LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380176601

Issued 05/29/98
Expires 11/29/98
Revenue Code 3157

PAID

FEES: $150.00

Establishment

GARY A KING
T11N R5E SEC 12
LOT 22
13101 NW 56 ST-RAYMOND

TOTAL $150.00

Permittee

GARY A KING
RR0001
BOX 00031
DAVEY NE 68336

Issued By Health Director
Lincoln-Lancaster County Health Department

007414

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

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

A

Permit Number: 983801766

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) CR 3649

Address 13101 NW 56TH (no rural route) City RAYMOND NE, Zip 68428

Legal Description 12 11N 5E 22
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 GARY A KING Signature _____

Address RFD #1 Box 31 City/State/Zip DAVEY NE 68336

☑ Check if owner designed system Home Phone 466-1499 Work Phone 474-0642

C. Contractor

Name SELF Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

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

Designer Name SELF Firm _____ Work Phone _____

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 5-29-98 Date frwd 5/29/98 **ACTION** ☒ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 5-29-98 Date frwd 5-29-98 **ACTION** ☒ Approved ☐ Disapproved Signature _____

6-4-98 rm need sch 40 sewer pipe, tr need downy
6-5-98 rm corrected sewer pipe

Installation Final Written Approval

By _____

Date 7-7-98

Business Office Use Only
Date Rec'd 05/29/98
Amt Paid 150.00
Rec'd By _____ ~~Cash~~/Check No. 5094

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 13101 NW 56TH (no rural route) City RAYMOND NE, Zip 68428

Owner GARY KING Addresss RFD #1 DAVEY NE 68336

Soil Type (SCS): SHARPSBURG Percolation Rate: 34 min./inch

Date of Tests 5/25 to 5/28 Weather: Precipitation NONE Temperature 70-80

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	36"	5/25	2:15	5/25	6:30	5/26	2:38	6	5/26	6:30	30	3/4	40
2	"	5/25	2:15	5/25	6:30	5/26	2:39	6	5/26	6:30	"	1	30
3	"	5/25	2:15	5/25	6:30	5/26	2:40	6	5/26	6:30	"	2	15
4	"	5/25	2:15	5/25	6:30	5/26	2:41	6	5/26	6:30	"	1 1/8	26.6
5	"	5/27	4:00	5/27	8:00	5/28	4:00	6	7:30	5/28	"	3/4	40
6	"	5/27	4:00	5/27	8:00	5/28	4:00	6	7:30	5/28	"	1 1/8	26.6
7	"	5/27	4:00	5/27	8:00	5/28	4:10	6	7:30	5/28	"	7/8	34.3
											"		

Sum of Percolation Rates: 212.5 / 197.5

Average of Rates: 30.357 33.9

Rate Used for Calculation: ~~34~~ 40

Person Conducting Percolation Tests

Name: GARY KING

Phone: 466-1455

Address RFD #1 DAVEY NE 68336

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks REPEAT TEST FOUND BETTER AREA. 40 MIN/INCH WILL BE USED TO SIZE SYSTEM

