Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008155

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380308301

Issued 08/31/05
Expires 08/31/06
Revenue Code 3157

Establishment: MATT FRANSON
T10N R8E SEC 1
STEVENS CREEK ESTATE LOT 2
4721 MADDIE STREET

FEES: $200.00

Permittee: MATT FRANSON
3910 N 71 ST
LINCOLN NE 68507

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

A

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

Permit Number: 05380308 3

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 4721 Maddie St. (no rural route) City _____ NE, Zip _____

Legal Description S½ of the SE¼ 1 10N 8E STEVENS CREEK ESTATES 2
(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 Matt Franson Signature Matt Franson

Address 3910 N 71st City/State/Zip Lincoln NE 68507

☐ Check if owner designed system Home Phone 402-325-6007 Work Phone 402-429-4470

C. Contractor

Name Mike Deitze Company Name Waverly Plumbing

Address 14150 Lancashire City/State/Zip Waverly NE 68462

☐ Check if contractor designed system Work Phone _____

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

Designer Name Mike Dietze Firm Waverly Plumbing Work Phone 560-2923

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 8/25/05 Date frwd 8/26/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8/26/05 Date frwd _____ ACTION ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 08/26/2005 Date frwd _____ ACTION ☐ Approved ☐ Disapproved Signature _____

5/10/06 Need drawing - L.C.H.
5/15/06 Sewer, tanks & drop boxes. L.C.H.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date MAY 26, 2006

Business Office Use Only

Date Rec'd 8/24/05 ~~8/25/05~~ CW

Amt Paid 200.00 ~~$100.00~~ $360

Rec'd By CW Cash/Check No. 5275

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

B

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

Permit Number: 0538033083

Lot 2 Stevens Creek Estates
SE¼ Sec 1 T10N R8E

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address _____ (no rural route) City _____ NE, Zip _____

Owner _____ Addresss _____

Soil Type (SCS): Silty Clay Percolation Rate: 60 min./inch

Date of Tests 8/10 to 8/11 Weather: Precipitation Trace Temperature 90

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	39	8/10	5:30	8/11	4:00	8/11	7:30	36⅛	8/11	8:00	30	½	60
2	36	8/10	5:30	8/11	4:00	8/11	7:30	30¾	8/11	8:00	30	5/8	48
3	40	8/10	5:30	8/11	4:00	8/11	7:30	36½	8/11	8:00	30	¾	40
4	37	8/10	5:30	8/11	4:00	8/11	7:30	32½	8/11	8:00	30	5/8	48
5	36	8/10	6:30	8/11	4:00	8/11	7:30	31¼	8/11	8:00	30	½	60
6	39	8/10	5:30	8/11	4:00	8/11	7:30	32⅛	8/11	8:00	30	½	60

Sum of Percolation Rates: 316
Average of Rates: 53
Rate Used for Calculation: 60

Person Conducting Percolation Tests

Name: Claude Oie PE-3939
Phone: 402-423-0614
Address 5910 So 52nd St. Ct.
Lincoln Ne. 68516

