Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 99380203501

Issued 07/09/99
Expires 01/09/00
Revenue Code 3157

Establishment

JOHN A SNOOZY
T10N R8E SEC 2 QTR SE
E 1/2,E1/2,SE 1/4 LOT 14IT
4801 N 176 ST

FEES: $150.00

Permitee

JOHN A SNOOZY
5202 GREENWOOD ST
LINCOLN NE 68504

TOTAL: $150.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

010695

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 4801 N. 176th (no rural route) City Lincoln NE, Zip 685

Legal Description E½ E½ SE¼ 2 10N 8E 14 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 John A. Snoozy Signature John A Snoozy

Address 5202 Greenwood City/State/Zip Lincoln NE 68504

☐ Check if owner designed system Home Phone 325-0467 Work Phone 436-1303 Ext 226

C. Contractor

Name John A. Snoozy Company Name ~~N/A~~ Self Contractor

Address 5202 Greenwood City/State/Zip Lincoln NE 68504

☒ Check if contractor designed system Work Phone 325-0467

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

Designer Name Leonard Harper Firm Harper Well & Plumbing Work Phone 782-8715

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 7/7/99 Date frwd 7/8/99	ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood	
2. Supt. Bldg. Insp. or Village Clerk BUILDING PERMITS REQUIRED	Date rec'd 7/8/99 Date frwd 7/8/99	ACTION ☒ Approved ☐ Disapproved Signature	
3. City or County Engineer	Date rec'd 7/8/99 Date frwd 7/8/99	ACTION ☒ Approved ☐ Disapproved Signature	

Apply 24" min Rock Covers

Installation Final Written Approval

By Ron Magnuson

Date 1-13-00

Business Office Use Only

Date Rec'd 07/07/99
Amt Paid 150.00
Rec'd By _____ ~~Cash~~/Check No. 489

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:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 4801 N. 176th (no rural route) City Lincoln NE, Zip

Owner John Snoozy Addresss 5202 Greenwood Lincoln NE 68504

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

Date of Tests 7/4 to 7/6 Weather: Precipitation 4 INCH Temperature 92°

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	3½	7/4	10:03	7/4	4:00	7/5	9:30	3	7/6	9:30	5 MIN	¼ IN	20 MIN/IN
2	3½	7/4	10:05	7/4	4:02	7/5	9:31	3¼	7/6	9:32	5 MIN	¼ IN	20 MIN/IN
3	3½	7/4	10:07	7/4	4:04	7/5	9:33	3	7/6	9:34	5 MIN	¼ IN	20 MIN/IN
4	3½	7/4	10:09	7/4	4:06	7/5	9:34	2½	7/6	9:34	5 MIN	¼ IN	20 MIN/IN
5	3½	7/4	10:11	7/4	4:08	7/5	9:38	2½	7/6	9:36	5 MIN	¼ IN	20 MIN/IN
6	3½	7/4	10:14	7/4	4:10	7/5	9:39	1½	7/6	9:39	5 MIN	¼ IN	20 MIN/IN

Person Conducting Percolation Tests

Name: HARPER WELL & PLUMBING

Phone: 402-988-2055

Address P.O. BOX 15 ADAMS NE 68301

Sum of Percolation Rates:

Average of Rates:

Rate Used for Calculation:

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks INSTALLER SAYS SOIL LOOKS LIKE BLACK DIRT BACK FILL SAID A POND WAS CLOSE BY.

