Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

002825

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380266801

Issued 07/07/03
Expires 01/07/04
Revenue Code 3157

Establishment: SCOTT LONERGAN
T10N R8E SEC 14 QTR NE
LOT 16IT
2255 N 176 ST

FEES: $200.00

Permittee: SCOTT LONERGAN
4132 N 15 ST
LINCOLN NE 68521

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 03380266801

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 2255 N 176th St. (no rural route) City Lincoln NE, Zip NE 68527

Legal Description SE NE 14 10N 8E 16 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 Scott Lonergan Signature Scott

Address 4132 N 15th City/State/Zip Lincoln NE 68521

☐ Check if owner designed system Home Phone 402 477-0055 Work Phone 402-610-1829

C. Contractor

Name G+A Backhoe Company Name _____

Address 2319 South 214th City/State/Zip Eagle NE 68347-1995

☐ Check if contractor designed system Work Phone 450-2409

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 _____ Is there a Whirlpool Bathtub YES NO

☒ Commercial Establishment/Other Facility Specify Out building

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 7/7/03 Date frwd 7/7/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 7/7/03 Date frwd 7/7/03 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 7/7/03 Date frwd 7/7/03 ACTION ☒ Approved ☐ Disapproved Signature _____

~~7/7/03 Tanks + sewer only. J.C.H.~~

Installation Final Written Approval

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

Date JULY 28, 2003

Business Office Use Only

Date Rec'd 07/07/03

Amt Paid 200.00

Rec'd By _____ Cash/Check No. 6572

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: 033802668

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2255 N 176 (no rural route) City Lincoln NE, Zip 68527

Owner Scott Lonergan Addresss 4132 N 15 F

Soil Type (SCS): _____ 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)

