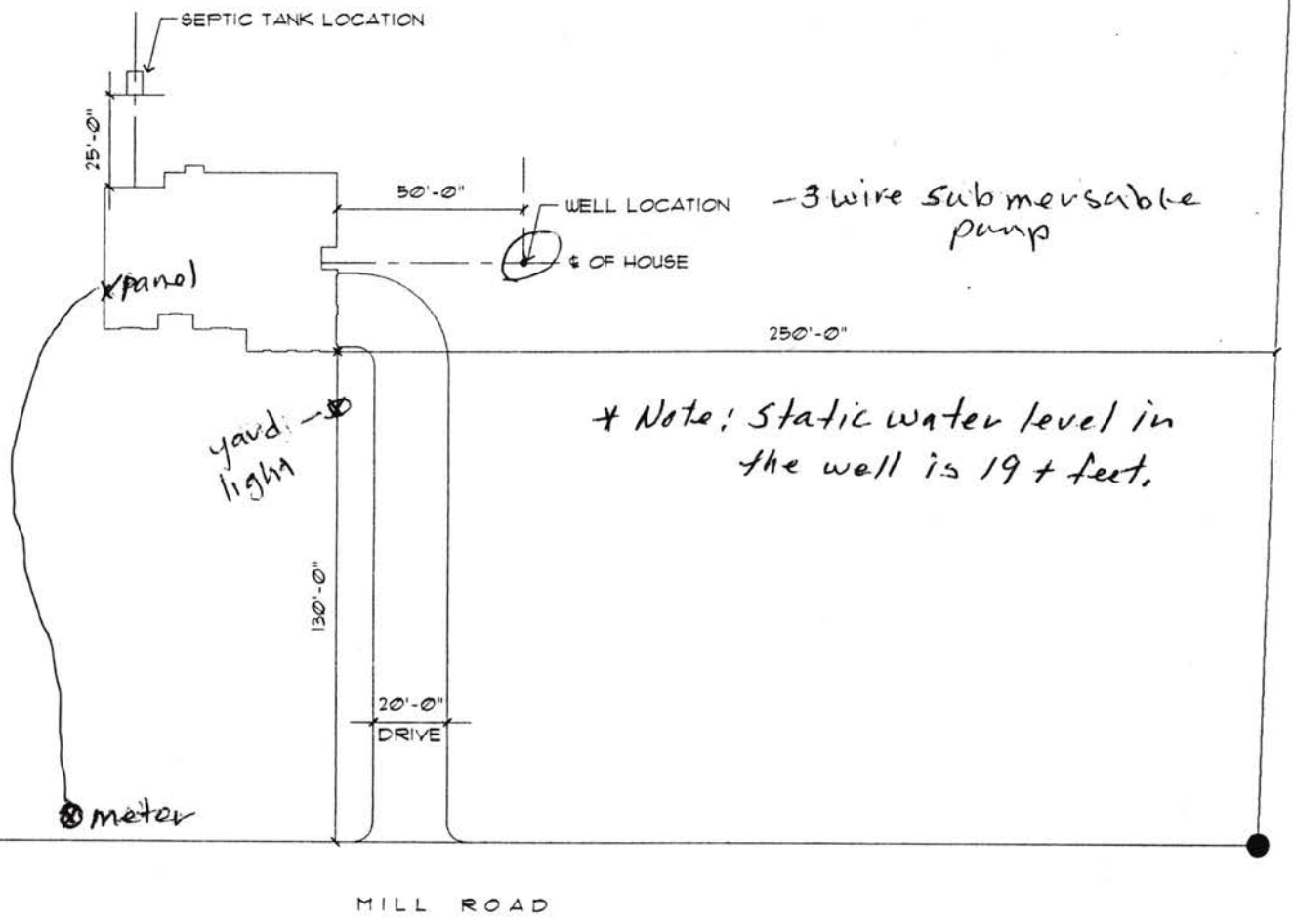
As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s

Service has been ordered
— Norris Public Power
Jerry Kline 423-3855

Note * also need a temp service during construction period.

