Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 99380208401

Issued 09/20/99
Expires 03/20/00
Revenue Code 3157

FEES: $150.00

Establishment

LARRY & PEGGY FLETCHER
T10N R7E SEC 36
CAMELOT ACRES BLK 2 LOT 1
1900 S 105 ST

TOTAL: $150.00

Permitee

LARRY & PEGGY FLETCHER
610 TEAKWOOD DR
LINCOLN NE 68510

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010970

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

A

Permit Number: 9938020840 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 1900 So. 105th (no rural route) City LNK NE, Zip

Legal Description 1/4 1/4 Section 36 Township 10N Range 7E Subdivision Camelot Acres Addition 1ST Block 1 Lot

Geographical Location (if known): Longitude Latitude

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

B. Owner

Name Larry + Peg Fletcher Signature Larry Fletcher

Address 610 Teakwood Dr. City/State/Zip LNK, Nebr

☐ Check if owner designed system Home Phone 488-4451 Work Phone

C. Contractor

Name Mike Rezac Company Name Rezac Const.

Address Mike Rezac City/State/Zip

☐ Check if contractor designed system Work Phone 432-5080

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

Designer Name John Strohmyer Firm Excavating Work Phone 430-6023

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 9/17/99 Date frwd 9/17/99 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Wood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 9-17-99 Date frwd 9-17-99 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 9-17-99 Date frwd 9-17-99 ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

By James E Bare

Date 10-29-99

Business Office Use Only

Date Rec'd 9/17/99

Amt Paid $150.00

Rec'd By CW Cash/Check No. 11090

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

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B

Permit Number: 9938020840l

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 1900 So. 105th (no rural route) City LNK NE, Zip _____

Owner Larry & Peg Fletcher Address 610 Teakwood Dr.

Soil Type (SCS): SHARPSBURG SILTY CLAY LOAM Percolation Rate: _____ min./inch

Date of Tests 4/10/99 to 4/11/99 Weather: Precipitation damp Temperature 58°

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	30"	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	7/8	34
2	29"	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	7/8	
3	27	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	7/8	
4	29	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	1/2	60
5	27	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	7/8	
6	28	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	3/4	
7	29	4/10	10:00	4/11	10:00	4/11	1:00	6	4/11	1:30	30	7/8	

Person Conducting Percolation Tests

Name: John Strohmyer

Phone: 66167 N.W. 48th LNK

Address 430-6023

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 60 MIN

247' x 4' Wide (Infiltrator)

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Hood R.E.H.S. Date SEPTEMBER 17, 1999

