Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

006604

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 05380299501

Issued 04/06/05
Expires 04/06/06
Revenue Code 3157

Establishment: LARRY WARRELMANN
T11N R5E SEC 4 QTR SW
LOT 9IT

FEES: $200.00

Permittee: LARRY WARRELMANN
6720 LA SALLE ST
LINCOLN NE 68516

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: 05380299501

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 10700 W mill Rd (no rural route) City malcolm NE, Zip 68402

Legal Description SW 4 11N 5E 9 F.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 Larry Warrelmann Signature _____

Address 6720 LaSalle St City/State/Zip Lincoln, NE 68516

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

C. Contractor

Name Existing Home 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 Lloyd Jakoubek Firm Raymond Contracting, Inc Work Phone 402-890-6009

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 4/6/05 Date frwd 4/7/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 4/7/05 Date frwd 4/7/05 ACTION ☒ Approved ☐ Disapproved Signature _____

- Tank + lateral - 5/4/05 DS

Installation Final Written Approval

By _____

Date 5-11-05

Business Office Use Only

Date Rec'd 04/06/05
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 5709

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: 05380299S

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 10700 W Mill Rd (no rural route) City Malcolm NE, Zip 68402

Owner Larry Warrelmann Addresss 6720 LaSalle St Lincoln, NE 68516

Soil Type (SCS): Judson / Pawnee Percolation Rate: 48 min./inch

Date of Tests 3-22-05 to 3-23-05 Weather: Precipitation 0 Temperature 51°

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	26	3-22	2:00p	3-22	6:00p	3-23	1:30p	6	3-23	5:30	30	1 7/16	30/1.44 = 21
2	26	"	"	"	"	"	"	"	"	"	"	3 5/8	30/3.63 = 8
3	28	"	"	"	"	"	"	"	"		"	1	30/1.00 = 30
4	25	"	"	"	"	"	"	"	"		"	3/4	30/0.75 = 40
5	26	"	"	"	"	"	"	"	"		"	5/8	30/0.63 = 48
6	26	"	"	"	"	"	"	"	"		"	3/4	30/0.75 = 40

Sum of Percolation Rates: 187

Average of Rates: 31

Rate Used for Calculation: 48 (20 mpi Variance)

Person Conducting Percolation Tests

Name: Terri Jakoubek, Raymond Contracting, Inc.

Phone: 402-783-2663 or 402-890-3870

Address 13800 NW 70th St
Raymond, NE 68428 # P1198

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Jerrold C. Wood R.E.H.S. Date APRIL 7, 2005

FORM 23-101 10-96

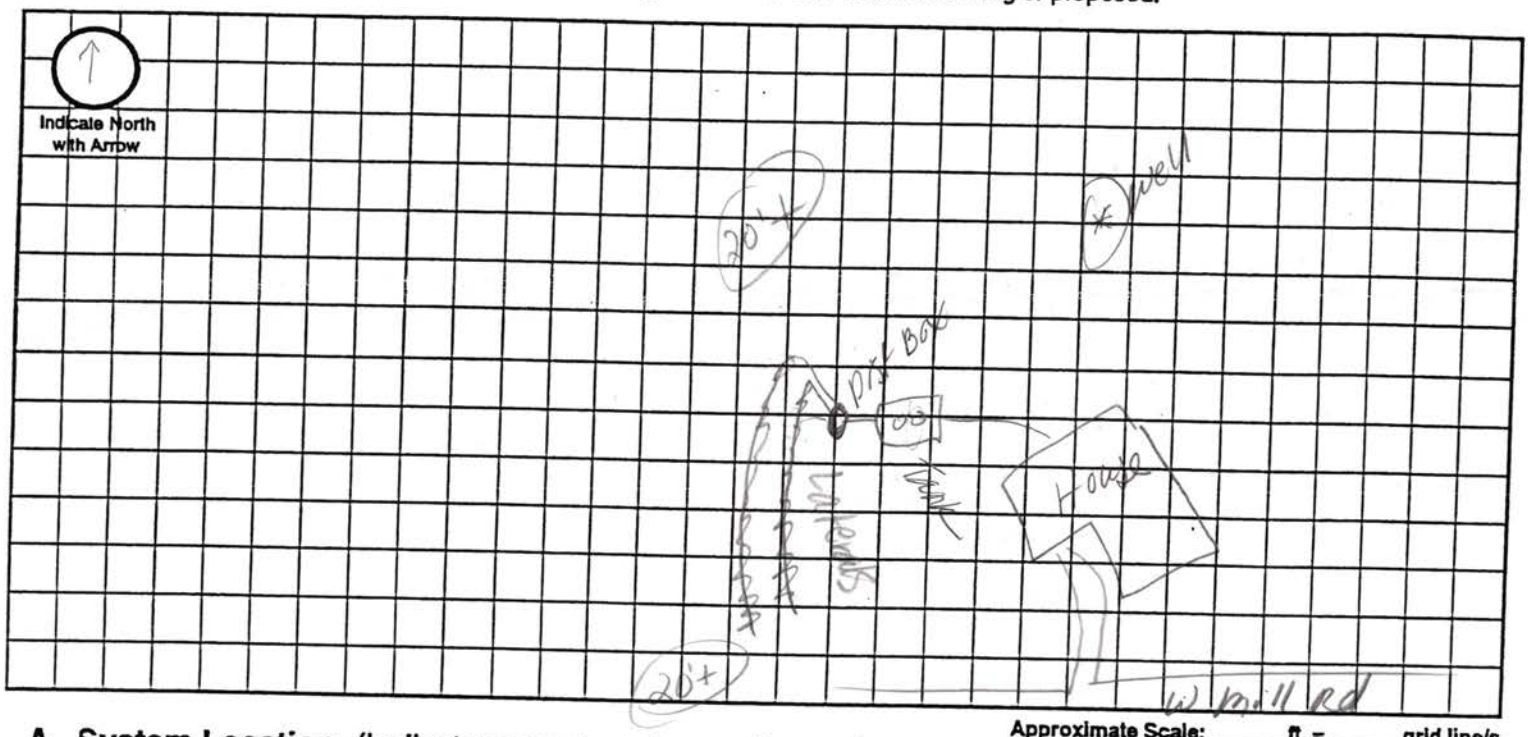
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 053802995