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

Person Conducting Percolation Tests

Name: _____

Phone: _____

Address _____

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

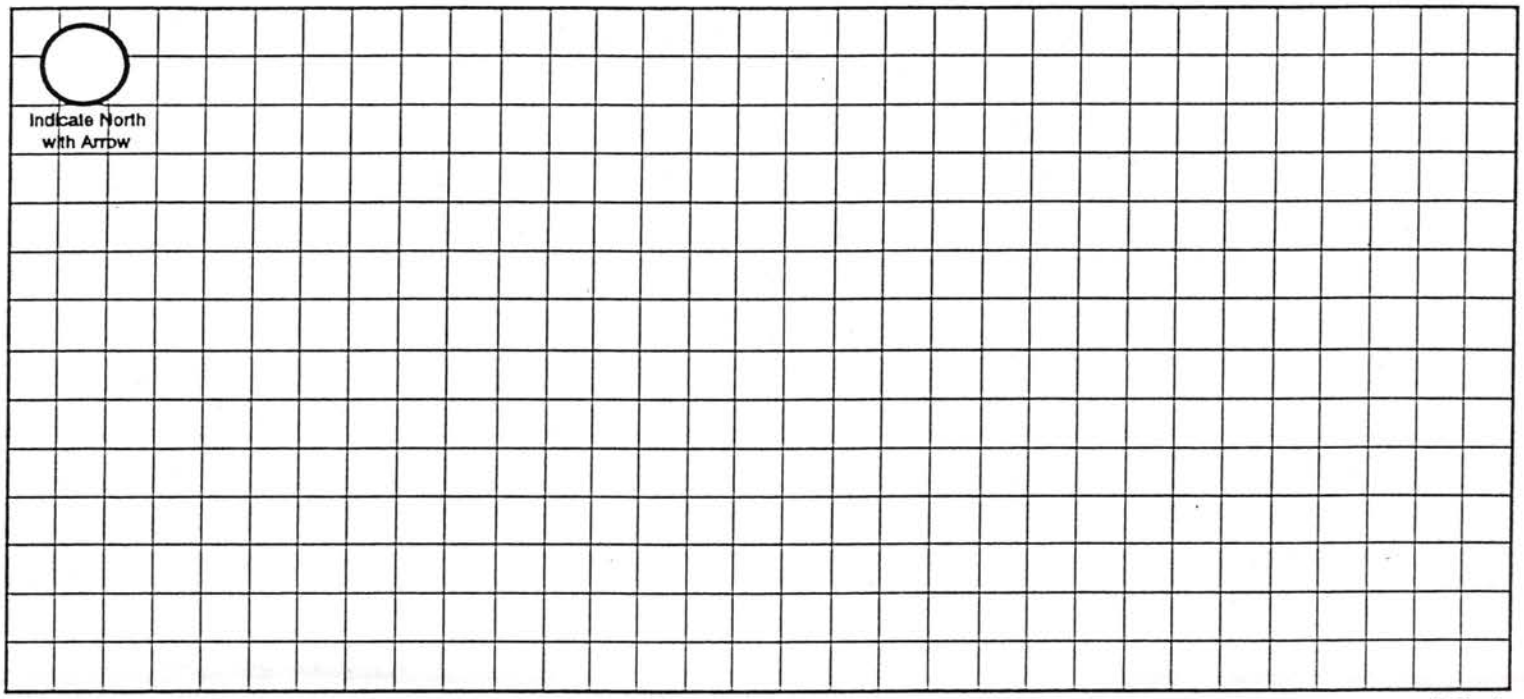
C

Permit Number: 033802668

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) 2255 N 176th City Lincoln NE, Zip 68527

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: SHARPSBURG SILTY CLAY LOAM Land Slope: 10 %

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

Total Square Feet of Field Required: 400 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: InfoTrator H10

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

Total Length of Laterals 100 ft. Number of Trenches 1 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 _____ Date _____

Installer Gordon Lukes Date 7-7-2003

FORM 23-102 10-96

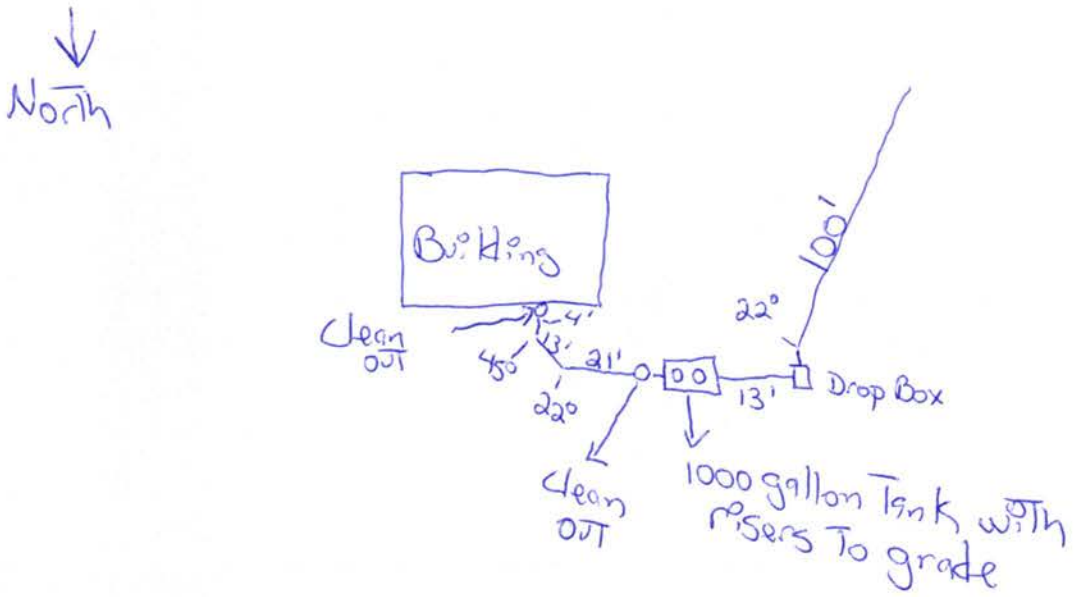
G & A

BACKHOE SERVICE

Gordon Lukes - Owner/Operator
2319 South 214th Street
Eagle, NE 68347-1995
Bus. (402) 781-2400
Cell. (402) 450-2409
Fax. (402) 781-2411

07/17/03

To Jerry Hood,
This is the as built drawing for Scott Lonergan @ North 176th Street for his out building.



1000 gallon Concrete Tank
Infiltrator H10 Lateral