LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET
Lincoln, NE 68510-1514
(402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 96380146001

Issued 07/29/96
Expires 01/29/97
Revenue Code 18754

Establishment
SHERM DUNKIN
T10N R8E SEC 22
LOT 24

FEES: $150.00

TOTAL $150.00

Permittee
SHERM DUNKIN
7710 KARL DR
LINCOLN NE 68516

Issued By M. Jane Ford
Health Director

2409

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

A

FILING FEE: $_____

FILE NO._____

DATE: 7/15/96

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 10N ; Range 8E ; Section 22 ; E-½ of west ¼ of
   Block _____ : Lot 24 : Addition _____
   Street Address 15001 Plum Ridge Rd

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☐

4. Distance to public sewer: _____ ft.

Sherm Duntin
Signature of Applicant (Owner or Lessee)

7210 Karl Dr. LNK
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 7/29/96. Date Frwd. 7/29/96. ACTION: Approved ☒ Disapproved ☐ Signature: Jerold C. Hoe
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 7-29-96. Date Frwd. 7-29-96. ACTION: Approved ☒ Disapproved ☐ Signature:
3. City or County Engineer : Date Rec'd. 7/29/96. Date Frwd. 7/29/96. ACTION: Approved ☒ Disapproved ☐ Signature: Doug Pollard

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12-10-96 by: pm need sewer line
Date: 9/30/02 by: L.C.H. Sewer line in
Date: ~~12-18-02~~ by: ~~Ron~~

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-18-02 By: Ron Mayhew

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM 23-43

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 10 ; Range 8 ; Section & ¼ Section E½ of west ¼ of 22.
Property Dimensions: _____ ft. x _____ ft. Area: 3 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☑ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 7/16/96 to 7/17/96. Weather: Precip. _____ Temp. _____.

OWNER: Sherm Dunkin

Address: 7710 Karl Dr. LNK

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	20"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	3/4	40MIN/IN
2	20"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	1½	20MIN/IN
3	24"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	½	60MIN/IN
4	20"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	3/4	40MIN/IN
5	28"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	½	60MIN/IN
6	24"	7/16	9:00	7/17	9:00	7/17	1:00	6	1:30		30	1"	30MIN/IN

John L Trubmeyer
Signature of Person Conducting Test

Address 9811 NW 40th LNK Phone 430-6023

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Sharpsburg Silty Clay Loam
Date: July 29, 1996

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Gerald C. Hood
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