Signature of Reviewing Official Jerrold C. Hood Date JULY 8, 1999

FORM 23-101 10-96

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

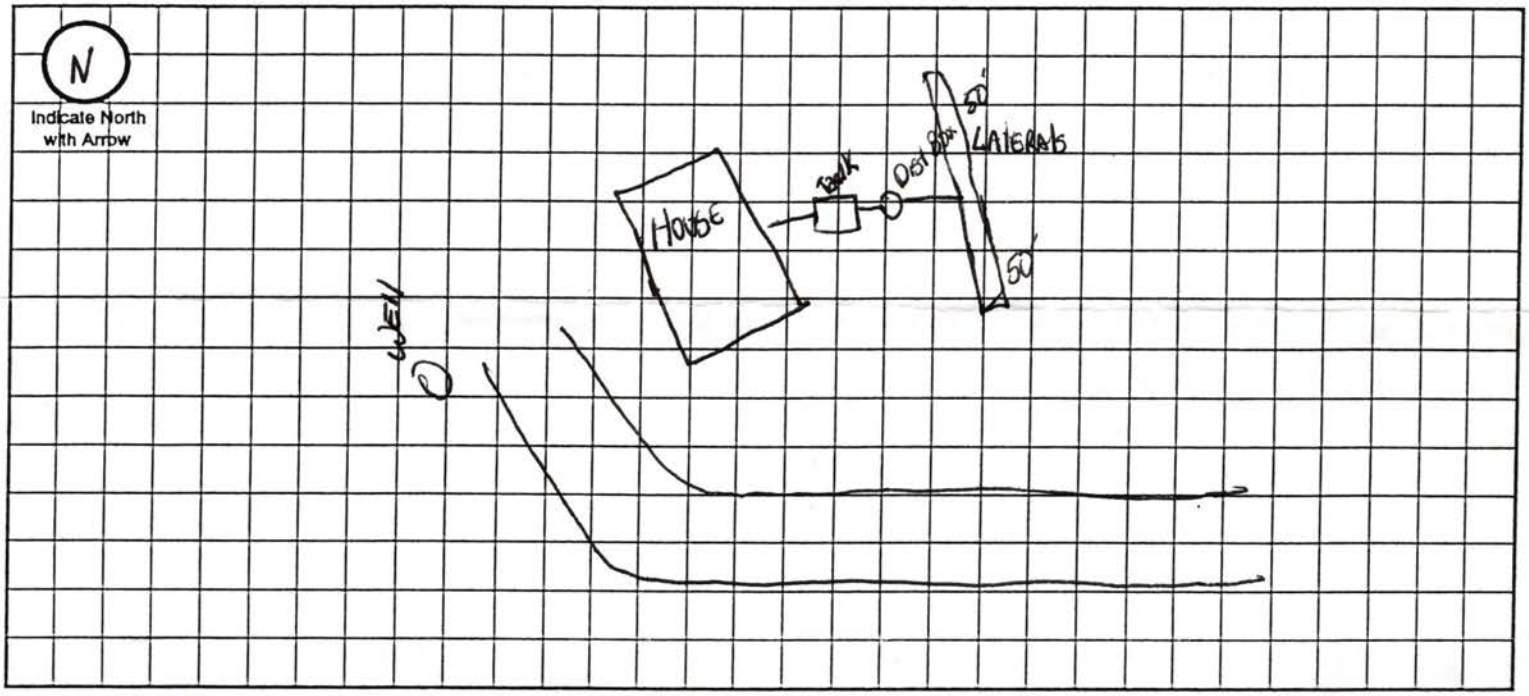
C

Permit Number:

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) 4801 N 176th 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 20 (min. per inch) Soil Type: SHARPSBURG SILTY CLAY LOAM Land Slope: _____ %

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

Total Square Feet of Field Required: 840 sq. ft.

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

Capacity of Septic Tank ~~1000~~ 1250 gals Number of Absorption Beds: ~~2~~ 3 Number of Distribution Laterals per Bed 1

Total Length of Laterals ~~200~~ 280 ft. Number of Trenches ~~2~~ 3 Trench Width ~~3½ FT~~ 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 John Dworzak Date 4 Jun 99

Installer Leonard Harper Date 7/4/99

FORM 23-102 10-96

JAN 12 2000

D

Permit Number:

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

21-10-8

Sewage Disposal System

As Built Plans & Specifications

Date 12/1/99

System Location (Indicate correct number and street)

Address 4801 N 176th Street (no rural route) City Lincoln NE, Zip 68527

A. Building Sewer

1. Material: _____
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 8-12" in.
3. Distance between dwelling and septic tank: 90' 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: Precast
   Number of compartments: 2
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☒ above ☐ below grade 10" in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 38" in.
8. Distances to: Well or suction line 160 ft.
   Stream ~80 ft.
   Pressure line _____ ft.
   Property line ~ ft.