FORM 23-101 10-96

Lincoln-Lancaster County Health Department
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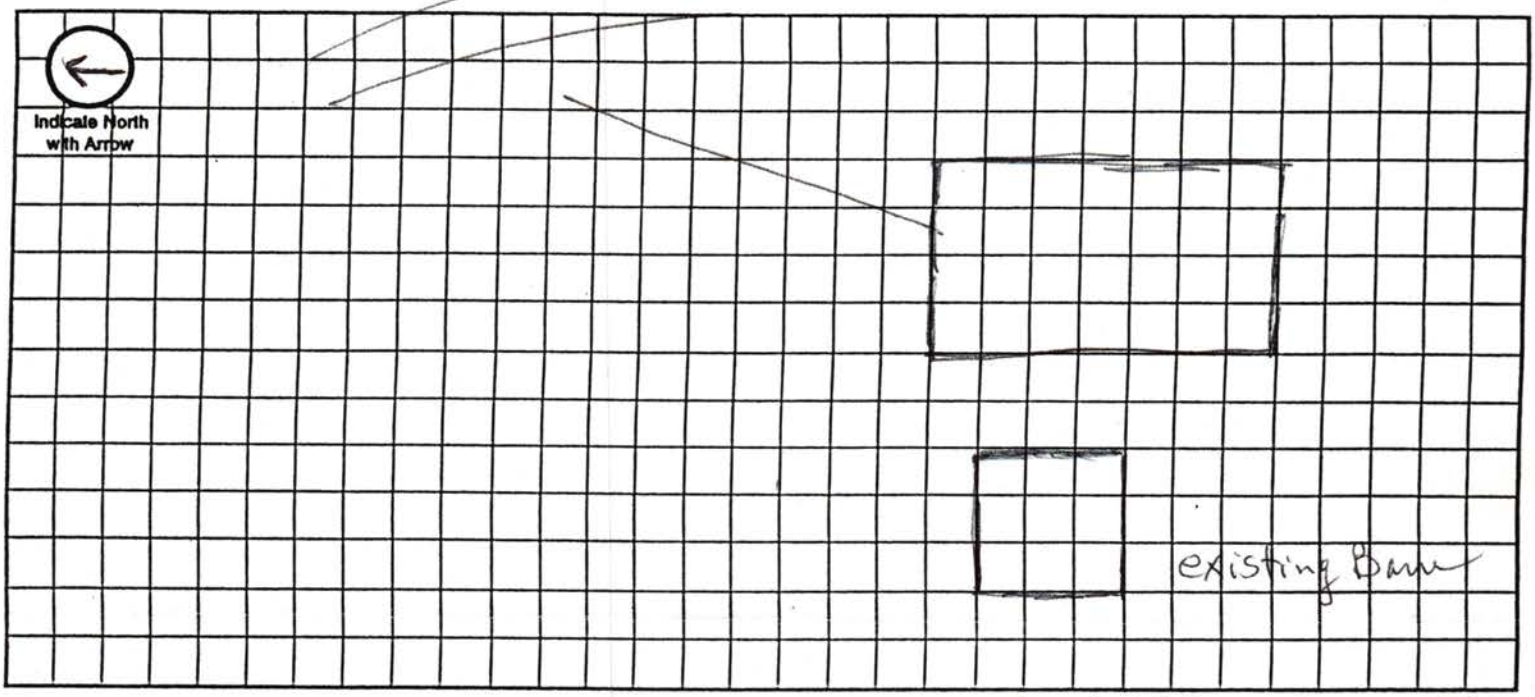
C

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) 1900 So. 105th City Lincoln NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 60 (min. per inch) Soil Type: Silt loam Sharpsburg silty clay loam Land Slope: _____ %

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

Total Square Feet of Field Required: 988 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: 3 Number of Distribution Laterals per Bed _____

Total Length of Laterals 247 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 Mike Rozac Date 9/17/99

Installer John Strutmyer Date "

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D

Permit Number: 9938020840l

Sewage Disposal System

As Built Plans & Specifications

Date Oct 27. 1999 The Fletchers

System Location (Indicate correct number and street)

Address 1900 So. 105th (no rural route) City Lincoln NE, Zip ?

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: 145 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: 18 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: 6
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 37 ft.

D. Absorption Field

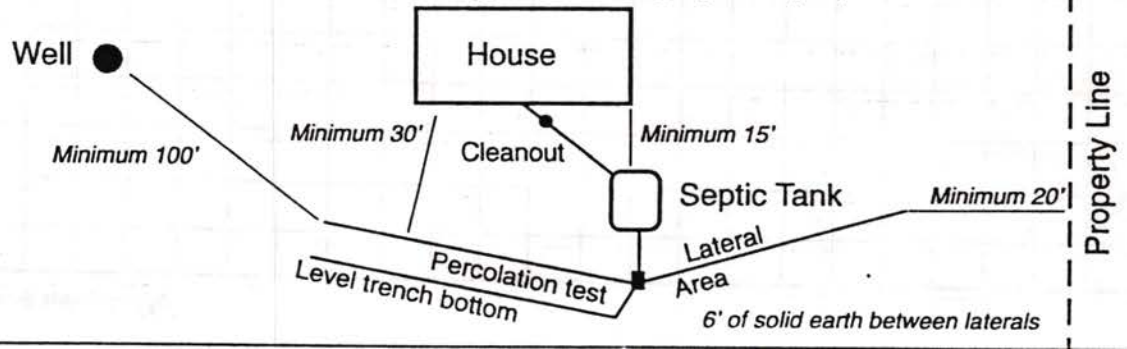
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: Infiltrator
   Material: ☑ fiberglass ☐ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   65 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 3 in/100 ft.
   Average depth 28 in
4. Filter material: Rd Gravel
   Depth of material 20 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