Signature of Reviewing Official John E Munsinger Date 5-29-98

FORM 23-101 10-96

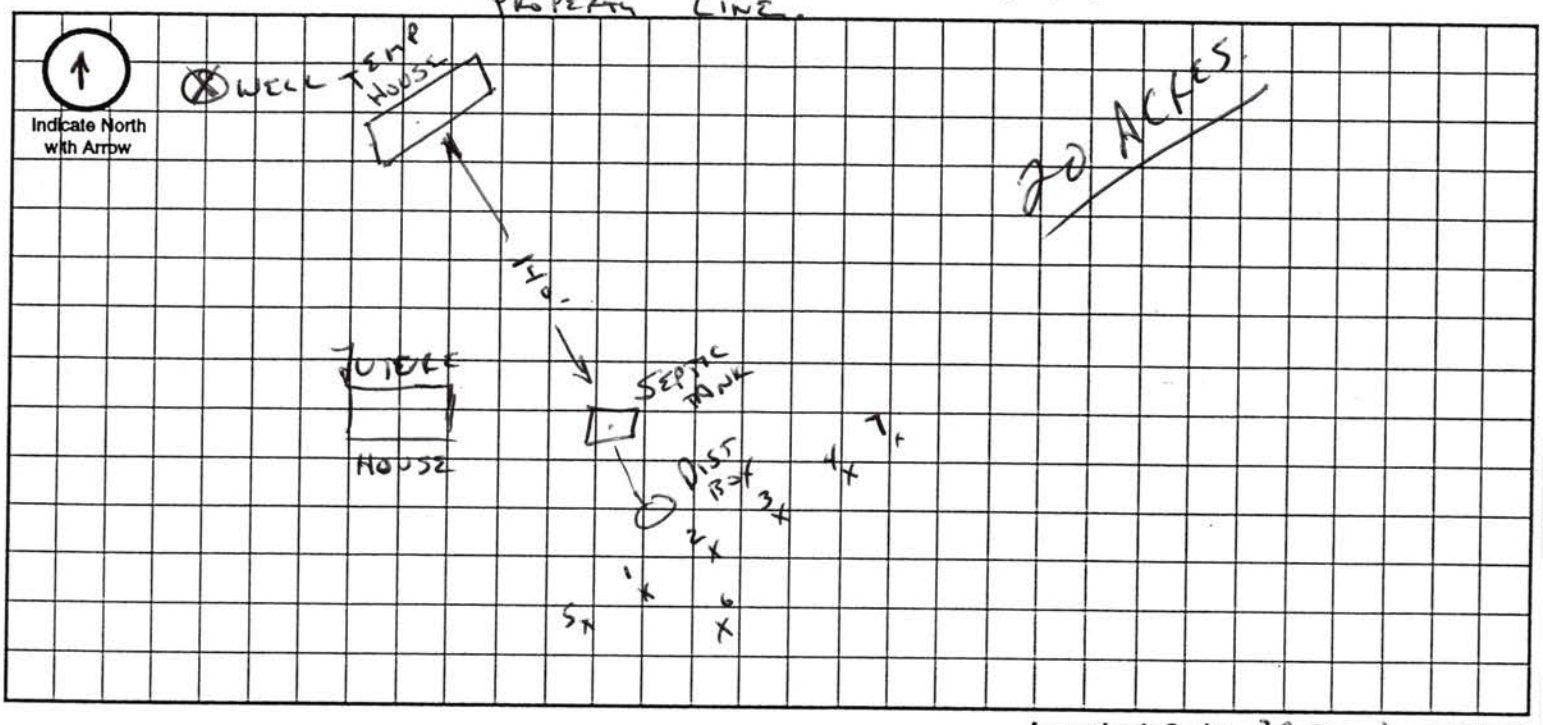
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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: 20 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 13101 NW 51ST City RAYMOND NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 34 (min. per inch) Soil Type: SHARPSBURG Land Slope: 4.3% %

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

Total Square Feet of Field Required: ≈ 750 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 300 lin ft. Number of Trenches 4 Trench Width 2' 3" lin

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 5/29/98

Installer _____ Date 5/29/98

FORM 23-102 10-96

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 7/5/98

System Location (Indicate correct number and street)

Address 13101 NW 56TH (no rural route) City RAYMOND NE, Zip

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: — in.
   or distance below basement floor: — in.
3. Distance between dwelling and septic tank: 150' 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: PRE-CAST CONCRETE
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter ____ in.
   Over outlet, diameter ____ in.
   Riser: ☐ above ☒ below grade 1 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 ____ ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

C. Distribution Box

1. Material: PRE-CAST
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 21 ft.

D. Absorption Field

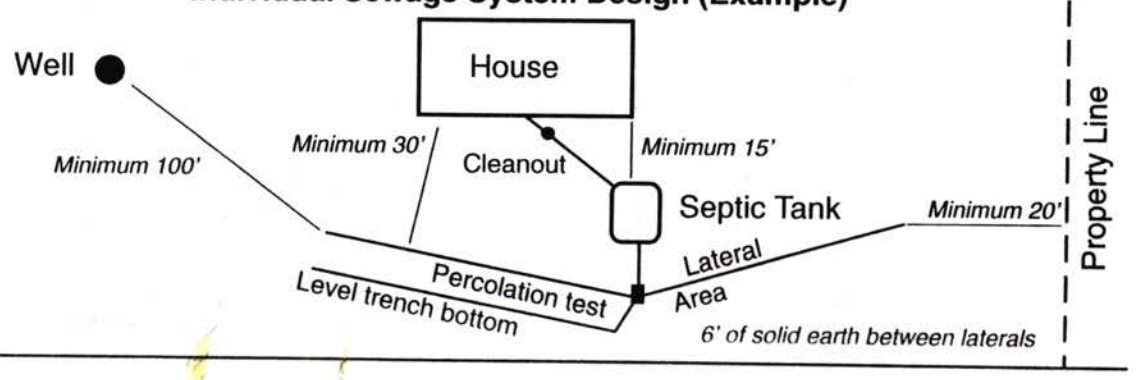
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☒ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other ____
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 3' ft.
   Slope 6 in/100 ft.
   Average depth 3' in
4. Filter material: GRAVEL
   Depth of material 14 in.
5. Distances to: Well or suction line 175 ft.
   Stream ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.

