LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 97380169901

SEWAGE INSTALLATION
SEPTIC SYSTEM

Issued 12/11/97
Expires 06/11/98
Revenue Code 3157

Establishment

JIM JEFFERS
T11N R6E SEC 4 QTR NE
1503 W RAYMOND RD-RAYMOND

FEES: $150.00

Permittee

JIM JEFFERS
1503 W RAYMOND RD
RAYMOND NE 68428

TOTAL $150.00

Gregg Wright MO

Issued By ~~M. Jane Ford~~
Health Director

5562

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:

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 1503 W RAYMOND RD (no rural route) City RAYMOND NE, Zip

Legal Description NE ¼ ¼ Section 11N Township 6E 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 JIM JEFFERS Signature Jim Jeffers

Address 1503 W RAYMOND City/State/Zip RAYMOND RD

☐ Check if owner designed system Home Phone 474 7905 Work Phone

C. Contractor

Name STAN KROESE Company Name EXCAVATING INC

Address 16067 NW 48TH City/State/Zip LINCOLN NE

☑ Check if contractor designed system Work Phone 430 6029

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 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 12/9/97 Date frwd 12/12/97 ACTION ☒ Approved ☐ Disapproved Signature Gerald C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 12.12.97 Date frwd 12.12.97 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 12/12/97 Date frwd 12/12/97 ACTION ☒ Approved ☐ Disapproved Signature

2-5-98, rm sewer line & tank dist box
3-5-98, rm drain field in Sharpsburg

Installation Final Written Approval

By Ron Mayfield

Date 3-6-98

Business Office Use Only 3090

Date Rec'd 12/09/97

Amt Paid 150.00

Rec'd By LS Cash/Check No. 8900

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

Lincoln-Lancaster County Health Department
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B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1503 W RAYMOND RD (no rural route) City RAYMOND NE, Zip

Owner JIM JEFFERS Addresss 1503 W RAYMOND RD

Soil Type (SCS): ~~MORRILL CLAY~~ SHARPSBURG SILTY CLAY LOAM W/SAND SYMBOL Percolation Rate: min./inch

Date of Tests to Weather: Precipitation Temperature

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	22	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1 1/8	27 MIN/IN
2	24	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1	30 MIN/IN
3	26	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1 1/8	27 MIN/IN
4	23	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1"	30 MIN/IN
5	22	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1 1/4	24 MIN/IN
6	21	11/18	8 AM	11/19	8 AM	11/19	11 AM	6	11/19	11 30 AM	30	1	30 MIN/IN