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

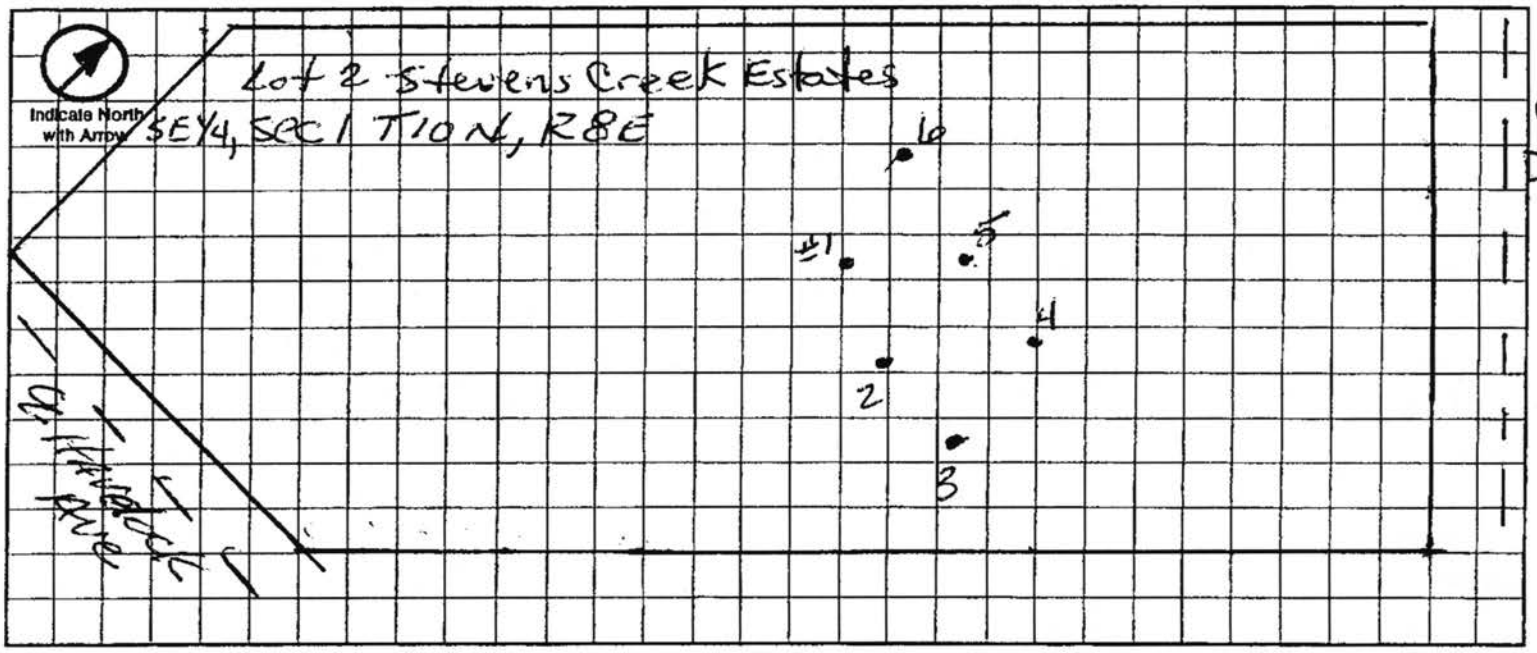
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 05380308 3

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.



A. System Location (Indicate correct number and street)

Address (no rural route) _____ City _____ 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: _____ Land Slope: _____ %

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

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

Type of Lateral: ☒ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: Hi CAP FN filter

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 583 ft. Number of Trenches _____ Trench Width 3 ft w gravel

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 Mark Franzen Date 8-25-05

Installer Michael J Duda Date 8-25-05

FORM 23-102 10-96

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
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D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 5/23/06

System Location (Indicate correct number and street)

Address 4721 Maddie St. (no rural route) City Lincoln NE, Zip 68527

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: — in.
   or distance below basement floor: 10 in.
3. Distance between dwelling and septic tank: 74 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line > 100 ft.
   stream > 100 ft.
   pressure line > 50 ft.
   property line > 100 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☑ below grade 6 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 20 in.
8. Distances to: Well or suction line > 100 ft.
   Stream > 100 ft.
   Pressure line > 100 ft.
   Property line > 40 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 3
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 10, 19, 28 ft.

D. Absorption Field

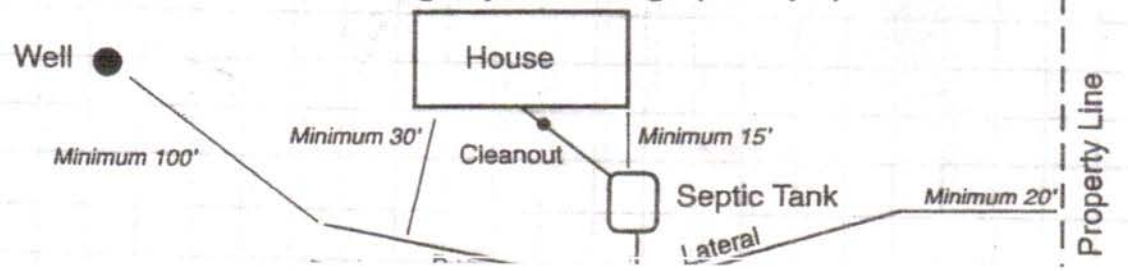
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 36"
   or perforated pipe: —
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 3
   Length of each line: 120 ft. 116 ft.
   116 ft. ft., ft.
3. Trench dimensions: Width 3 ft.
   Slope — in/100 ft.
   Average depth 36 in
4. Filter material: —
   Depth of material — in.
5. Distances to: Well or suction line > 100 ft.
   Stream > 100 ft.
   Pressure line > 100 ft.
   Property line ~ 40 ft.