C. Distribution Box

1. Material: Precast
   Number available outlets: 10
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 25' ft.

D. Absorption Field

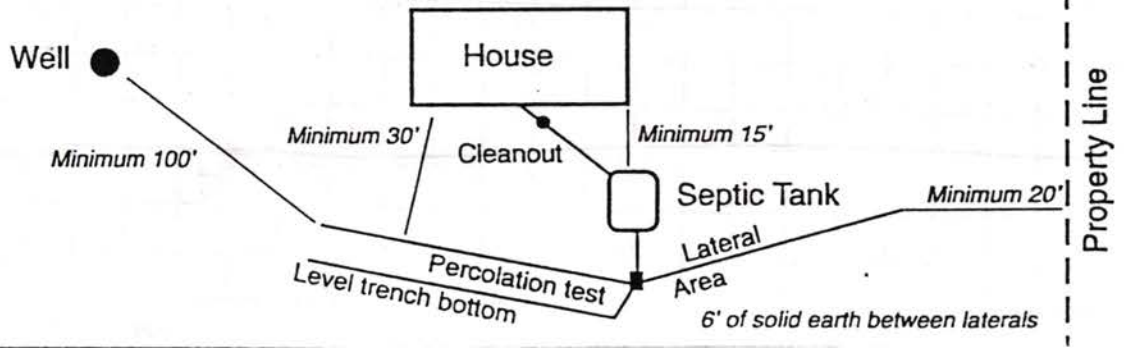
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 80 ft. 80 ft.
   50 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4' ft.
   Slope _____ in/100 ft.
   Average depth 30 in
4. Filter material: Gravel
   Depth of material 20"-15" in.
5. Distances to: Well or suction line 200' ft.
   Stream 50' ft.
   Pressure line NA ft.
   Property line 45 ft.

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

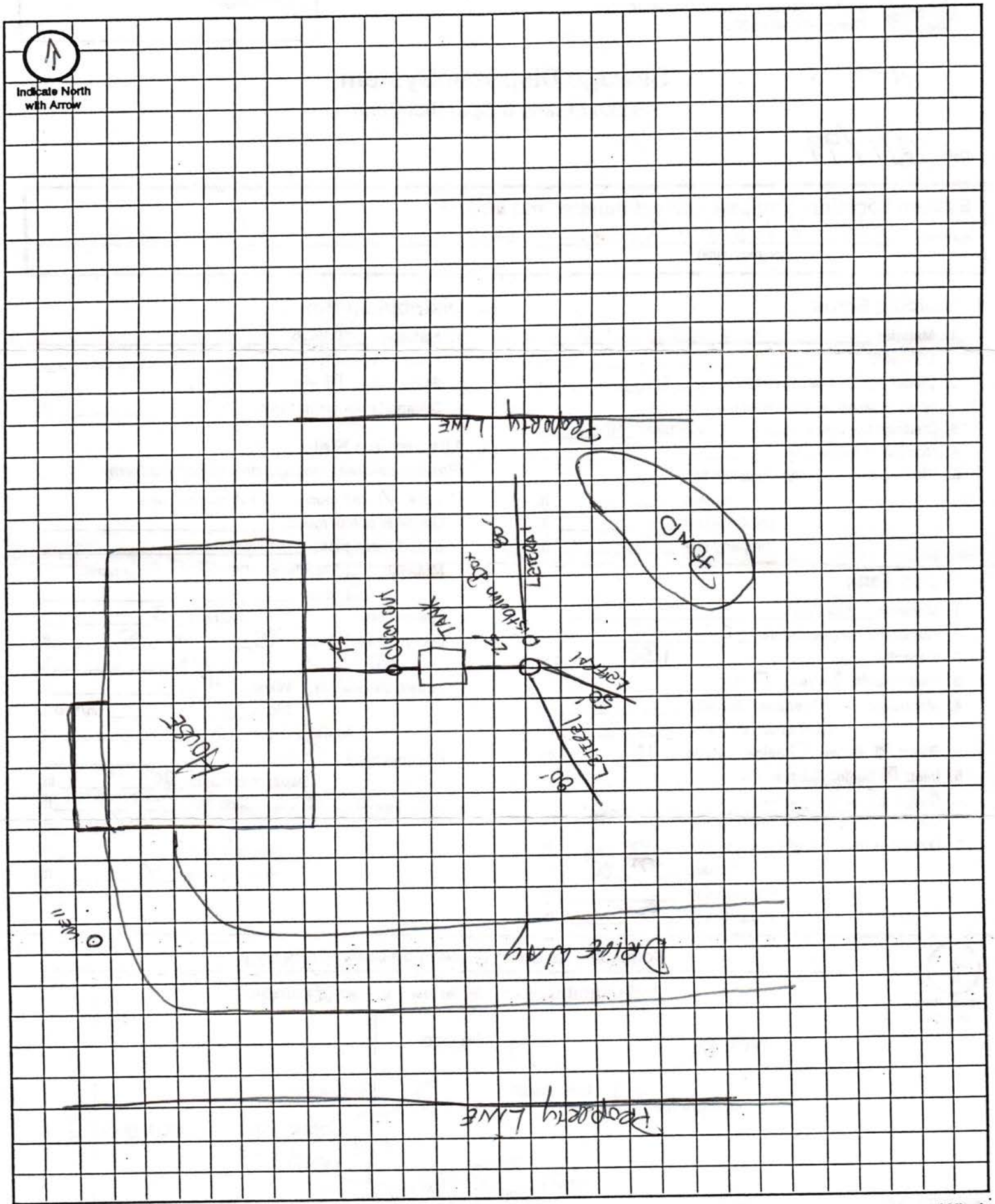
Indicate North with Arrow

Individual Sewage System Design (Example)

