Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

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

Permit
SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 02380252601

Issued 08/29/02
Expires 03/01/03
Revenue Code 3157

Establishment
RUTH ANN THOMPSON
T10N R8E SEC 16 QTR NW
2220 N 134 ST

FEES: $200.00

TOTAL: $200.00

Permittee
RUTH ANN THOMPSON
3321 R ST
LINCOLN NE 68503

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002878

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

A

Permit Number: 02380252601

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 2220 North 134th (no rural route) City Lincoln NE, Zip 68527

Legal Description NW (1/4) 1/4 16 (Section) 10N (Township) 8E (Range) Subdivision Addition Block 15 Lot

Geographical Location (if known): Longitude _____ Latitude _____

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

B. Owner

Name Ruth Ann Thompson Signature Ruth Ann Thompson

Address 3321 R Street City/State/Zip Lincoln NE 68503

☒ Check if owner designed system Home Phone 475-3096 Work Phone —

C. Contractor

Name ~~William Overman~~ Owner Company Name ~~B&R Pump~~

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name Ø Firm B&R Pump Work Phone 464-1745

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 8/29/02 Date frwd 8/29/02 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8-29-02 Date frwd 8-29-02 ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 08/30/02 Date frwd _____ ACTION ☐ Approved ☐ Disapproved Signature _____

10-18-02 jm

Installation Final Written Approval

By Ron Moyer

Date 10-29-02

Business Office Use Only

Date Rec'd 08/29/02

Amt Paid 200.00

Rec'd By JS Cash/Check No. 328

FORM 23-100 9-00 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Lincoln-Lancaster County Health Department
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B

Permit Number: 023802526

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 2220 No. 134th Street (no rural route) City Lincoln NE, Zip 68527

Owner Edwin Scott Otley Addresss 3321 R Street

Soil Type (SCS): SHARPSBURG SILTY CLAY LOAM. Percolation Rate: 38 min./inch

Date of Tests 6-25-2001 to 6-26-2001 Weather: Precipitation none Temperature 80°

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	35"	6-25	8:00	6-26	8:00	6-26	11:30	24.5	12:00	25.125	30	.875	34.29
2	36"	6-25	8:00	6-26	8:00	6-26	11:30	24.25	12:00	25.25	30	1	30
3	36	6-25	8:00	6-26	8:00	6-26	11:31	18"	12:01	18.75	30	.75	40
4	36	6-25	8:00	6-26	8:00	6-26	11:31	18"	12:01	18.75	30	.75	40
5	36	6-25	8:00	6-26	8:00	6-26	11:32	19.125	12:02	19.875	30	.75	40
6	36	6-25	8:00	6-26	8:00	6-26	11:32	19.125	12:02	19.75	30	.625	48

Person Conducting Percolation Tests

Name: Ruth-Ann Thompson
Phone: 475-3096
Address 3321 R Street
Lincoln NE 68503

Sum of Percolation Rates: 232.
Average of Rates: 38.72
Rate Used for Calculation: 39