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) 10700 W mill rd 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 48 (min. per inch) Soil Type: Judson/Kennebec Land Slope: _____ %

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

Total Square Feet of Field Required: 990 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: #-10 Infiltrator

Capacity of Septic Tank 1.000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

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

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 EXISTING Home Date 4-3-05

Installer _____ Date 4-1-05

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 5/4/05 Warrelmann

System Location (Indicate correct number and street)

Address 10700 W Mill Rd. (no rural route) City Malcolm NE, Zip 68402

A. Building Sewer

1. Material: class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 56 ft.
4. Number of clean-outs: one
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 75+ ft.

B. Septic Tank

1. Material: concrete
   Number of compartments: one
2. Capacity: 1000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade AT in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 48 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 75+ ft.

C. Distribution Box

1. Material: PlaTie
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 7 ft.

D. Absorption Field

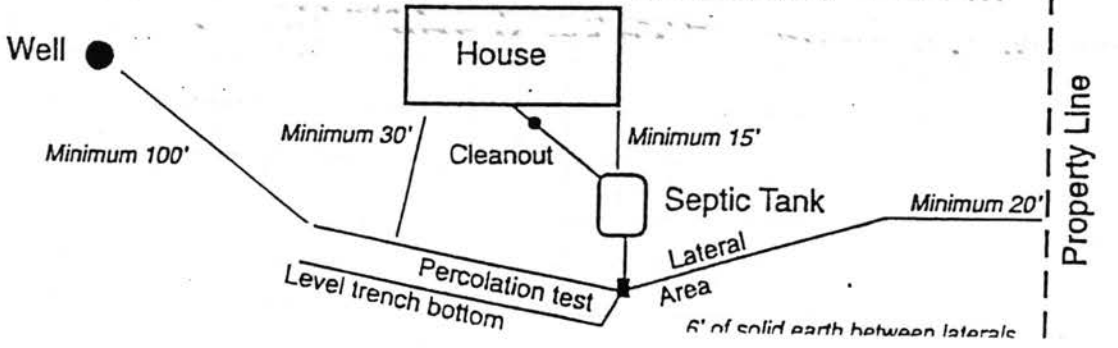
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: H-10 Standard
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 4
   Length of each line: 62.50 ft. 62.50 ft.
   62.50 ft. 62.50 ft., _____ ft.
3. Trench dimensions: Width 38 in. ft.
   Slope Flat in/100 ft.
   Average depth 27 in
4. Filter material: Dirt
   Depth of material 27 in.
5. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 20+ ft.

