Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

003275

(402) 441-8000

Permit
SEWAGE INSTALLATION
SEPTIC
REPRINT

Establishment
MIKE & SANDY RIES
T11N R5E SEC 9 QTR NW
LOT 32IT
10801 WESTMILL RD-MALCOLM

Permittee
MIKE RIES
10801 W MILL RD
MALCOLM NE 68402-9692

Permit # 03380268001

Issued 07/28/03
Expires 01/28/04
Revenue Code 3157

FEES: $200.00

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:

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 10801 westmill RD (no rural route) City Malcolm NE, Zip 68

Legal Description 9 11N 5E 32 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 Mike Ries Signature _____

Address 10801 west Mill RD City/State/Zip Malcolm Neb

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Doug LoFTus Company Name Loftus Septic Pumping & Constr—

Address 410 Co RD C City/State/Zip Ashland Nebr 68003

☒ Check if contractor designed system Work Phone 402-944-7636

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 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 10/9/03	**ACTION** ☐ Approved	☐ Disapproved
	Date frwd _____	Signature _____	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd _____	**ACTION** ☐ Approved	☐ Disapproved
	Date frwd _____	Signature _____	
3. **City or County Engineer**	Date rec'd _____	**ACTION** ☐ Approved	☐ Disapproved
	Date frwd _____	Signature _____	

Installation Final Written Approval

By _____

Date _____

Business Office Use Only

Date Rec'd 10/09/03

Amt Paid 200.00

Rec'd By _____ ~~Cash~~/Check No. 1327

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

Approved Perc test (2nd test)

B

Permit Number:

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

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 108 West Mill RD City Malcolm NE, Zip
(no rural route)

Owner Mike Ries Addresss 108 West Mill RD

Soil Type (SCS): Judson's Percolation Rate: min./inch

Date of Tests 10-14- to 10-15-03 Weather: Precipitation 0 Temperature 60's

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	24	10-14				10-15	2:55	6"	10-15	3:25	30	5/8	48 mpi
2	24	10-14	ALL			10-15	2:55	6"	10-15	3:25	"	5/8	
3	24	10-14	Hole			10-15	2:55	6	10-15	3:25	"	1 3/8	
4	24	10-14	4 hrs			10-15	2:55	6	10-15	3:25	"	1	
5	24	10-14	of F			10-15	3:00	6	10-15	3:30	"	1	
6	24	10-14				10-15	3:00	6	10-15	3:30	"	1	
7	24	10-14	Sattured			10-15	3:00	6	10-15	3:30	"	1.5	20 mpi
8	24	10-15				10-15	3:00	6	10-15	3:30	"	1.25	

Person Conducting Percolation Tests

Name: Doug Loftus - Doug Lofftus
Phone: 402 944-7636
Address 410 CO RD C
Ashland Nebr 68003

Sum of Percolation Rates: > 20 mpi variation
Average of Rates: thus use slowest rate
Rate Used for Calculation: 48 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Drainfield laterals must be no deeper than 24", and located in narrow band of soil grading into Judson soil east of house.

