Lincoln-Lancaster County Health Department

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

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 01380229501

Issued 04/05/01
Expires 10/05/01
Revenue Code 3157

FEES: $200.00

Establishment

CARY R SANDELL
T11N R5E SEC 15 QTR SE
CPE DEVILLE HGTS-OLB BLK L LOT 2
8501 W TREVISA CT-MALCOLM

TOTAL: $200.00

Permittee

CARY R SANDELL
5033 NW 6 ST
LINCOLN NE 68521

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

014651

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

A

Permit Number: 0138 02295

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 8501 W. Trevisa Court (no rural route) City Malcolm NE, Zip NE, 68402

Legal Description SE¼ SE¼ 15 11 North 5 East Coupe Deville Heights Lot #2 ~~Outlot B~~
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 Cary Sandell Signature Cary L Sandell

Address 5033 NW 6 City/State/Zip Lincoln, NE 68521

☒ Check if owner designed system Home Phone 402 438 6563 Work Phone 402 434 4117

C. Contractor

Name Mike McGill Company Name McGill-Walt Const. Inc.

Address 2401 Birch Creek Pl. City/State/Zip Lincoln, NE 68516

☐ Check if contractor designed system Work Phone 420-5002

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

Designer Name Cary Sandell Firm homeowner Work Phone 434-4117

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 4-4-01 Date frwd 4/6/01 ACTION ☒ Approved ☐ Disapproved Signature Paul Dowling
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 4-6-01 Date frwd 4-6-01 ACTION ☒ Approved ☐ Disapproved Signature
3. **City or County Engineer** Date rec'd 4/6/01 Date frwd 4/6/01 ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

By Paul Dowling

Date 7-25-01

Business Office Use Only

Date Rec'd 04/05/01

Amt Paid 200.00

Rec'd By LS Cash/Check No. 2107

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

Lincoln-Lancaster County Health Department
Environmental Health Division
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Phone: 402-441-8022
441-8022

B

Permit Number: 0138 07295

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 8501 W. Treviso Court (no rural route) City Malcolm NE, Zip 68402

Owner Cary Sandell Addresss 5033 NW 6th

Soil Type (SCS): ShD Sharpsburg Silty Clay Loam / PaC2 Pawnee Clay Loam Percolation Rate: _____ min./inch

Date of Tests 9/4/00 to 9/5/00 Weather: Precipitation None Temperature 85° F

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)	Last Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	36	9/4	1:00pm	9/4	8:00	9/5	1:33	18"	9/5	5:46	30	2.75	10.9
2	35	9/4	1:00	9/4	8:00	9/5	1:32	16"	9/5	5:46	30	3.5	8.5
3	36	9/4	1:00	9/4	8:00	9/5	1:31	16.5"	9/5	5:45	30	3.25	9.2
4	35	9/4	1:00	9/4	8:00	9/5	1:30	19"	9/5	5:45	30	1.0	30.0
5	35	9/4	1:00	9/4	8:00	9/5	1:28	18"	9/5	5:44	30	1.5	20.0
6	34	9/4	1:00	9/4	8:00	9/5	1:25	15"	9/5	5:44	30	1.0	30.6
~~7~~	~~35~~	~~9/4~~	~~1:00~~	~~9/5~~	~~1:30~~	~~9/5~~	~~1:25~~	~~13"~~	~~9/5~~	~~5:44~~	~~30~~	~~0~~	~~N/A~~ Stay Away
~~8~~	~~36~~	~~9/4~~	~~1:00~~	~~9/5~~	~~1:30~~	~~9/5~~	~~1:~~	~~15"~~	~~9/5~~	~~5:43~~	~~30~~	~~0.5~~	~~60.0~~ Stay Away

Avoid

Person Conducting Percolation Tests

Name: Cary Sandell
Phone: 402 438 6563
Address 5033 NW 6
Lincoln, NE 68521

Sum of Percolation Rates: 108.60
Average of Rates: 18.1 18.1
Rate Used for Calculation: ~~24~~ (30 on Table)