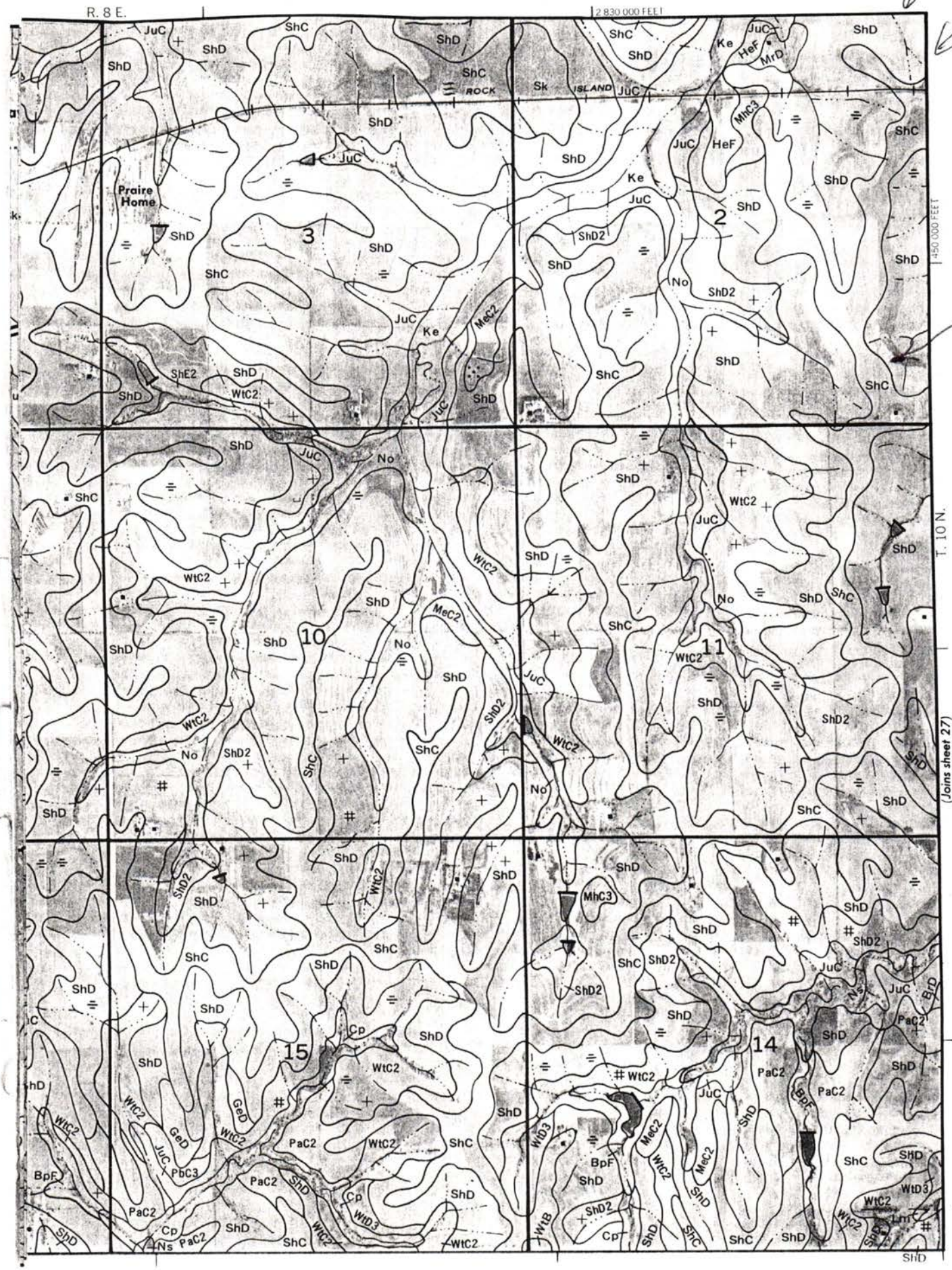


FORM 23-103 10-96

As Built Drawing



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


R. 8 E.
2 830 000 FEET
1 450 000 FEET
T. 10 N.
Prairie Home
ROCK ISLAND
3
2
10
11
15
14
(Joins sheet 27)