Signature of Reviewing Official Ron Moyer Date 10-16-03

FORM 23-101 10-96

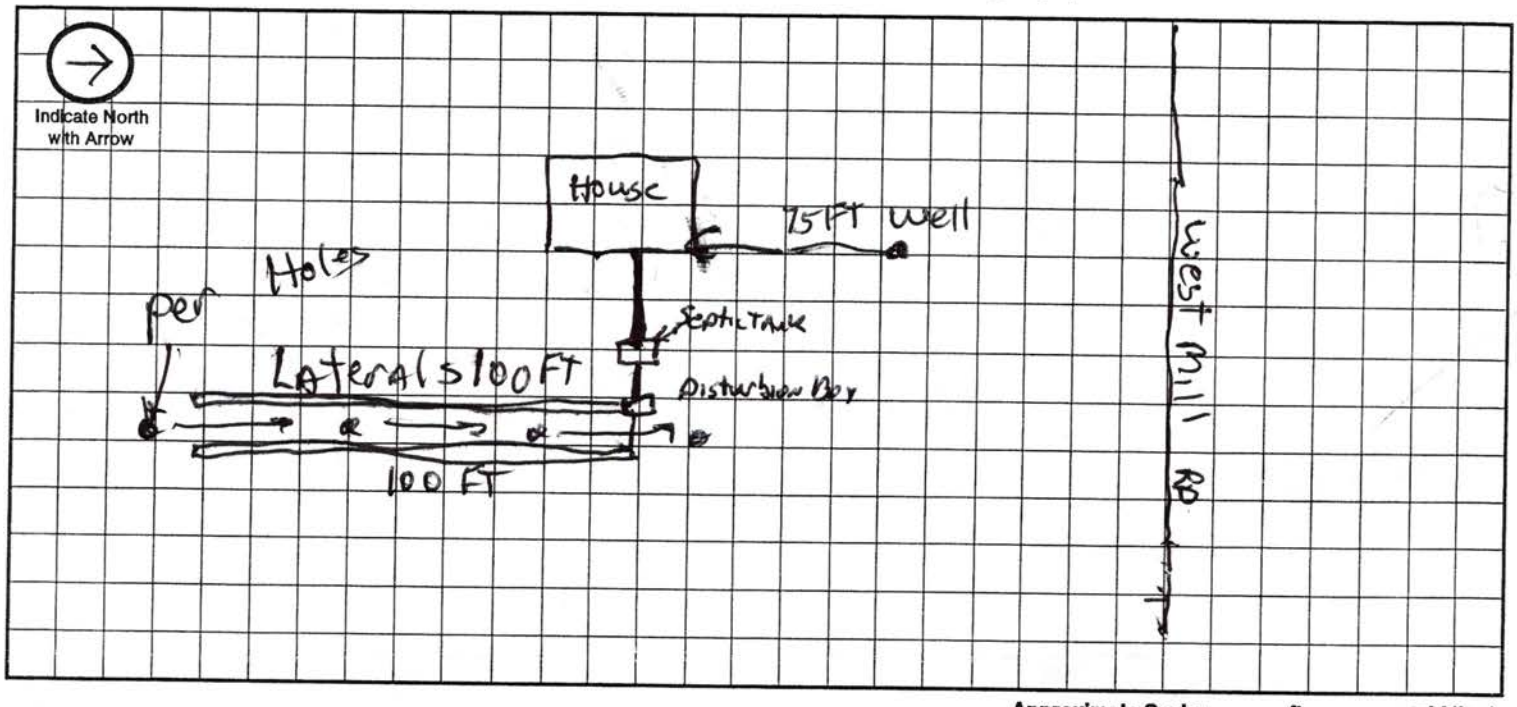
Lincoln-Lancaster County Health Department
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C

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: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 10801 West Mill RD City Malcolm NE, Zip 68

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate _____ (min. per inch) Soil Type: Clay Land Slope: _____ %

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

Total Square Feet of Field Required: ~~750~~ 990 sq. ft. (248 / 4)990 / 198

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

Capacity of Septic Tank ~~750~~ 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed 100

Total Length of Laterals 248 ft. Number of Trenches 2 or more Trench Width 4 ft

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 10-6-03

Installer Douglas J Loftus Loftus Septic & Pumping Date 10-6-03

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 10-23-03

System Location (Indicate correct number and street)

Address 10801 West Mill Rd (no rural route) City Malcolm NE, Zip

A. Building Sewer

1. Material: Sch. 40 Plastic Pipe
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and septic tank: 77 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line over 100 ft.
   stream None ft.
   pressure line over 50 ft.
   property line 500 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 2
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 30 in.
   Over outlet, diameter 30 in.
   Riser: ☒ above ☐ below grade 12 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 over 100 ft.
   Stream None ft.
   Pressure line over 100 ft.
   Property line over 500 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 9
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 19 FT ft.