Sum of Percolation Rates:
Average of Rates: 28
Rate Used for Calculation: 28

Person Conducting Percolation Tests

Name: STAN KROESE
Phone: 4306029
Address 16667 NW 46TH LNK NE

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

DEC 1 1 1997

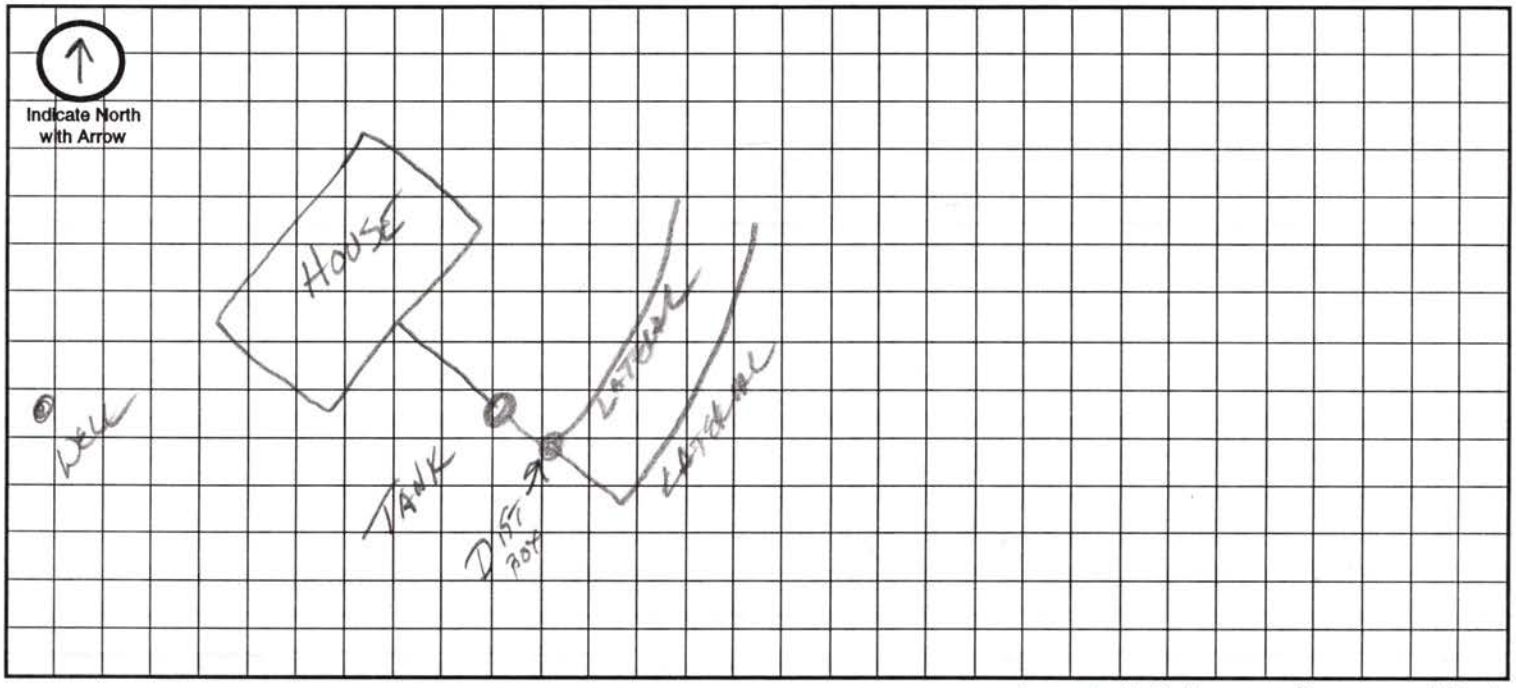
C

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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) 1503 W RAYMOND City LNK 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: SANDY CLAY Land Slope: 5 %

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

Total Square Feet of Field Required: 725 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 2 Number of Distribution Laterals per Bed 100'

Total Length of Laterals 200 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 ☑	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 Jim Peters Date 12-9-97

Installer Steve Rhoades Date 12-9-97

FORM 23-102 10-96

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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 2/5/98

System Location (Indicate correct number and street)

Address 1503 W. Raymond Rd (no rural route) City Raymond Nebr. NE, Zip

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 36 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 ____ 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 ____ in.
   Over outlet, diameter ____ in.
   Riser: ☑ above ☐ below grade ____ 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 100'+ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

C. Distribution Box

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

D. Absorption Field

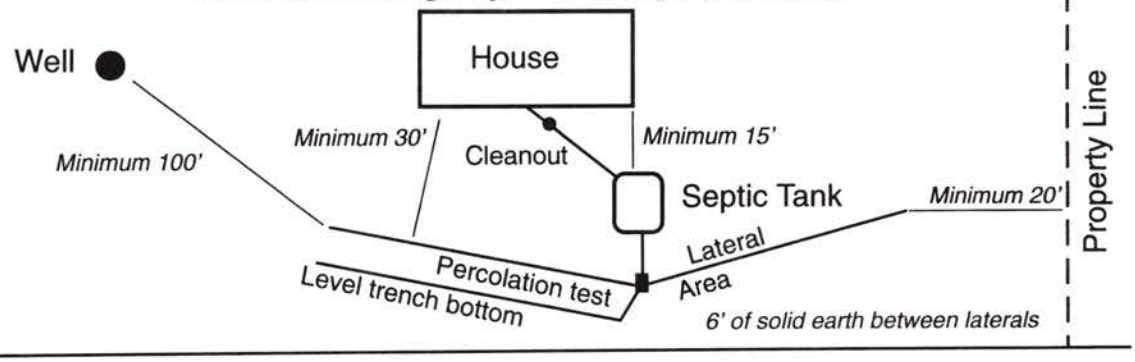
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds (Infiltrator) ☐ Perforated pipe
   Diameter of half round: 15"
   or perforated pipe: 4" gravel under Infiltrator
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other Polyurethene
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   ____ ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope ____ in/100 ft.
   Average depth 36 in
4. Filter material: Rd. Gravel
   Depth of material 24 in.
5. Distances to: Well or suction line 100'+ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