DO NOT WRITE BELOW THIS LINE

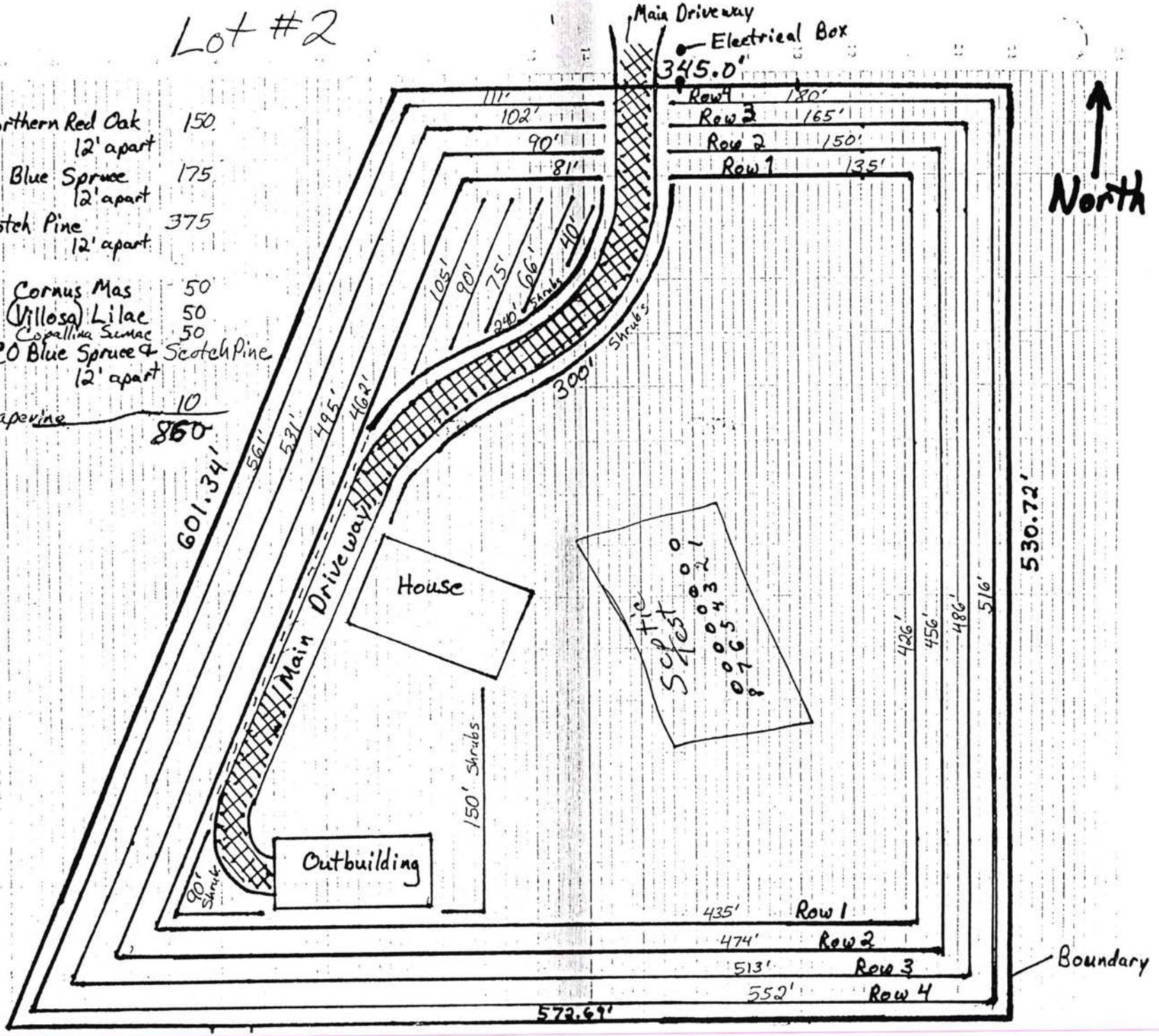
Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