D. Absorption Field

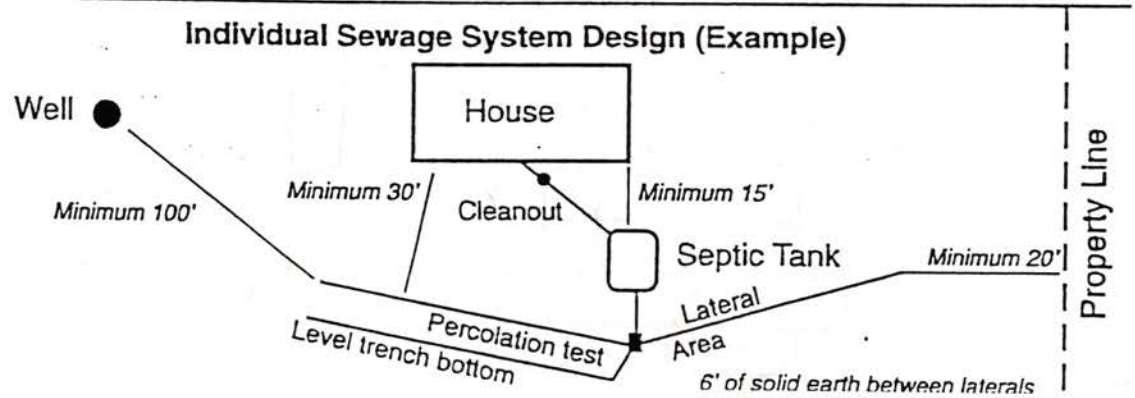
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: ____
   or perforated pipe: ____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other INFILTRATORS
2. Lateral lines: Number 3
   Length of each line: 150 ft. 100 ft.
   80 ft. ____ ft., ____ ft.
3. Trench dimensions: Width 5 ft.
   Slope > level (some slope) in/100 ft.
   Average depth 24-30" in
4. Filter material: Gravel
   Depth of material 15" in.
5. Distances to: Well or suction line over ft.
   Stream None ft.
   Pressure line over 100 ft.
   Property line over 500 ft.

Indicate North with Arrow

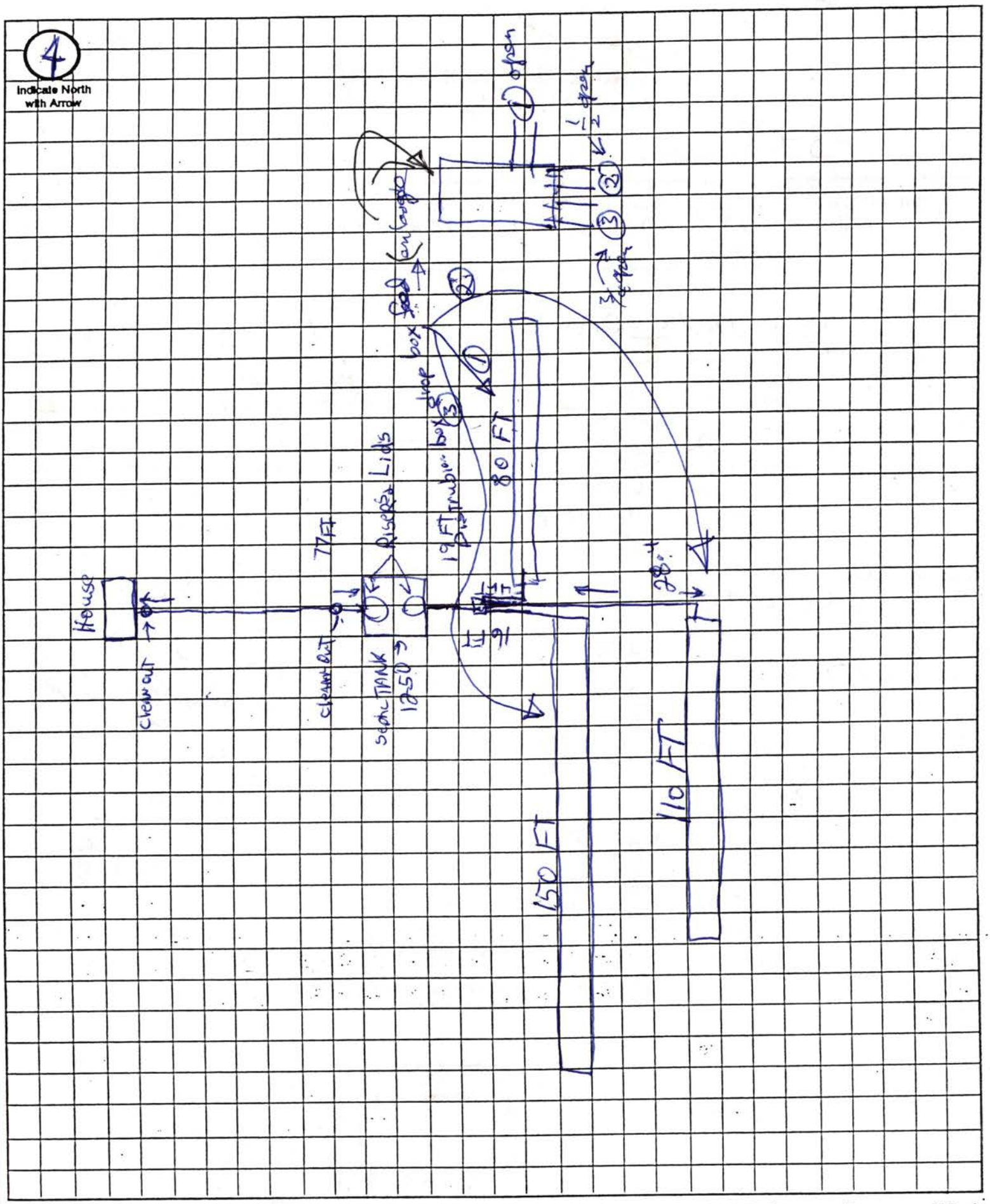
Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