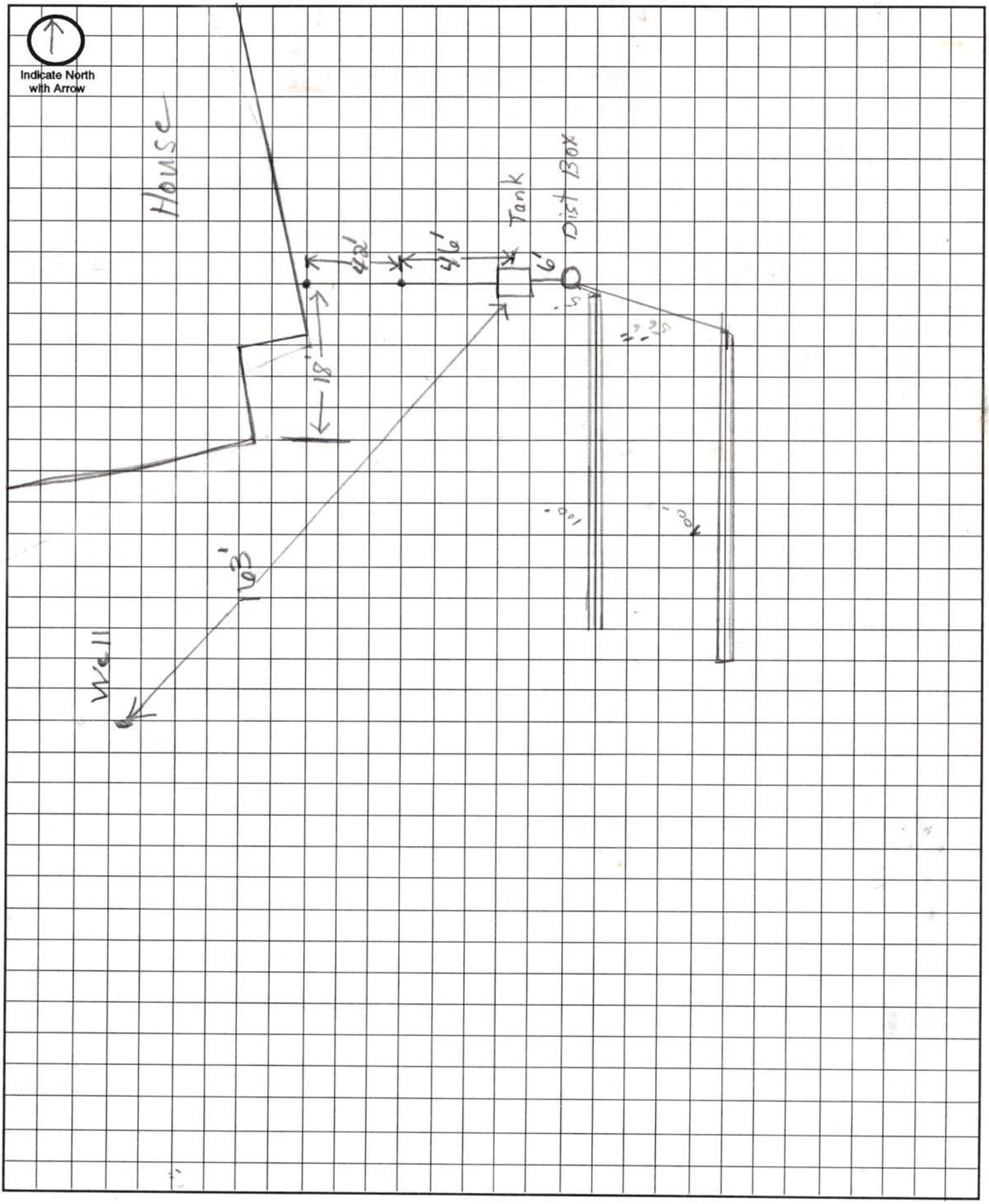
Complete "As Built" drawing on back of this form.