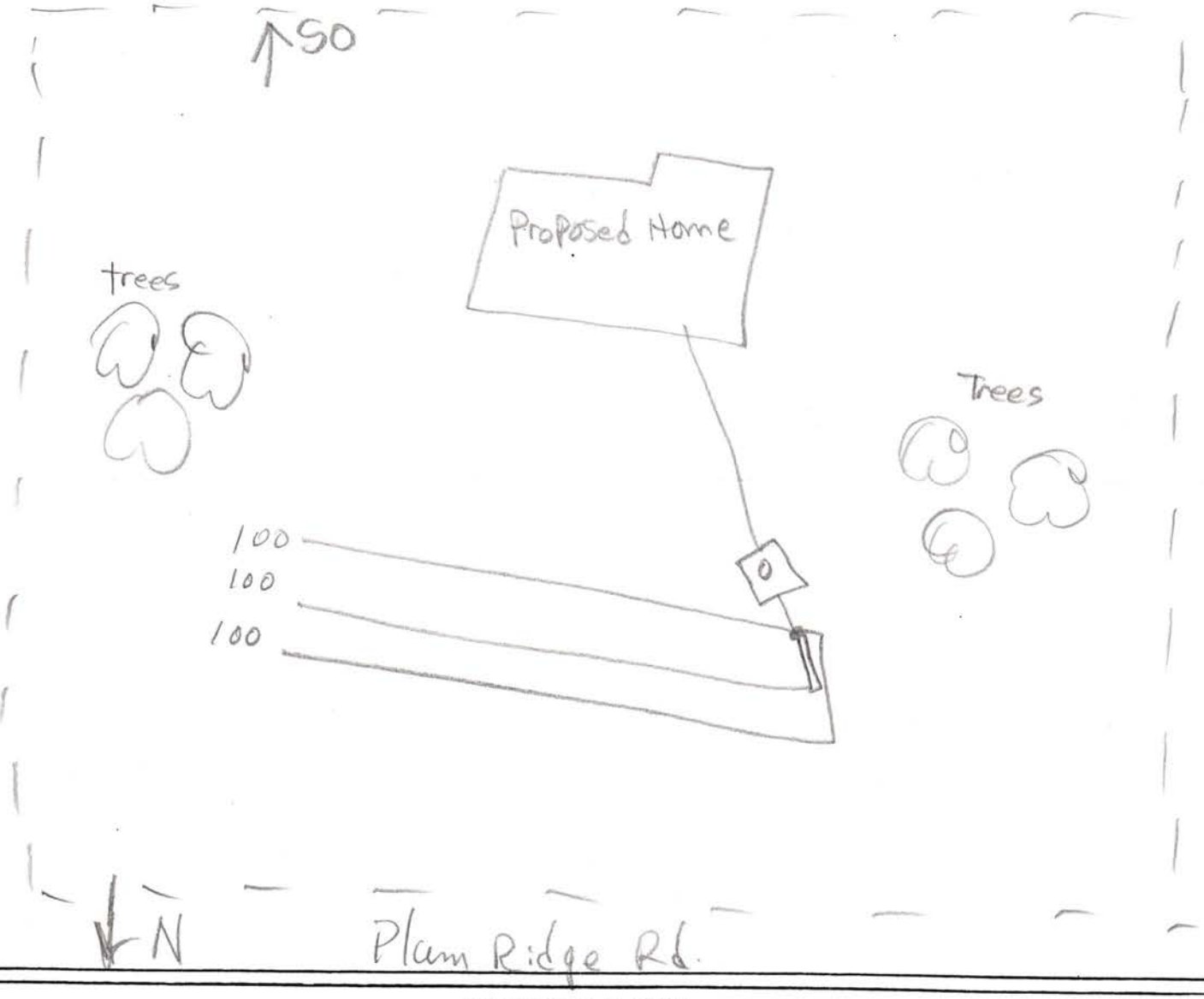
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
3140 N Street
Lincoln NE 68510
(402)-441-8022

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 990 sq.ft.

_____
Signature of Reviewing Official

Wellmann Plumbing
Clint 430-6817

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 12-10-96

System Location (Indicate correct number and street)

Address ? (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: N-A (will be done when House is done)
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 3
2. Capacity: 1000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter — in.
   Over outlet, diameter — in.
   Riser: ☑ above ☐ below grade 0 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line NA ft.
   Stream — ft.
   Pressure line — ft.
   Property line 70 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 20 ft.

D. Absorption Field

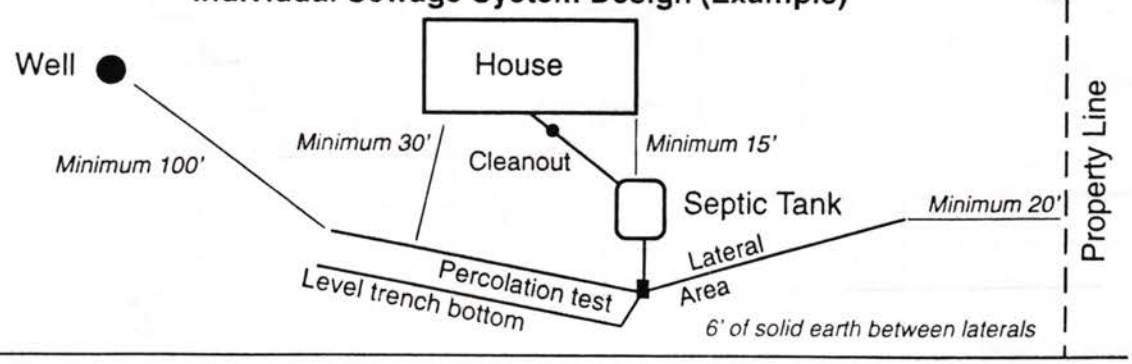
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☑ Perforated pipe
   Diameter of half round: —
   or perforated pipe: 4"
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 100 ft. 100 ft.
   100 ft. 30 ft., _____ ft.
3. Trench dimensions: Width 3 ft.
   Slope 2 in/100 ft.
   Average depth 24 in
4. Filter material: Gravel
   Depth of material 16 in.
5. Distances to: Well or suction line NA ft.
   Stream — ft.
   Pressure line — ft.
   Property line 25 ft.