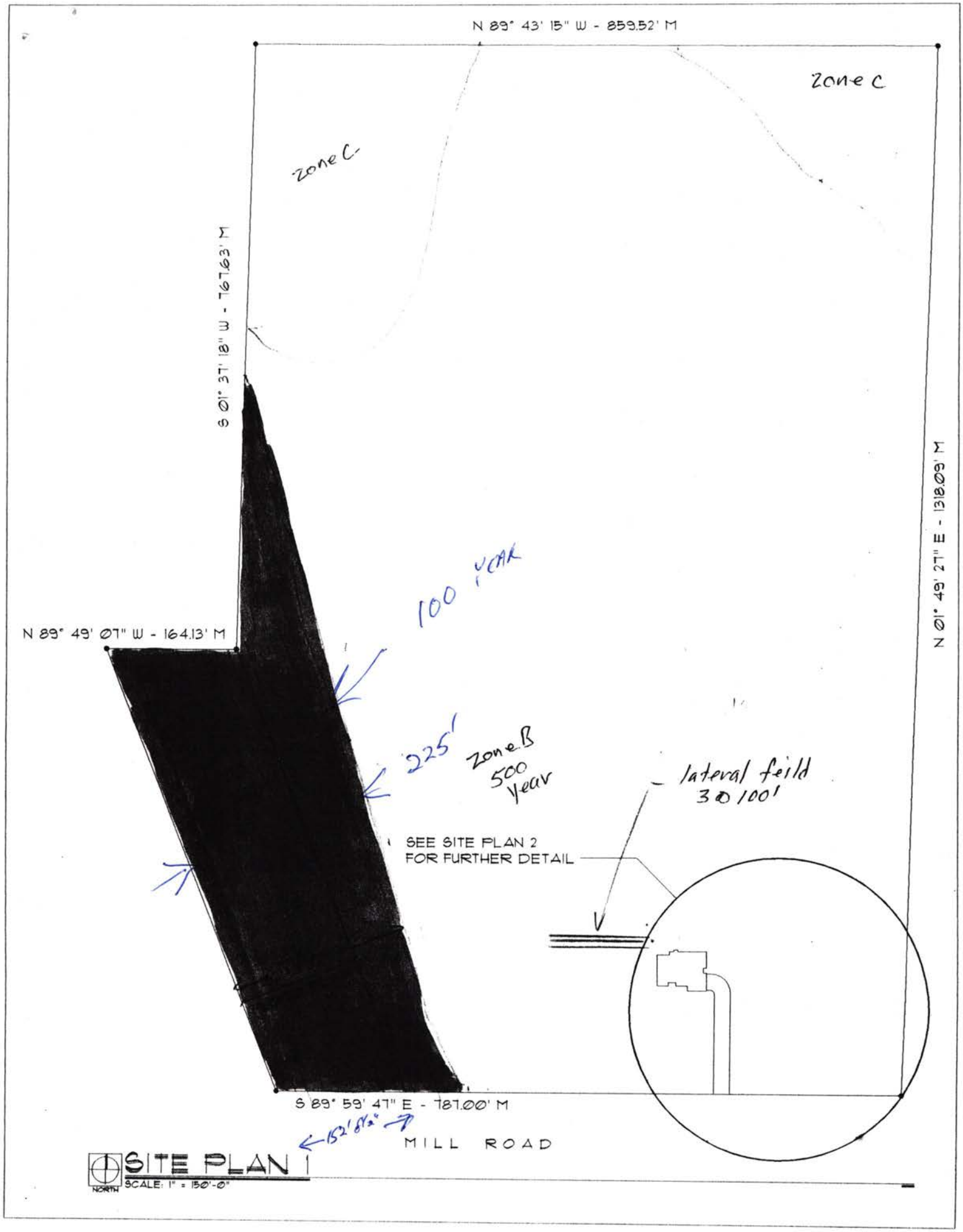


NORTH

SITE PLAN 2

SCALE: 1" = 50'-0"