Indicate North with Arrow

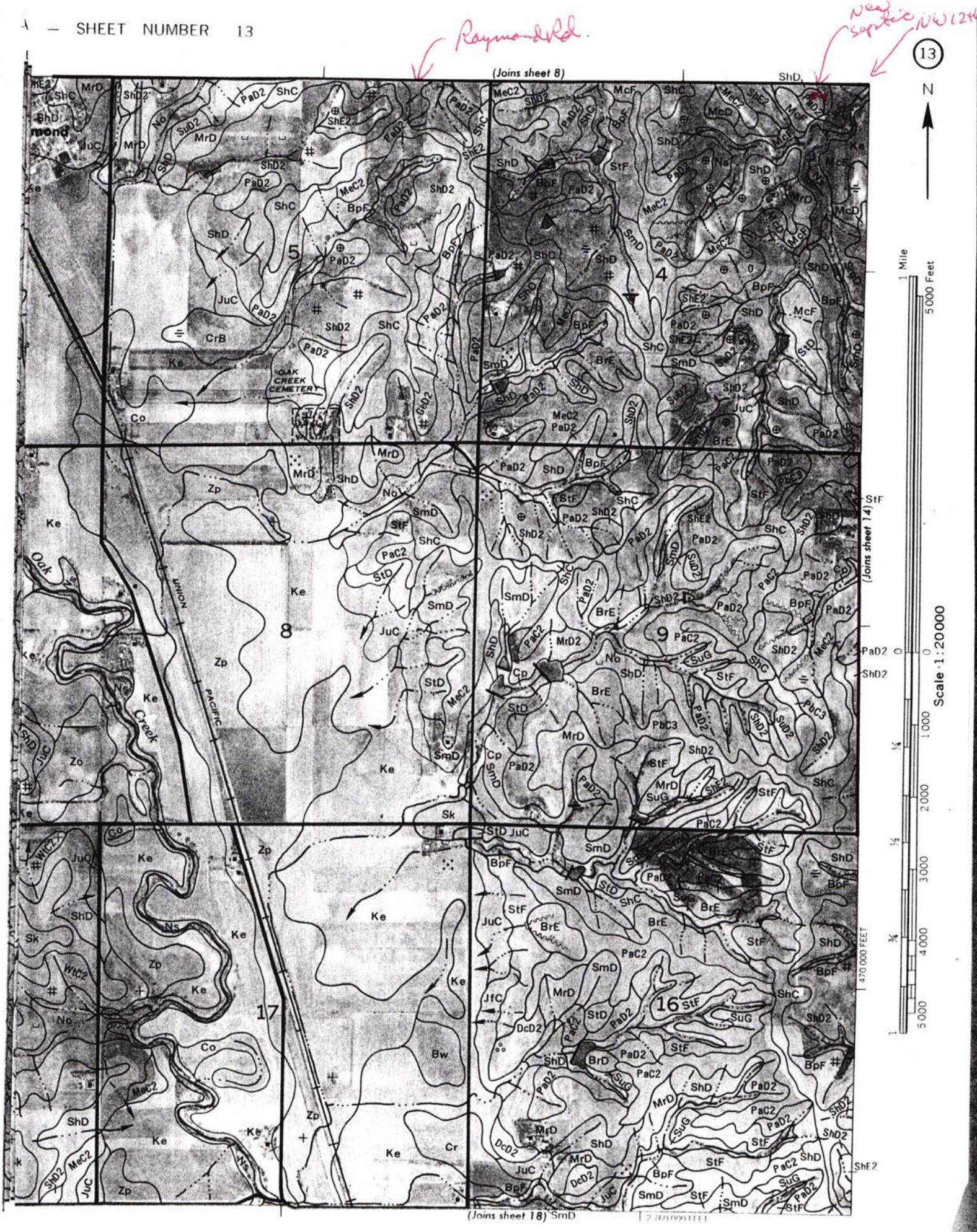
Individual Sewage System Design (Example)



As Built Drawing



Approximate Scale: _____ft. = _____ grid line/s


Raymond Rd.
(Joins sheet 8)
(Joins sheet 14)
(Joins sheet 18)
OAK CREEK CEMETERY
Oak Creek
UNION
PACIFIC
N
1 Mile
5000 Feet
Scale 1:20000
470 000 FEET