Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION
3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Establishment

ALLEN REZAC
T11N R6E SEC 3 QTR SE
E 1/2 OF SE 1/4 LOT 9IT
13801 N 1 ST-RAYMOND

Permitee

ALLEN REZAC
6442 BALDWIN AVE
LINCOLN NE 68507

Permit # 00380215101

Issued 03/02/00
Expires 09/02/00
Revenue Code 3157

FEES: $150.00

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

011905

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

A

Permit Number: 00380215 1

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 13801 N 1ST (no rural route) City RAYMOND NE, Zip 68428

Legal Description EAST SE SE 3 11N 6E 9 I.T.
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 ALLEN REZAC Signature _____

Address 6442 Baldwin City/State/Zip Lincoln NE 68507

☐ Check if owner designed system Home Phone 467-5951 Work Phone 436-1211

C. Contractor

Name STAN KROESE Company Name DIRT WORKS PLUS INC.

Address 7324 BALLARD City/State/Zip LNK NE 68507

☑ Check if contractor designed system Work Phone 560-1208

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

Designer Name Same as Above 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 2/8/00 Date frwd 2/9/00	ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood	
2. Supt. Bldg. Insp. or Village Clerk	Date rec'd 2/9/00 Date frwd _____	ACTION ☒ Approved ☐ Disapproved Signature _____	
3. City or County Engineer	Date rec'd 02/09/00 Date frwd _____	ACTION ☒ Approved ☐ Disapproved Signature _____	

Installation Final Written Approval

By Paul Dittmann

Date 10-23-00

Business Office Use Only
Date Rec'd 2/8/00
Amt Paid 150.00
Rec'd By _____ Cash/Check No. 1047

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: 00380 2151

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 13801 N ST (no rural route) City RAYMOND NE, Zip 68428

Owner ALLEN PEZAC Addresss 6442 BALDWIN

Soil Type (SCS): Sharpsburg Silty Clay Loam & Morrill Clay Loam (sand spots shown in some of it) Percolation Rate: _____ min./inch

Date of Tests 2-7-00 to 2-8-00 Weather: Precipitation 0 Temperature 40°s

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	27	2/7	9:00AM	2/8	8:00AM	2/8	8:00 AM	6	2/8	1:200 PM	30	1/2	60 MIN/IN
2	28	2/7	9:00AM	2/8	8:00AM	2/8	8:00 AM	6	2/8	1:200 PM	30	1/2	60 MIN/IN
3	30	2/7	9:00AM	2/8	8:00AM	2/8	8:00 AM	6	2/8	1:200 PM	30	1/2	60 MIN/IN
4	30	2/7	9:00AM	2/8	8:00AM	2/8	8:00 AM	6	2/8	1:200 PM	30	1/2	60 MIN/IN
5	28	2/7	9:00AM	2/8	8:00AM	2/8	8:00 AM	6	2/8	1:200 PM	30	3/4	40 MIN/IN