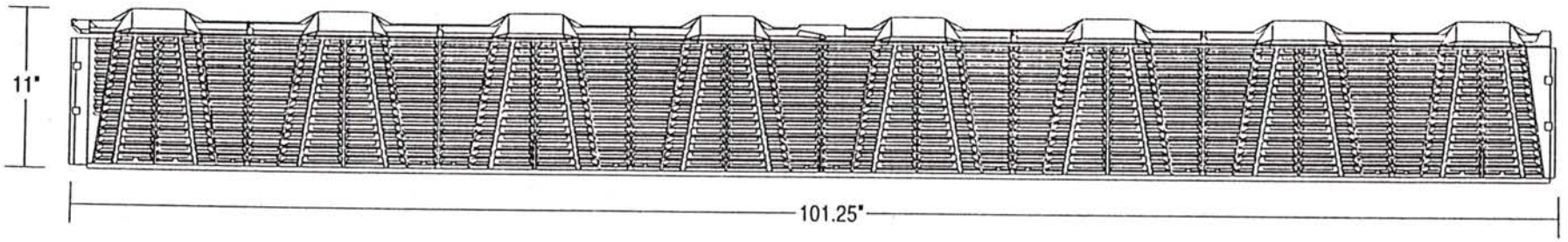
Allen Blackburn
786-2715

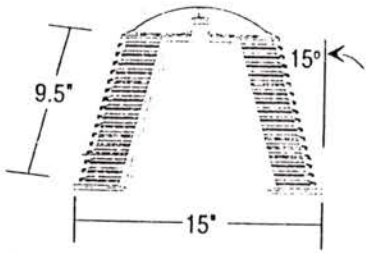


SITE PLAN 1

SCALE: 1" = 150'-0"

THE EQUALIZER 24™





Equalizer 24 Chamber	
Size	15" x 101.25" x 11"
Weight	23 lbs.
Volume	33.3 gal./4.45 ft³