Indicate North with Arrow

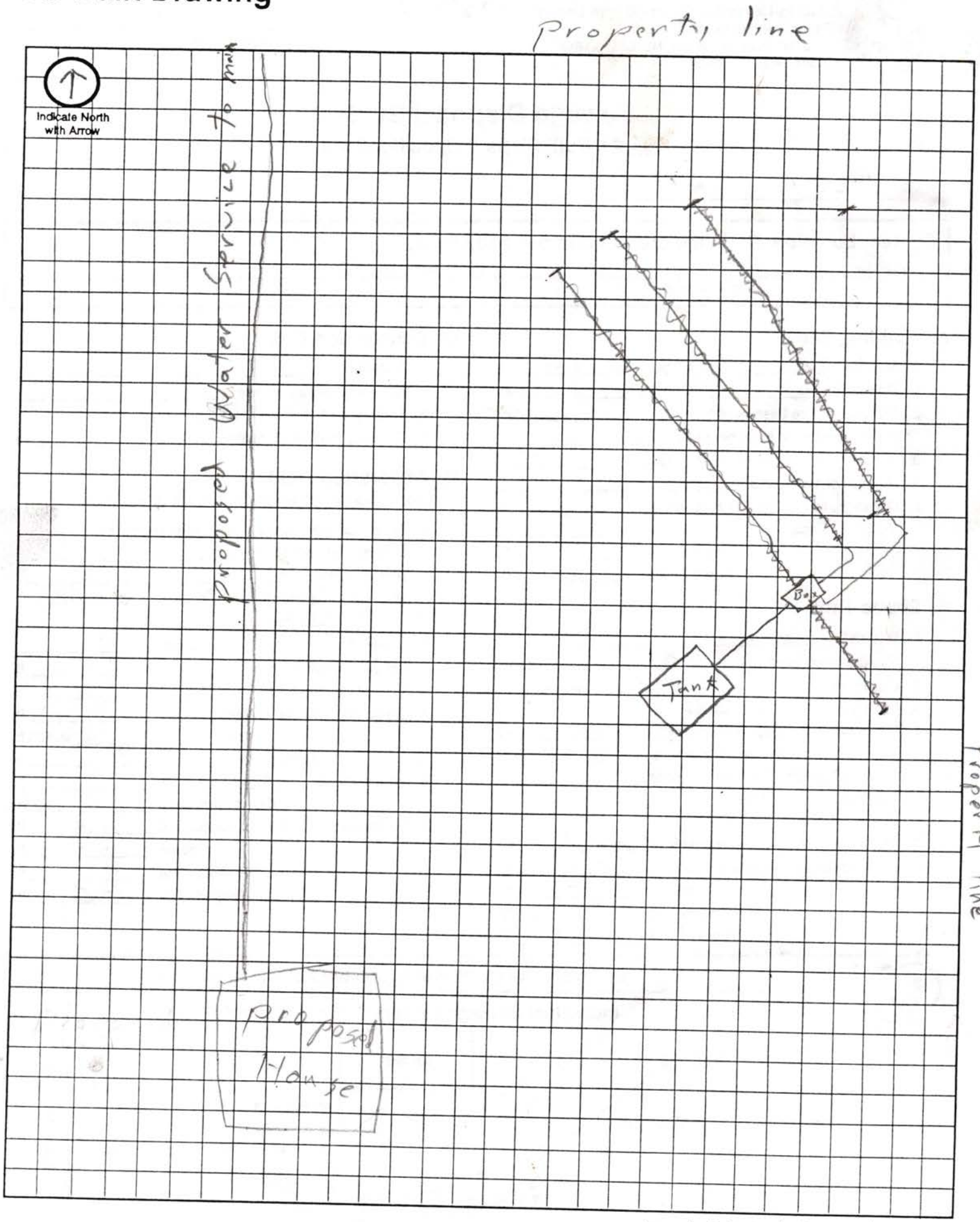
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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


R. 8 E.
T. 10 N.
21
22
23
26
27
28
33
34
35
PACIFIC
(Joins inset B, sheet 27)