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date AUGUST 29, 2002

FORM 23-101 10-96

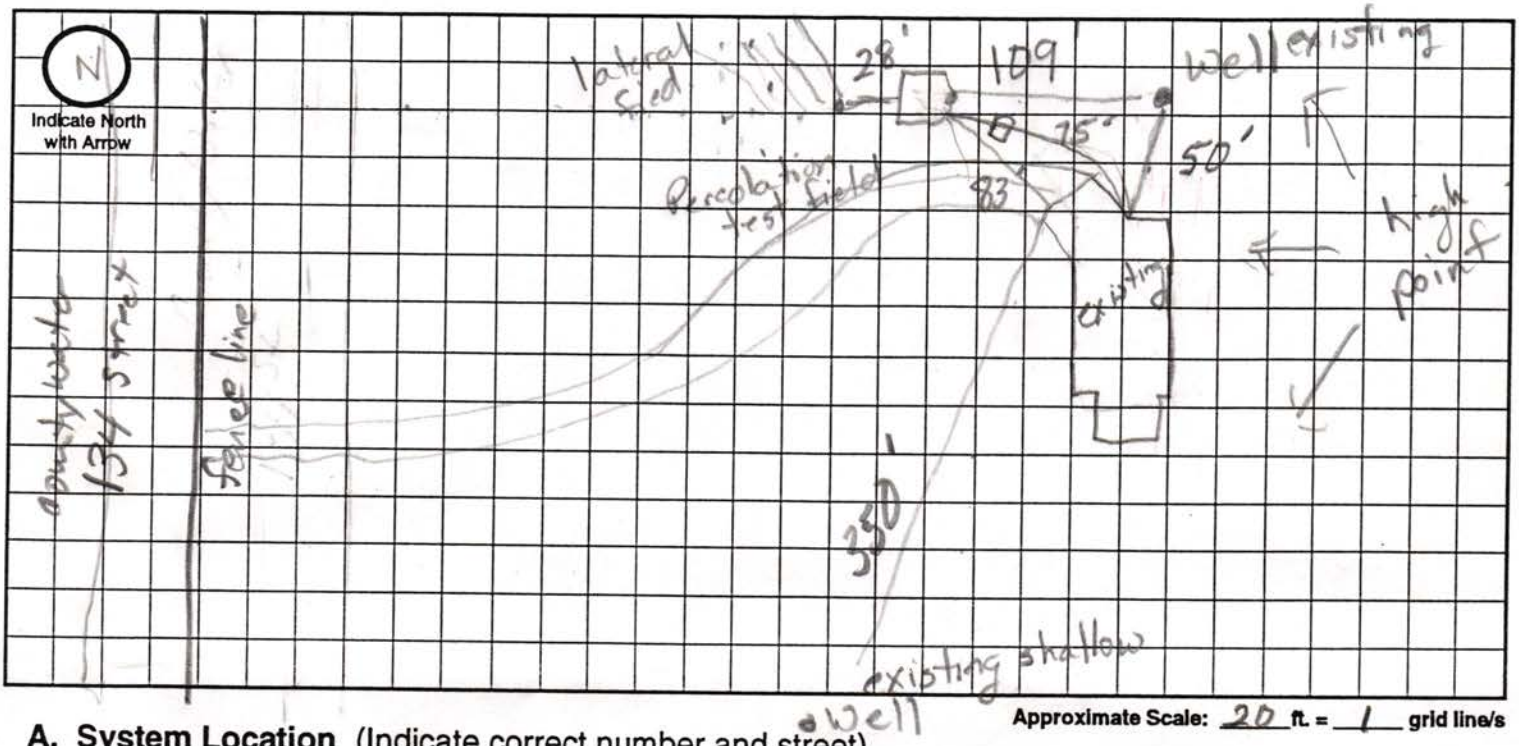
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 023802526

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 2220 N. 134th 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 38 (min. per inch) Soil Type: Sharpsburg SILTY CLAY LOAM Land Slope: gentle at absorption field. %

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

Total Square Feet of Field Required: 825 sq. ft. (275 × 3)

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

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

Total Length of Laterals 285 (275) ft. Number of Trenches 3 Trench Width 3'

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 Ruth Ann Thompson Date 8-29-2002

Installer B&R Pump Service Bill Overman Date 8-21-02

FORM 23-102 10-96

Lincoln-Lancaster County Health Department
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D

Permit Number: 0238025 26

Sewage Disposal System

As Built Plans & Specifications

Date _____

System Location (Indicate correct number and street)

Address 2220 No 134th (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: 6 in.
3. Distance between dwelling and septic tank: 60 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 45 ft.
   stream _____ ft.
   pressure line 10 ft.
   property line 300+ ft.

B. Septic Tank

1. Material: CONCRETE
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 6 in.
   Over outlet, diameter 6 in.
   Riser: ☒ above ☐ below grade 14 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 8 in.
8. Distances to: Well or suction line 115 ft.
   Stream _____ ft.
   Pressure line 100 ft.
   Property line 200+ ft.

C. Distribution Box

1. Material: CONCRETE
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 60 ft.

D. Absorption Field

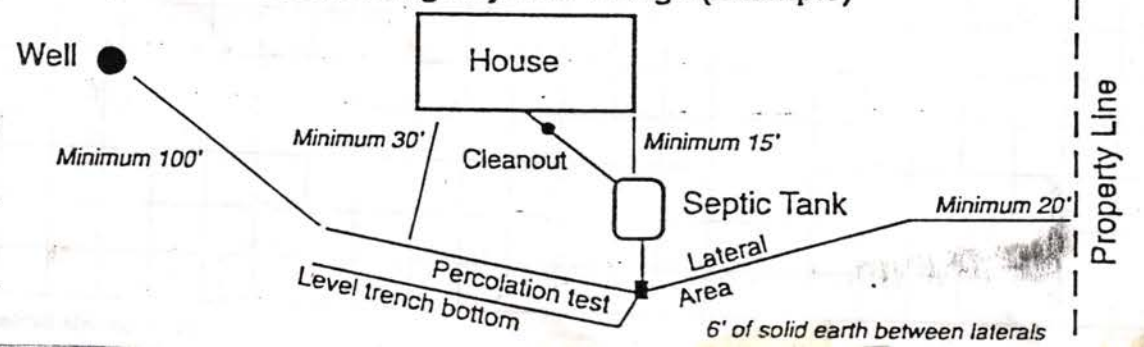
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 30"
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 2
   Length of each line: 100 ft. 100 ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4½ ft.
   Slope 0 in/100 ft.
   Average depth 20 in
4. Filter material: DIRT
   Depth of material 30 in.
5. Distances to: Well or suction line 150+ ft.
   Stream _____ ft.
   Pressure line 150+ ft.
   Property line 200 ft.