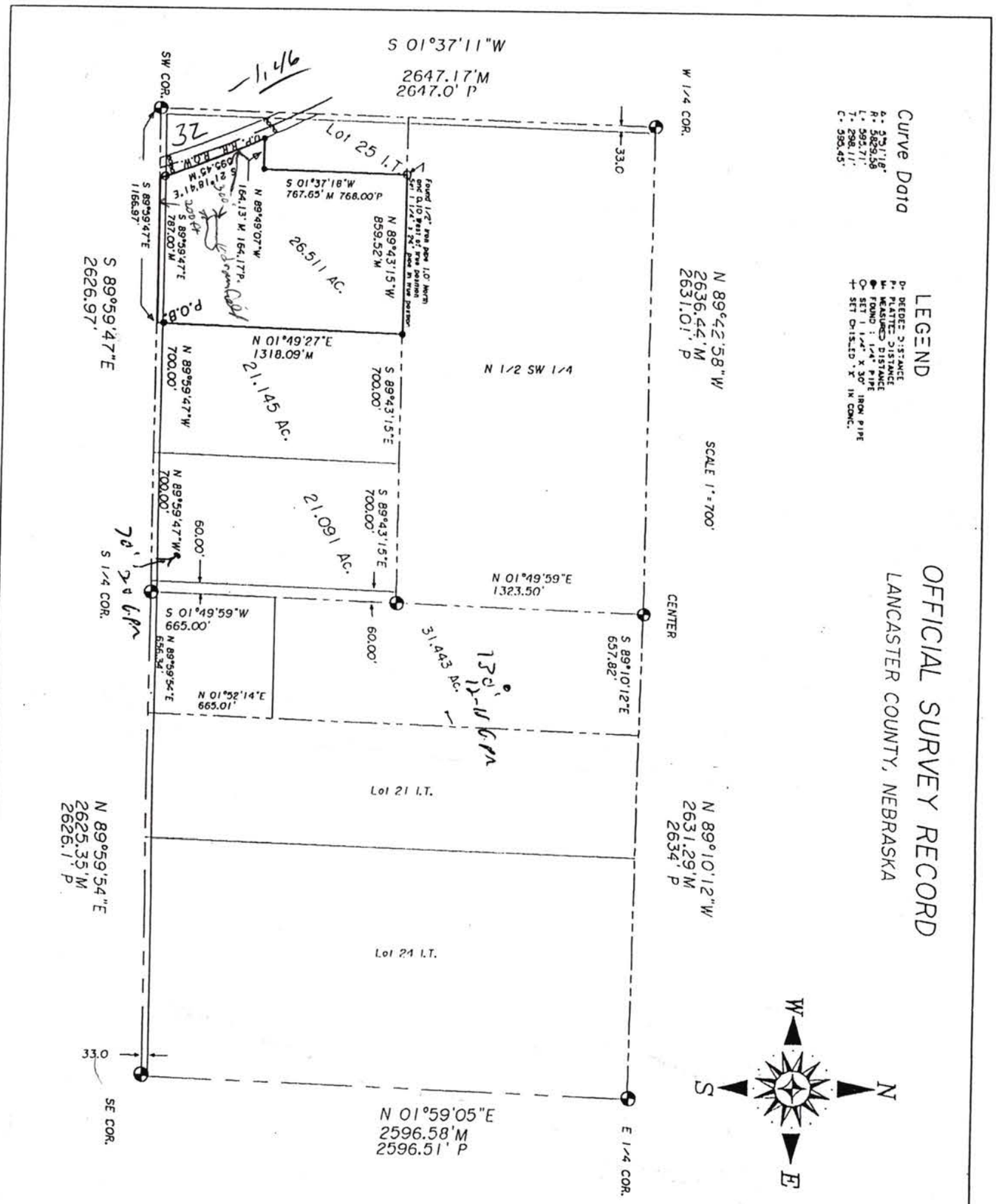
INFILTRATOR® SYSTEMS INC

Leading the way in septic and stormwater chamber systems

4 Business Park Road, P.O. Box 768 • Old Saybrook, CT 06475
Phone: 800-221-4436 Fax: 860-388-6810

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Equalizer is a Trademark of Infiltrator Systems, Inc

C08395



OFFICIAL SURVEY RECORD

LANCASTER COUNTY, NEBRASKA

A SURVEY OF A 26.511 ACRE TRACT OF LAND LOCATED IN THE SOUTHWEST QUARTER OF SECTION 5 TOWNSHIP 11 NORTH RANGE 6 EAST OF THE SIXTH P.M., LANCASTER COUNTY, NEBRASKA.

SURVEYORS CERTIFICATE

I hereby certify that I accurately surveyed or under my direct supervision the above plat and iron pipes 1"x 24" were set at all points marked O. All distances are in feet and hundredths of a foot.