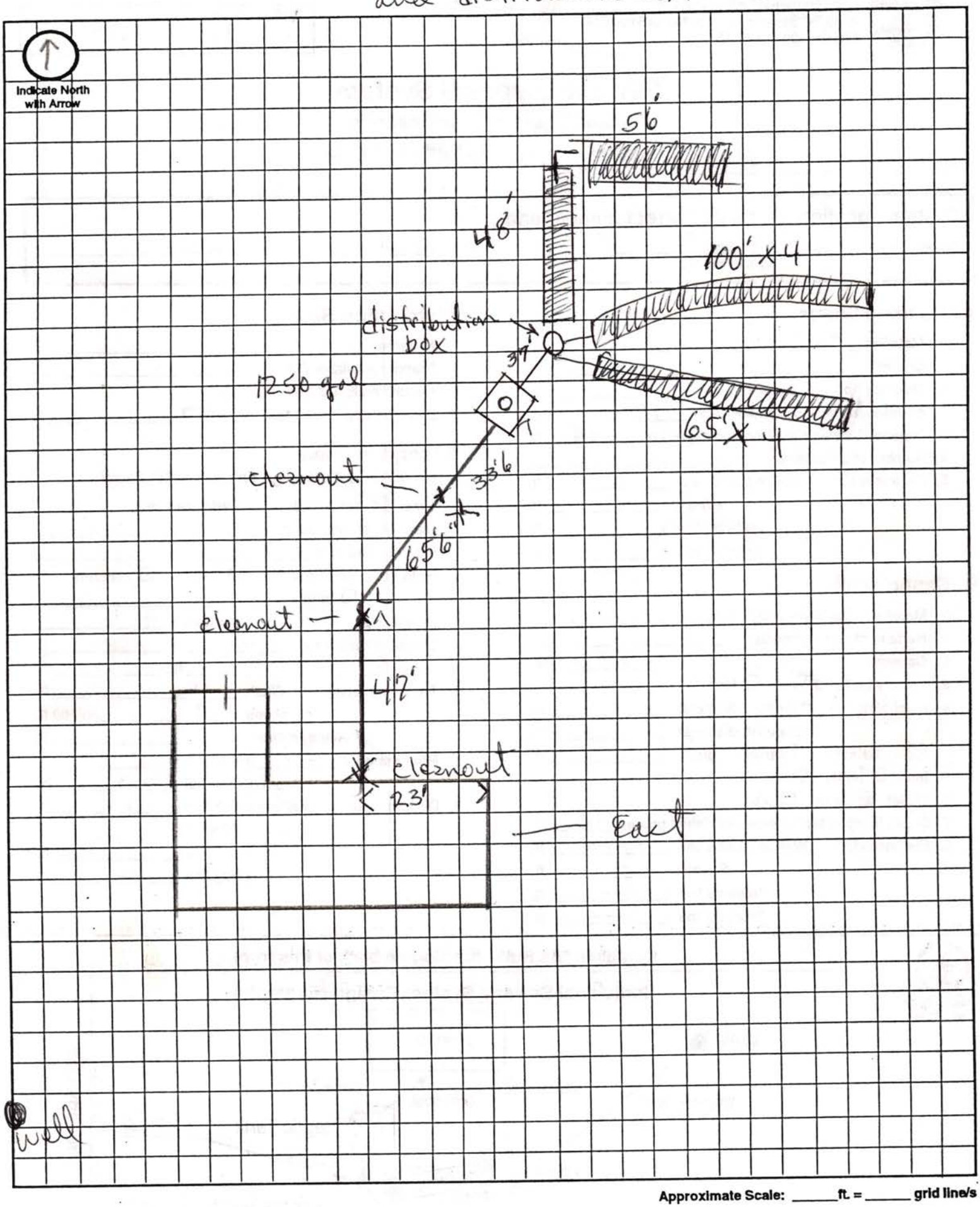
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

Risers to ground level on septic tank and distribution box



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