Lot #2

Row 1	Northern Red Oak 12' apart	150
Row 2	CO Blue Spruce 12' apart	175
Rows 3,+4	Scotch Pine 12' apart	375
Driveway Border		
	Cornus Mas	50
	Common (Villosa) Lilac	50
	Copalline Sumac	50
Corner Fill	CO Blue Spruce & Scotch Pine 12' apart	
	Concord Grapevine	10
		860



1 cm = 30'
or
1 square = 6'

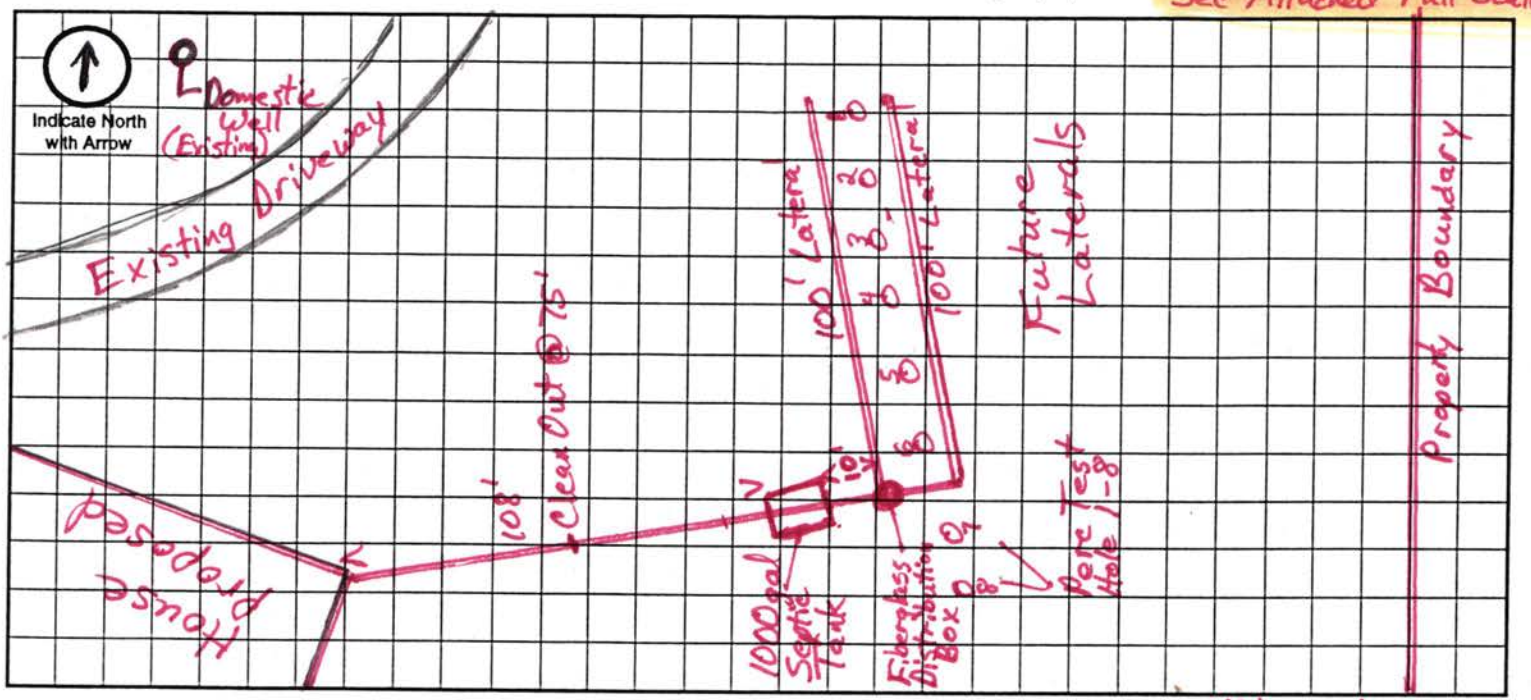
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 0138 02295