Signed this 31 day of FEBRUARY 1997

Victor A. Beenblossom RLS #461

VICTOR A. BEENBLOSSOM #461

Benchmark Surveying
5227 Walker Ave.
Lincoln, NE. 68504
(402) 466-4366

JOB #96-215

LEGAL DESCRIPTION

Lot 33, I.T. SW¼ 5-11-6

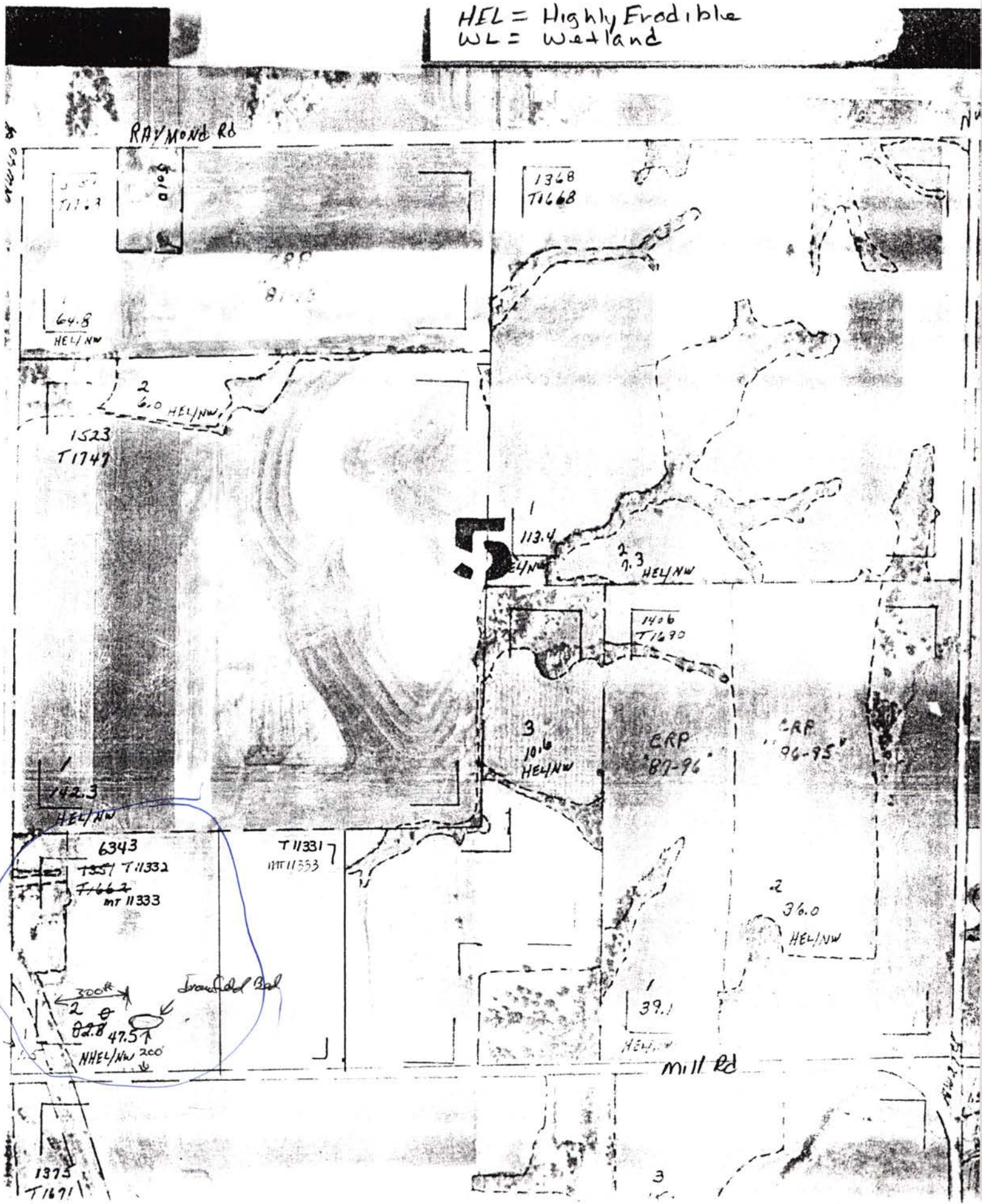
A survey of a 26.51 acre tract of located in the Southwest Quarter of Section 5 Township 11 North Range 6 East of the Sixth P.M., Lancaster County, Nebraska. More particularly described by metes and bounds as follows.

Commencing at the Southwest corner of Section 5 Township 11 North Range 6 East of the Sixth P.M; Thence South 89-59-47 East (an assumed bearing) on the South line of said Section 5 a distance of 1166.97 feet to the ***Point of Beginning***; Thence North 01-49-27 East a distance of 1318.09 feet to a point on the North line of the South One half of the Southwest Quarter; Thence North 89-43-15 West on said North line a distance of 859.52 feet; Thence South 01-37-18 West a distance of 767.65 feet; Thence North 89-49-07 West a distance of 164.13 feet to a point on the Easterly Right of Way of the Union Pacific Railroad; Thence on a curve to the Right having radius of 5829.58, a central angle of 5-51-18, a chord distance of 595.45 feet, and a chord bearing of South 21-18-41 East to a point on the South line of said section; Thence South 89-59-47 East on the said South line a distance of 787.00 feet to the ***Point of Beginning***, and containing a calculated area of 1,154,813.05 square feet or 26.511 acres more or less.