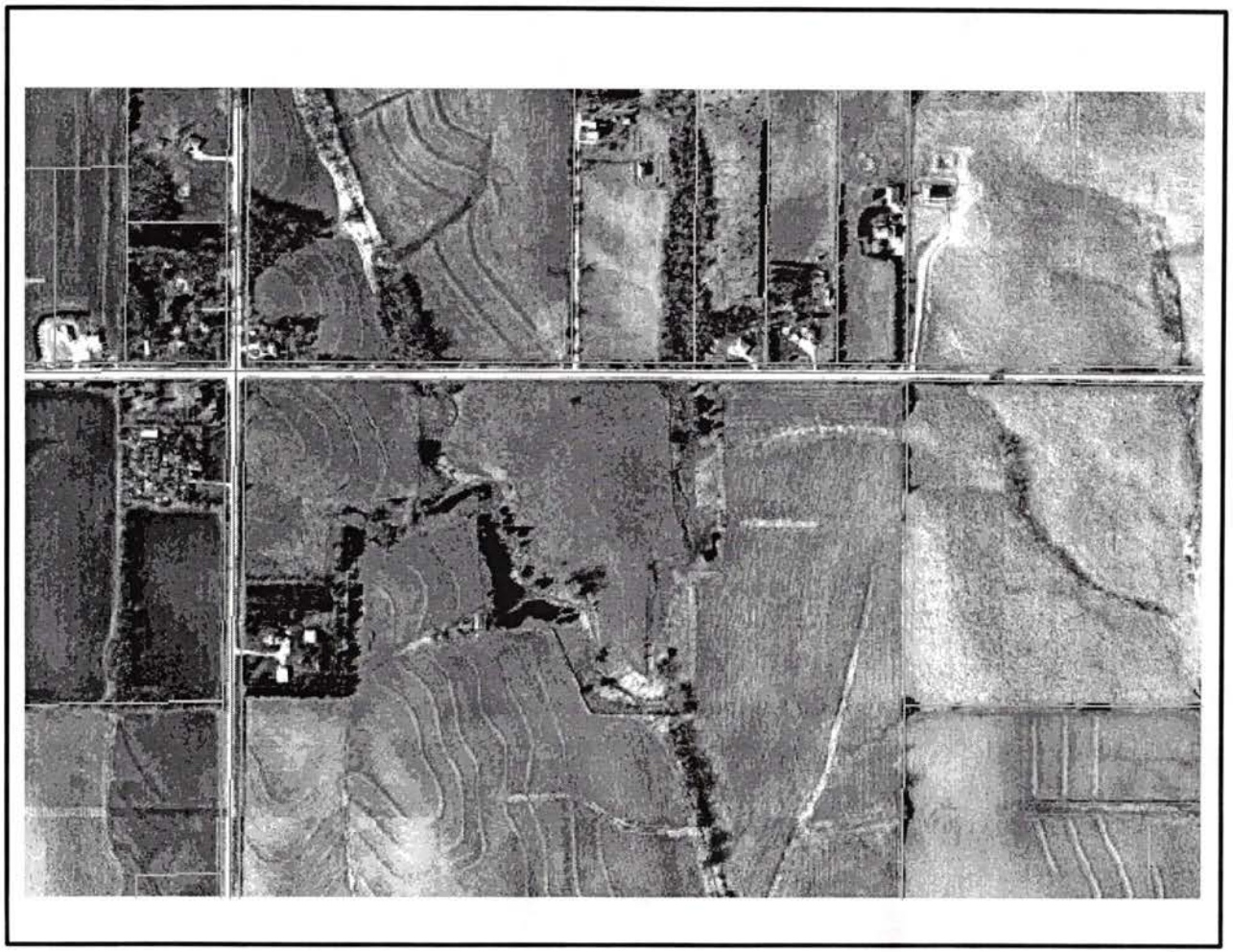
FORM 23-103 10-96

As Built Drawing



ESRI ArcExplorer 2.0

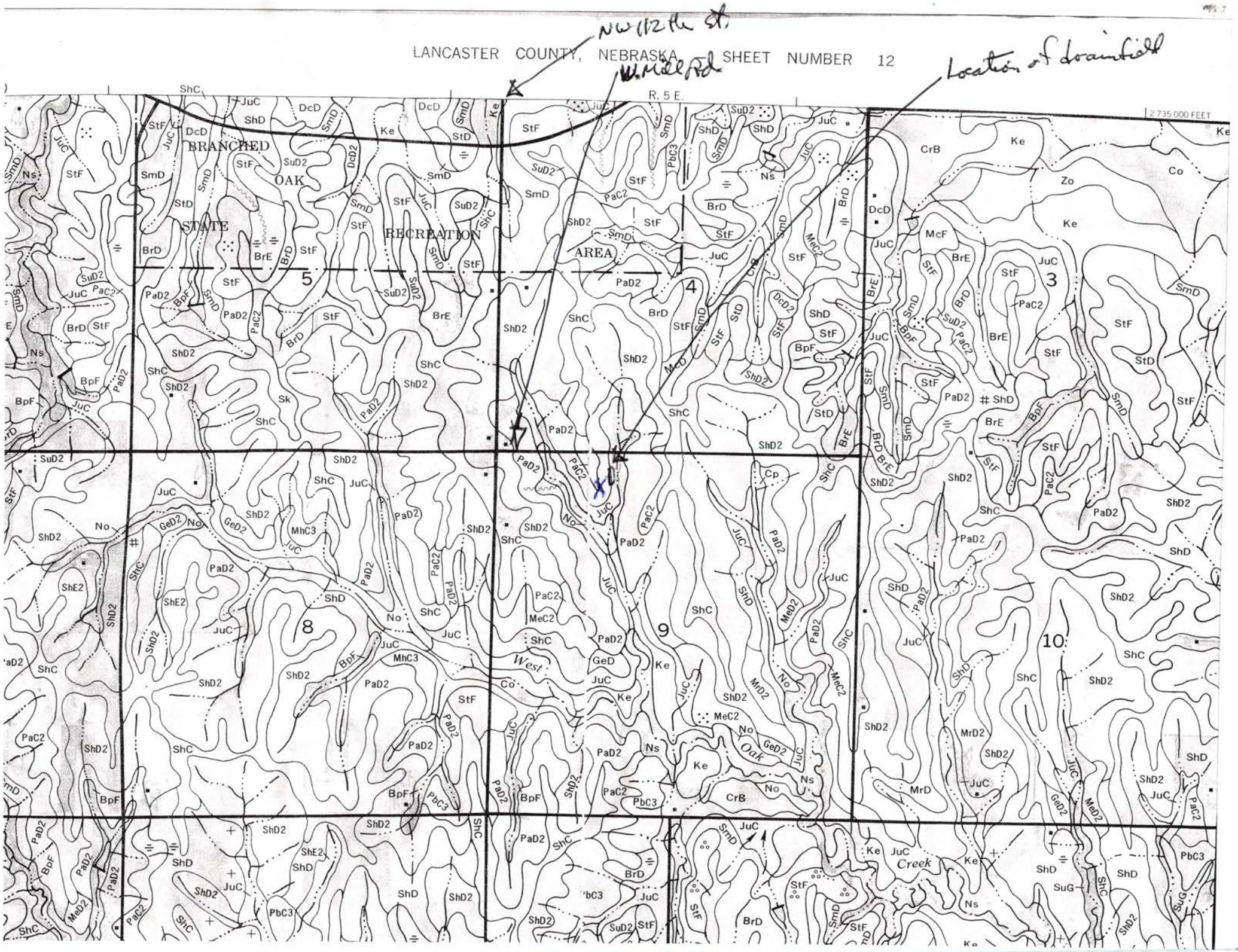
10801 West Mill Road



streets
Parcels
flood1

N

Monday, Oct 13 2003


LANCASTER COUNTY, NEBRASKA SHEET NUMBER 12
NW 112th St.
W. Mill Rd
Location of Drainfield
R. 5 E.
2 735 000 FEET
BRANCHED OAK STATE RECREATION AREA
West Oak Creek
5
4
3
8
9
10