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. See Attached Full Scale



Approximate Scale: 12' ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 8501 W. Treviso Court City Malcolm NE, Zip 68402

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 18 & 30 (min. per inch) Soil Type: ~~Pawnee Clay Loam~~ Land Slope: 6 % %

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

Total Square Feet of Field Required: ~~600~~ 750 sq. ft. (I am installing 800ft² (I use 21 min/inch to be safe)

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

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

Total Length of Laterals ~~300~~ 250 ft. (~~100 each~~) Number of Trenches ~~4~~ 3 Trench Width 3 foot wide

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 X Mike Mallet / Pres. Date 4-3-01

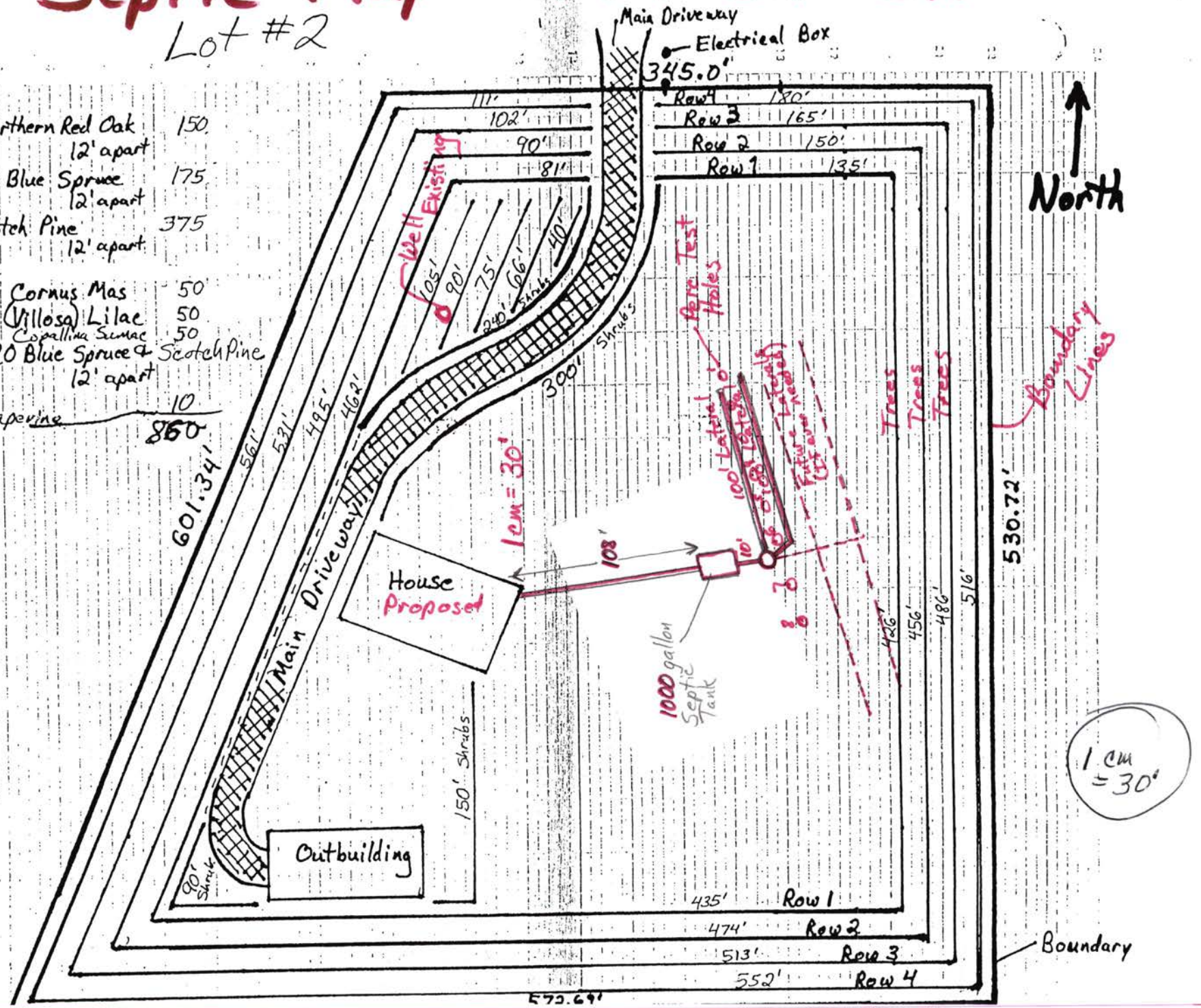
Installer Cory L Randall Date 4/3/01

FORM 23-102 10-96

Septic Map - Attachment

Lot #2

Row 1	Northern Red Oak 12' apart	150
Row 2	CO Blue Spruce 12' apart	175
Rows 3,+4	Scotch Pine 12' apart	375
Driveway Border		
	Cornus Mas	50
	Common (Villosa) Lilac	50
	Copallina Sumac	50
Corner Fill	CO Blue Spruce & Scotch Pine 12' apart	10
Concord Grapevine		860



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D

Permit Number: 013802295

Sewage Disposal System