Person Conducting Percolation Tests

Name: Steve Kroeger

Phone: 560-1208

Address 7324 Ballard

LNK NE 68507

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 56

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date FEBRUARY 9, 2000

FORM 23-101 10-96

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

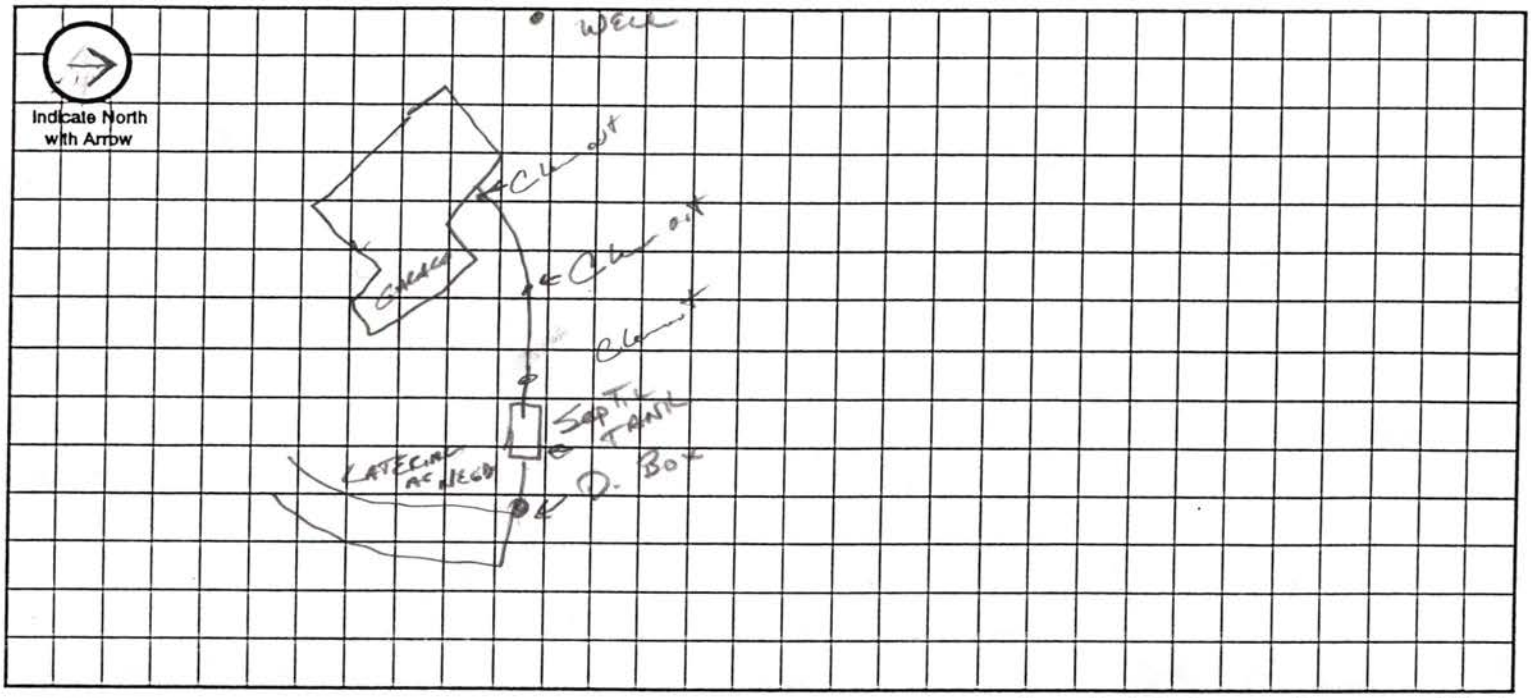
C

Permit Number: 003802151

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) 13801 N 1ST City RAYMOND NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 56 (min. per inch) Soil Type: Marshburg silty clay loam + Morrill clay loam Land Slope: _____ %

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

Total Square Feet of Field Required: 953 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 238 ft. Number of Trenches 3 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 Allen F Ryan Date 2/7/00

Installer Stan Kruse Date 2-7-00

FORM 23-102 10-96

D

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

Permit Number: 00380215101

Sewage Disposal System

As Built Plans & Specifications

Date 5-11-100

System Location (Indicate correct number and street)
Address 1st & mill RD (no rural route) City ~~Lincoln~~ Raymond NE, Zip 68428
3801 NO. 1ST

A. Building Sewer

1. Material: Plastic
   Diameter: 4" in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 10" in.
3. Distance between dwelling and septic tank: 140' ft.
4. Number of clean-outs: 1
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: 2
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 12 in.
   Over outlet, diameter 12 in.
   Riser: ☐ above ☐ below (grade) X in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 13 in.
8. Distances to: Well or suction line 150' ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10' ft.

D. Absorption Field

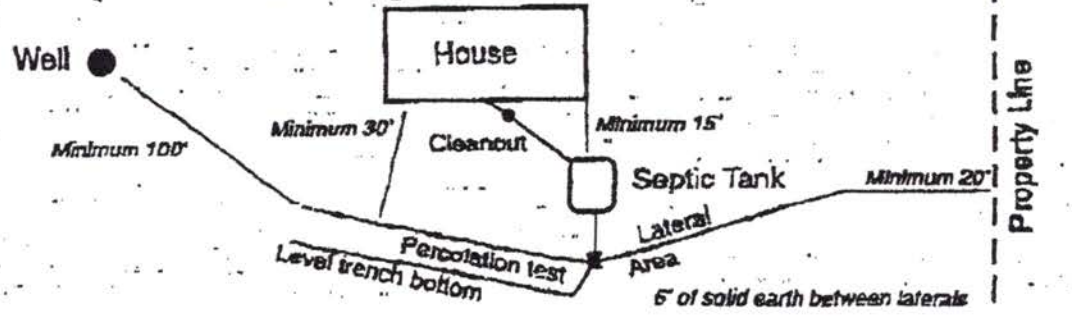
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: To Pfinter's
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 80' ft. 80' ft.
   ____ ft. ____ ft. 80' ft.
3. Trench dimensions: Width 4 ft.
   Slope Flat in/100 ft.
   Average depth 30 in
4. Filter material: gravel
   Depth of material 86" in.
5. Distances to: Well or suction line ____ 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)