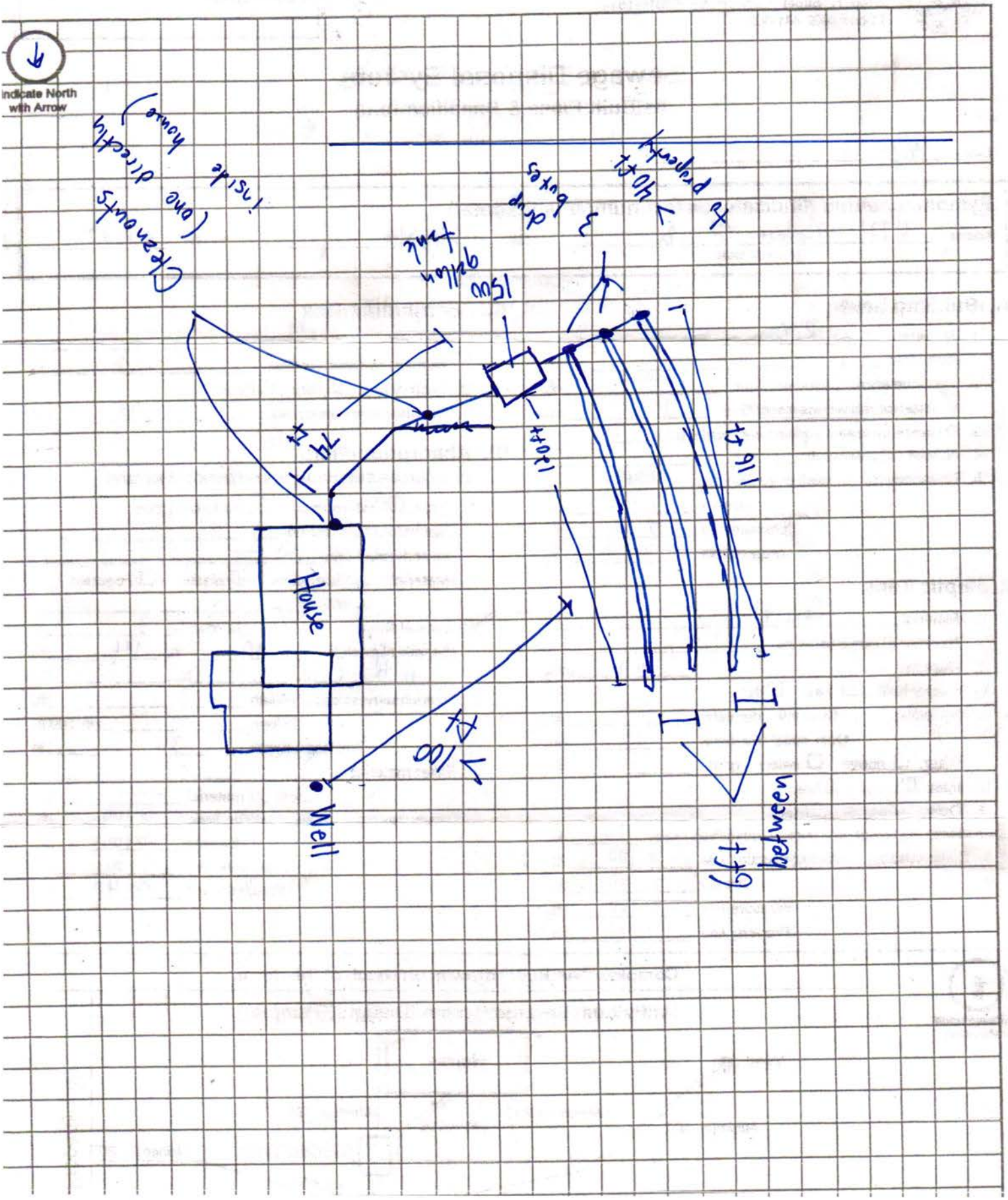
Indicate North with Arrow

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

Individual Sewage System Design (Example)



As Built Drawing



1/4 = 10 ft