As Built Plans & Specifications

Date July 20, 2001

System Location (Indicate correct number and street)

Address 8501 W. Treviso Court (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: Schedule 40 PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12" in.
3. Distance between dwelling and septic tank: 75 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: Schedule 40 PVC
   Number of compartments: 1
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 8 in.
   Over outlet, diameter 8 in.
   Riser: ☐ above ☒ below grade 12 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 6 in.
8. Distances to: Well or suction line 200 ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 150 ft.

C. Distribution Box

1. Material: Fiberglass
   Number available outlets: _____
2. Factory built: ☐ Yes ☒ No
3. Distance from septic tank: 12 ft.

D. Absorption Field

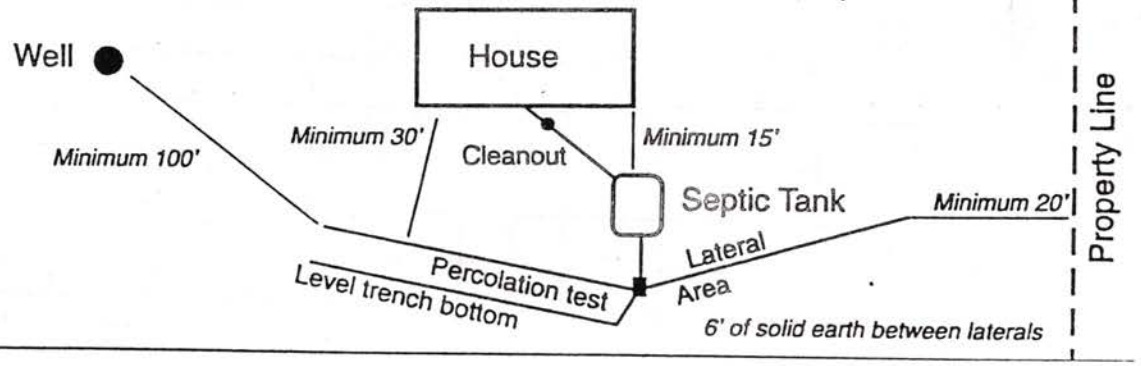
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: Infiltrator 16 in
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☒ other Infiltrator
2. Lateral lines: Number 3
   Length of each line: 80 ft. 75 ft.
   80 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 5" in/100 ft.
   Average depth 26 in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 175 ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 100 ft.