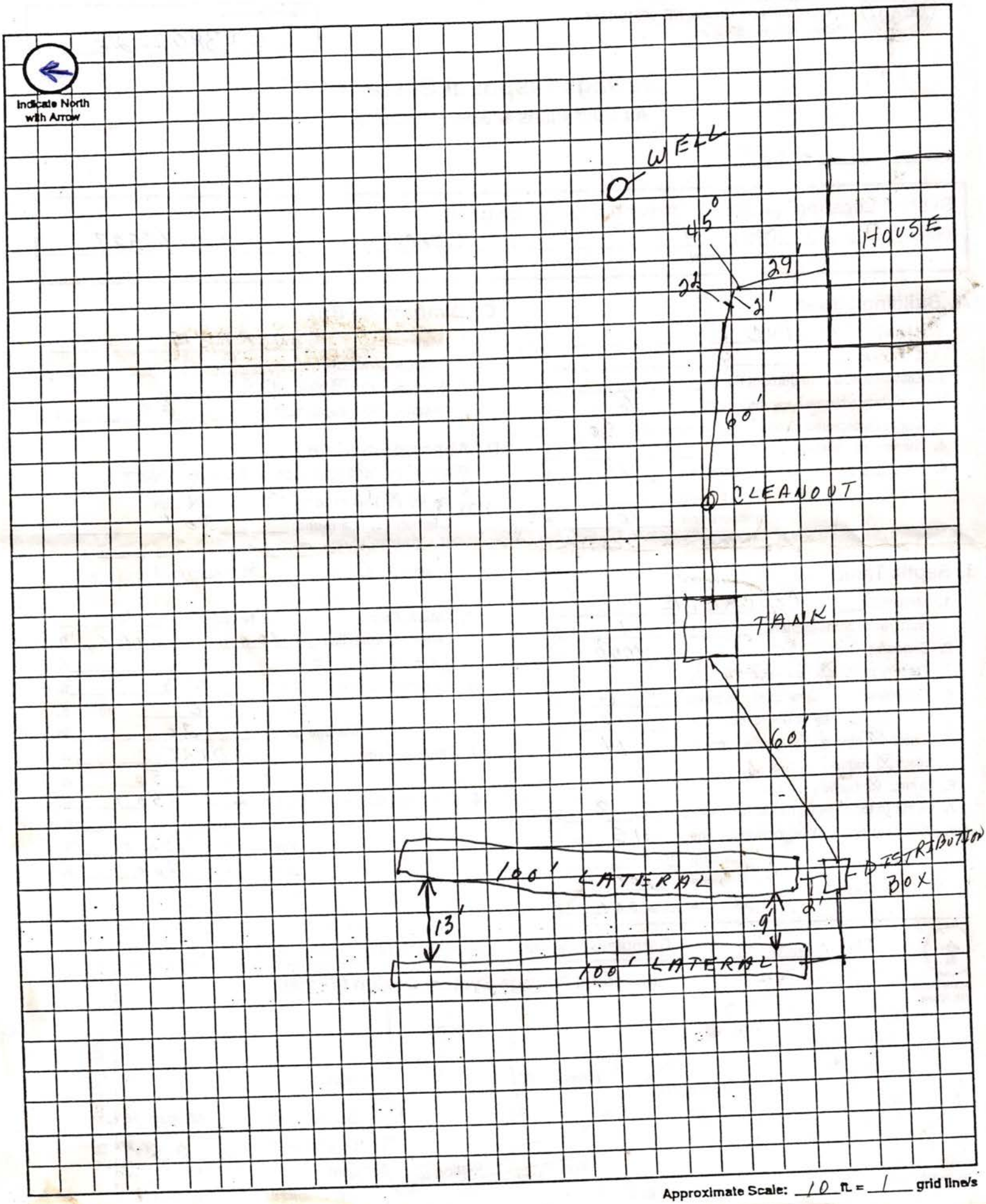
Complete "As Built" drawing on back of this form.

Indicate North with Arrow

Individual Sewage System Design (Example)



As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s