Indicate North with Arrow

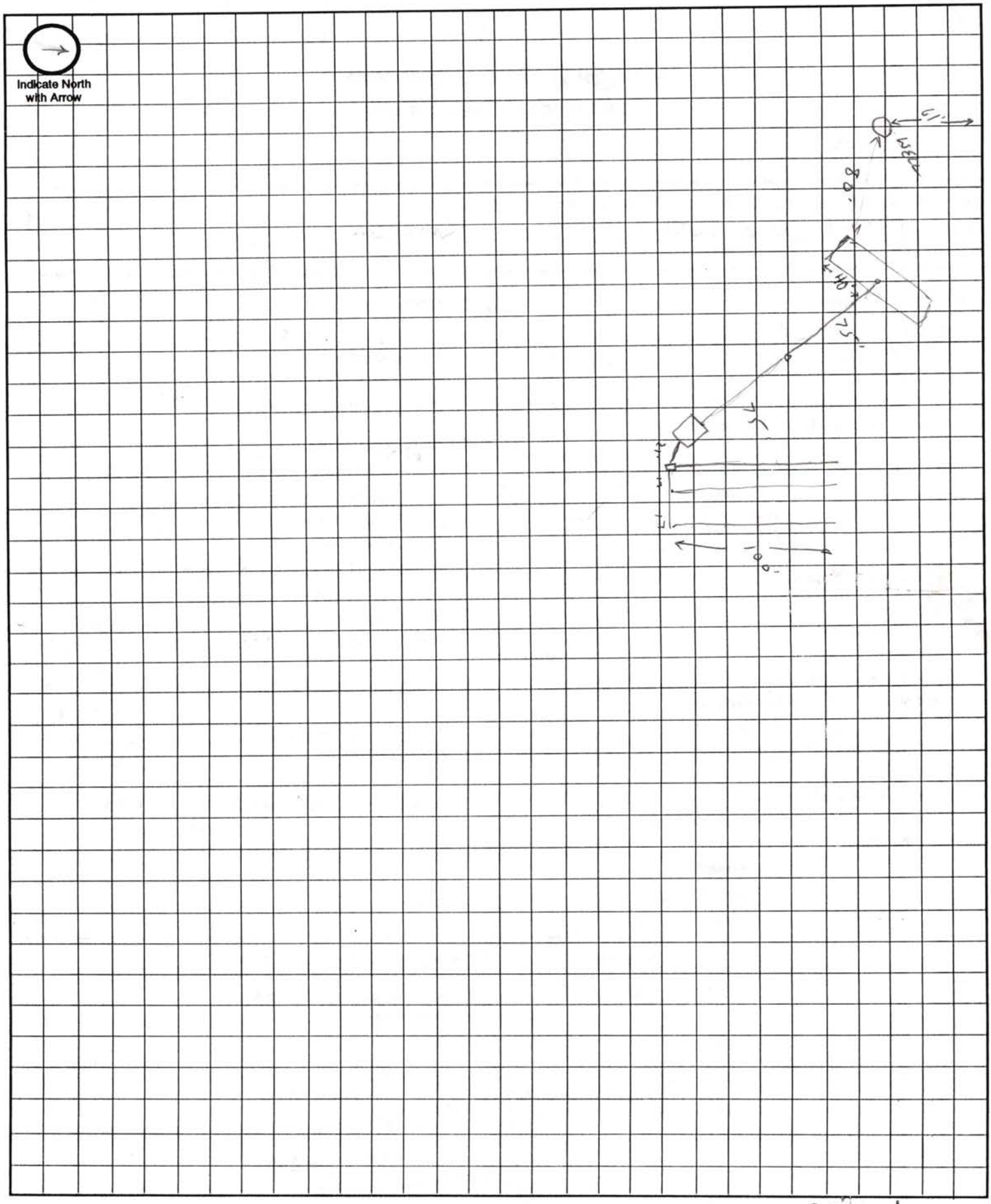
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: 20 ft. = 1 grid line/s


New septic
Mill Rd
R 5 E.
R 6 E.
T. 11 N.
2740000 FEET
4800000 FEET
Oak Creek
North Oak Creek
Ray
(Joins sheet 12)
PaC2