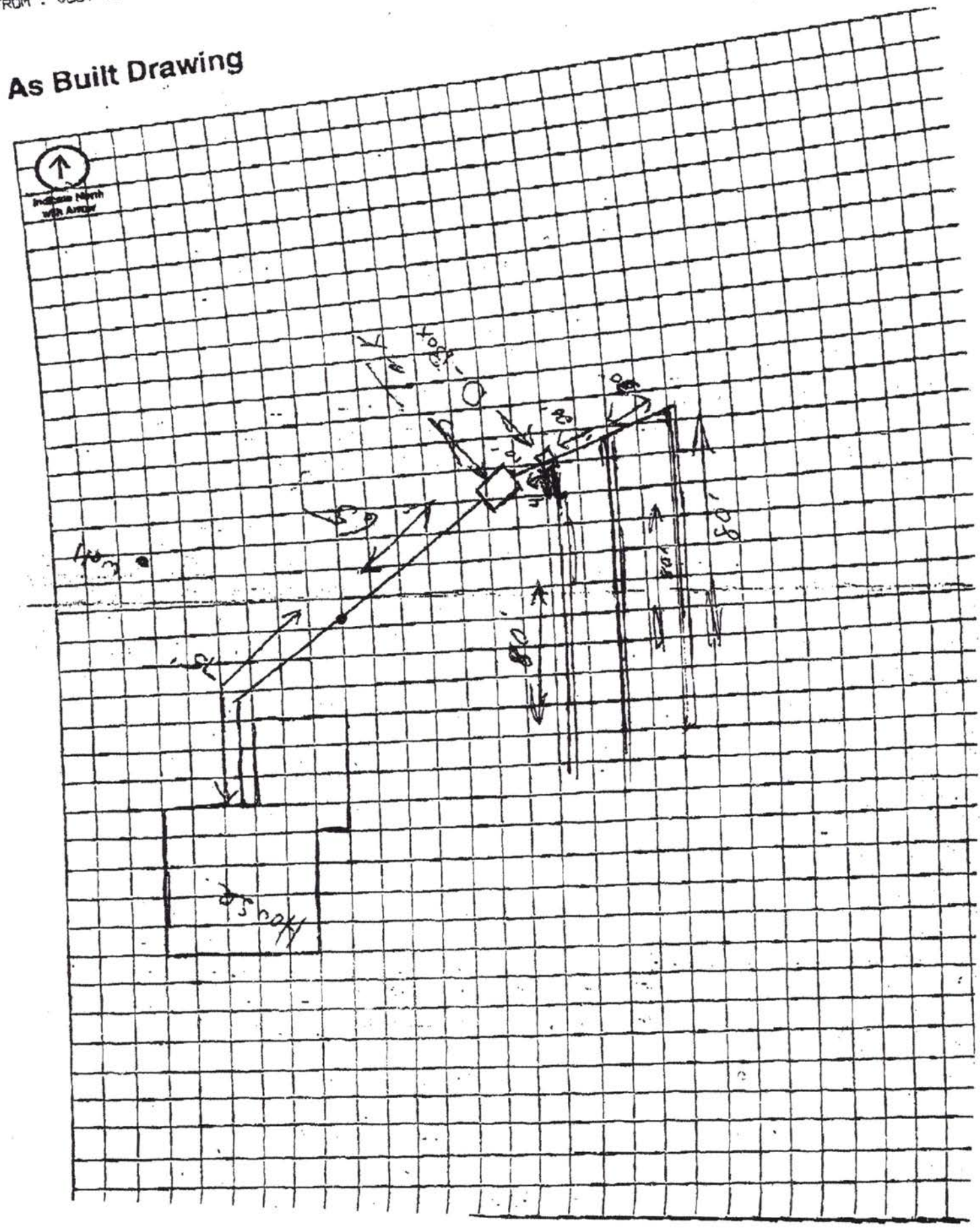


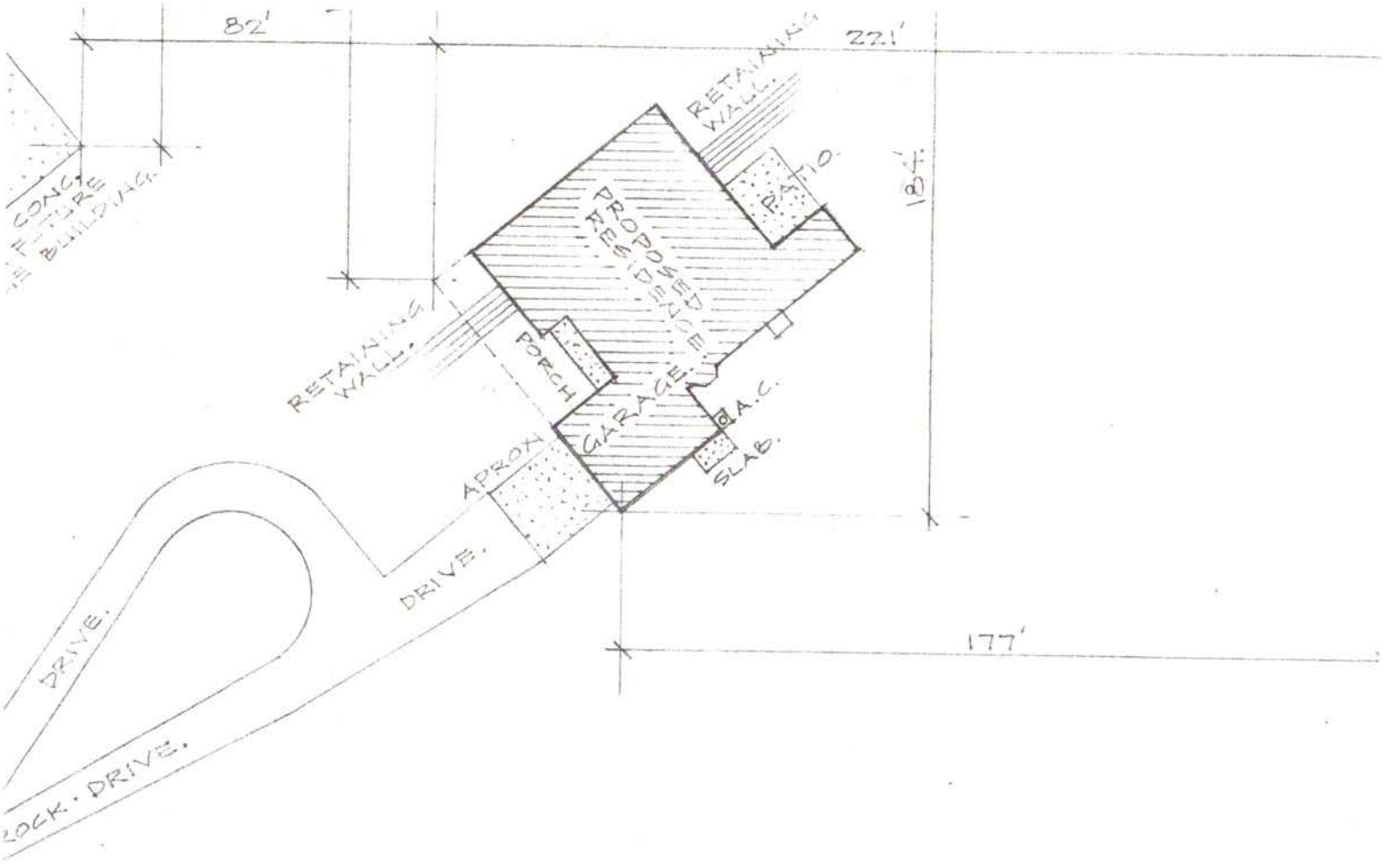
FORM 33-103 10-96

FAX NO. : 402-994-3595

FROM : VOGT T&T EXCAVATING

As Built Drawing





661.03' PROPERTY LINE.

SITE • PLAN.
SCALE: 1" = 40'-0"

ADDRESS: FIRST STREET.

LEGAL DESCRIPTION: EAST ½ OF SOUTHEAST QUARTER OF SOUTHEAST QUARTER OF SEC. 3, TOWNSHIP 11 N, RANGE 6 EAST OF 6TH PRINCIPAL MERIDIAN LANCASTER COUNTY, NEBRASKA. COMPUTED AS 20.6 ACRES W/ 1.47 ACRES CURRENTLY USED AS PUBLIC ROAD RIGHT OF WAY.