Indicate North with Arrow

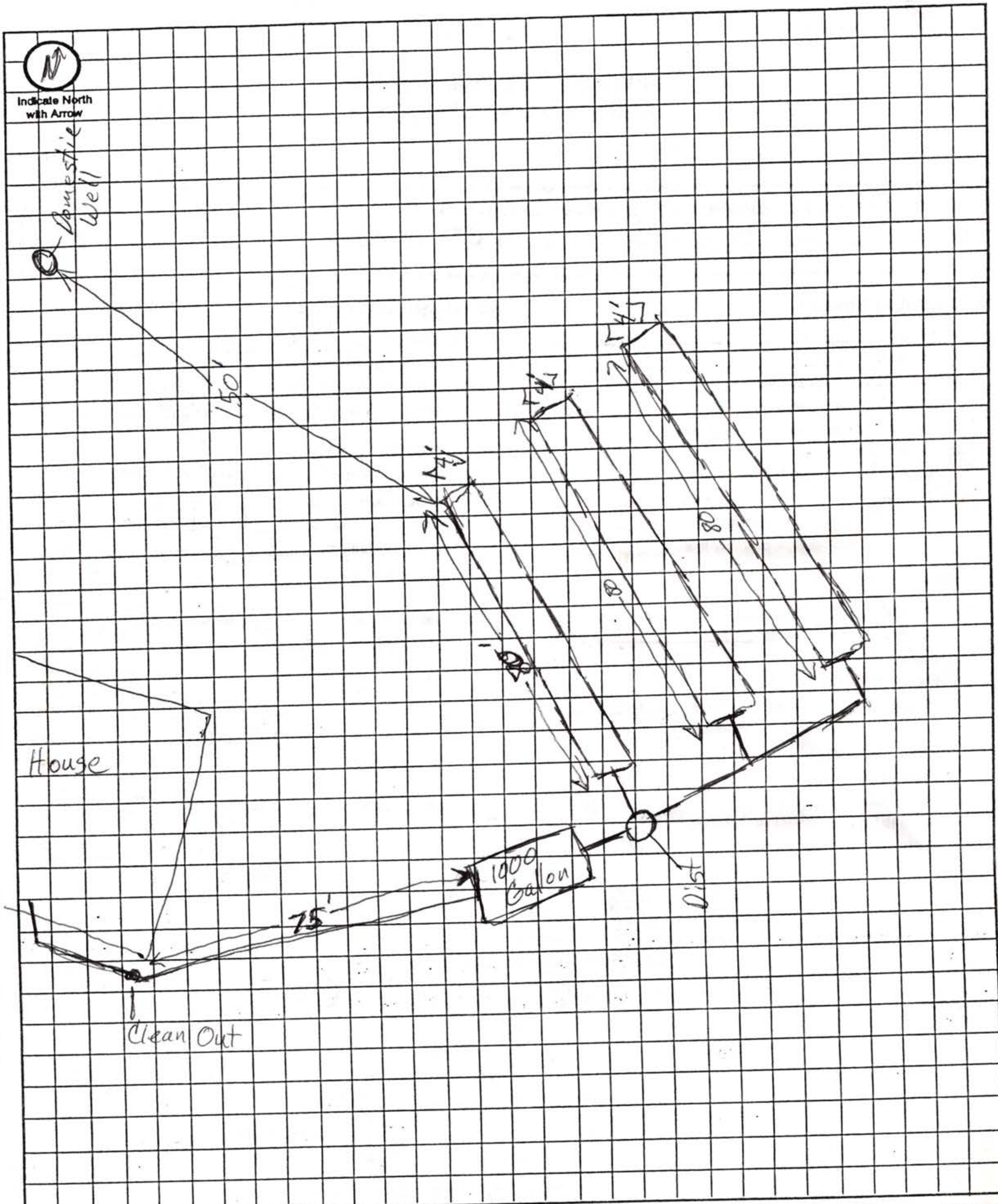
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



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