Lancaster County FSA
ph 423-9683

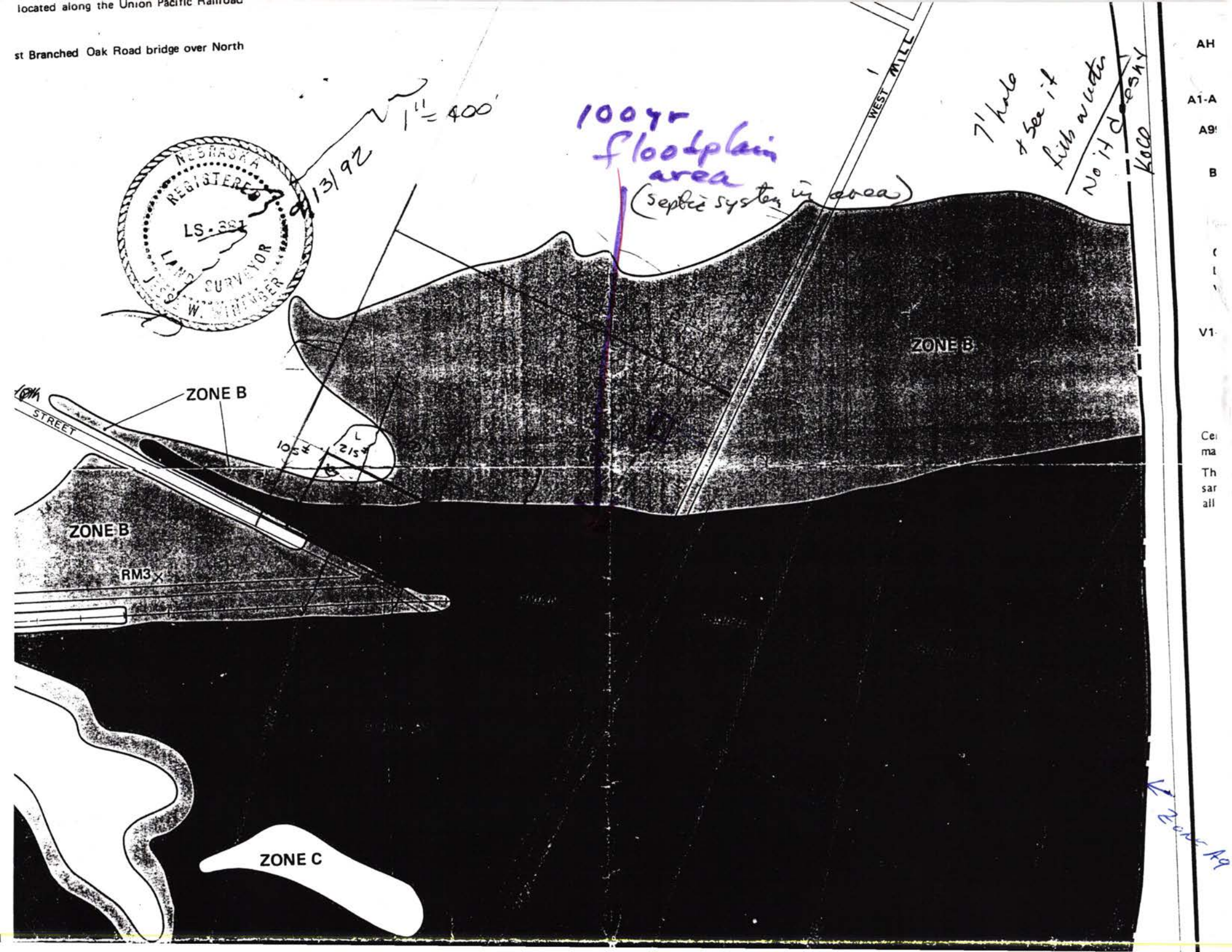
Farm # 6440

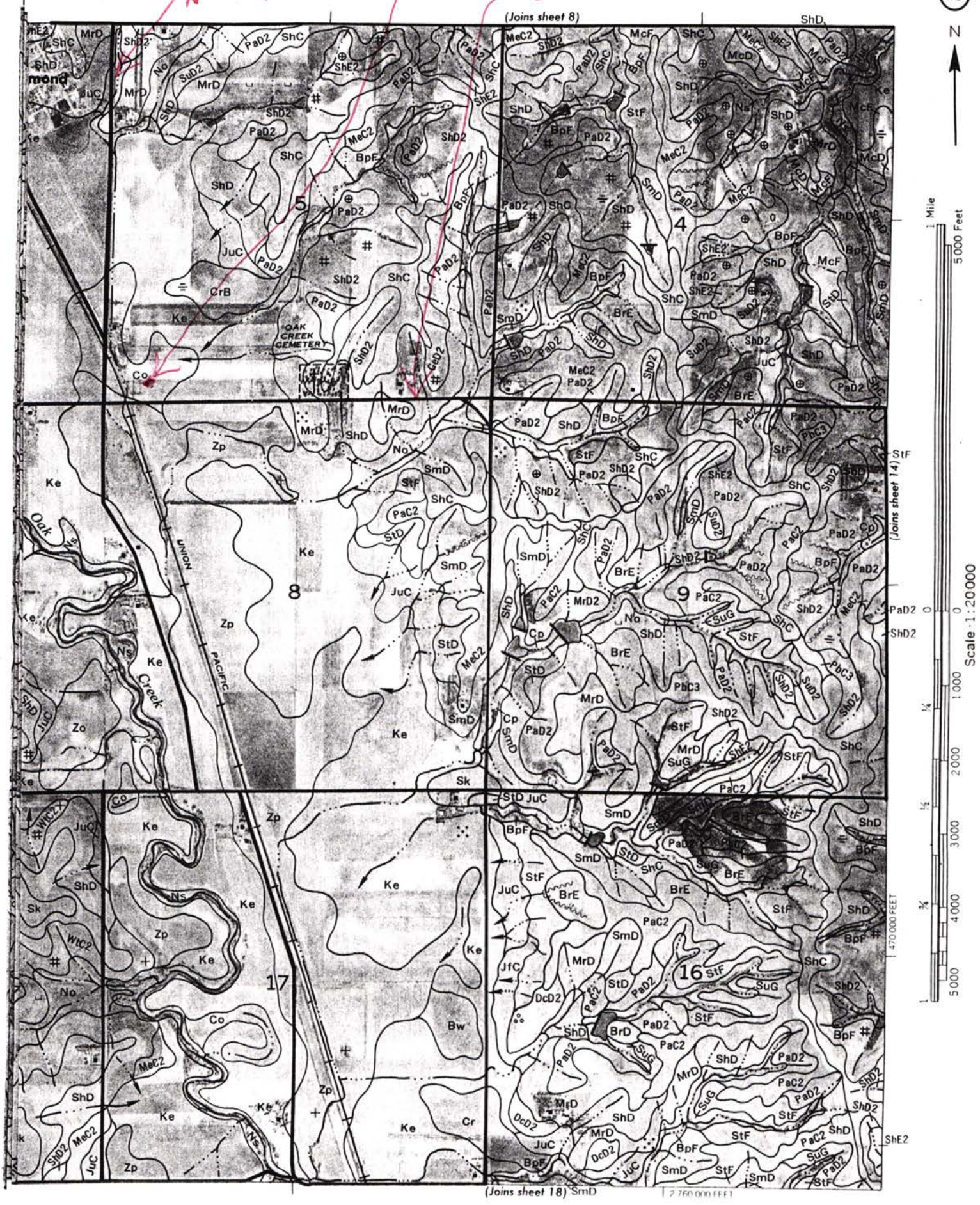
HEL = Highly Erodible
WL = Wetland



located along the Union Pacific Railroad

st Branched Oak Road bridge over North




NW 40th
near septic
W. Mill Rd
(Joins sheet 8)
(Joins sheet 14)
(Joins sheet 18)
OAK CREEK CEMETERY
UNION PACIFIC
Oak Creek
5
4
8
9
17
16
N
1 Mile
5000 Feet
Scale · 1:20000
470000 FEET
2760000 FEET

















Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

P6759-21

P6850-13

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☑ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address RR1, Box 129C, 3800 west Mill Rd, Raymond

Twp 11 Range ____ Section 5 1/4 SW 1/4 ____ Block ____ Lot 33 Addition ____

Directions to Property ____

Location of Well East of house Tap Location: Inside ☒ Outside ☐

Location of Sewage System West of House Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Allen Blackburn	Box 129C, 3800 W Mill Raymond, Ne 68428	783-0330
Tenant/Buyer:	Allen Blackburn	Same/Refinance	786-2715 wk
Return to:	same		

Signature of Applicant Allen Blackburn Address same Date 1/25/99

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 1/25/99
Initials CW
Amount $150.00
Check No. 3027

DATA ENTRY

Date ____/____/____
Case No. ____
Initials ____

PRELIMINARY STATUS--By James Baer **DATE:** 1/28/99

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ ____/ml	☐ ____/ml
Nitrate	☒ <0.1 ppm	☐ ____ppm

SEWAGE SYSTEM

Approved ☒
Provisional ☐
Disapproved ☐

Additional Site Visits

Date 02/10/99 by JB
Date ____/____/____ by ____
Date ____/____/____ by ____

Comments: ____

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

Approved by James E Baer Date 2/17/99

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95