Indicate North with Arrow

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

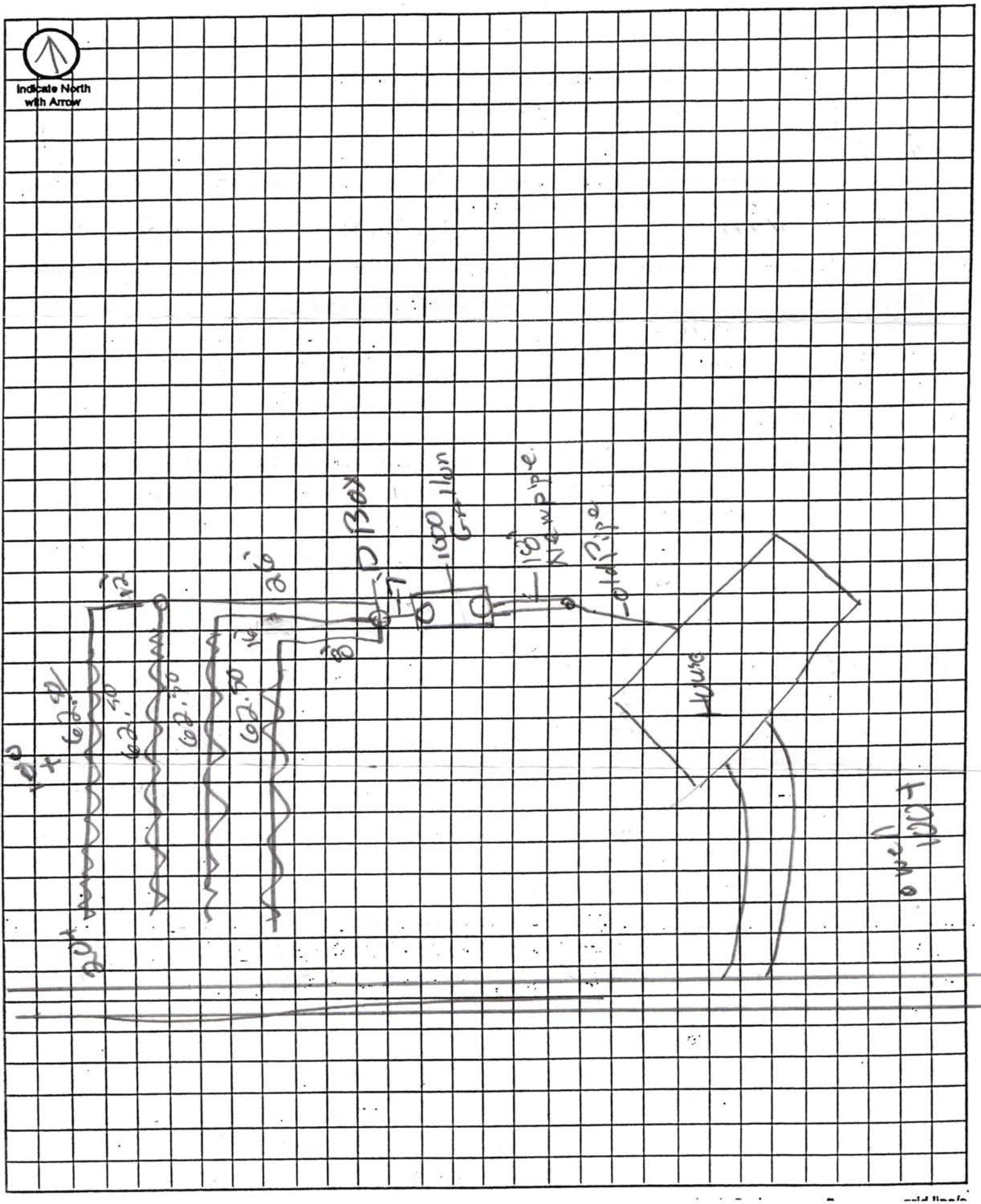
Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing

MAY 0 9 2005



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 815-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

November 10, 1976 — THIS PERMIT EXPIRES

Thomas W. Sundling — ISSUED TO

RFD, Malcolm, NE — ADDRESS

T11N; R5E; Sec. E½ of S½ of SW¼ of Section 4; — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH DEPARTMENT — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐

County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 8/5-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 5-2-76

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

E 378' & W 763' of

1. Legal description of property: Twp. 11-N ; Range 5 E ; Section E ½ of S ½ of SW¼ sec 4
Block ~~of Sec~~ ; Lot ____ ; Addition ____
Street Address 0 West Mill Rd.

2. Property Use: Residential ____ ☒ ; Commercial ____ ☐
No. of Bedrooms 3 . Describe: ____
Other Use ____ ☐
Describe: ____

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

4. Distance to public sewer: — ft.

Thomas W. Sundling
Signature of Applicant (Owner or Lessee)

RFD MALCOLM, Ne. 68402
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 5/12/76 . Date Frwd. 5/13/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hook

2. Supt. Bldg. Insp.: Date Rec'd. ____ . Date Frwd. ____ . ACTION: Approved ☐ Disapproved ☐ Signature: ____

3. City or County Engineer: Date Rec'd. 5/13/76 . Date Frwd. 5/13/76 . ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff
Rec'd 5/13/76 mf

REMARKS OR REASONS FOR DISAPPROVAL ____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 815-C

DATE: 5-2-76

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 11-N; Range 5E; Section E½ of S½ of SW¼ of sec 4; Block —; Lot —; Addition —.
   Street Address West mill Rd.

2. Property Use: Residential YES ☒; Commercial ☐
   No. of Bedrooms 3
   Describe:
   Other Use
   Describe:

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Thomas W. Sundling
Signature of Applicant (owner or lessee)

RFD Malcolm, Ne. 68402
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
   Filing Fee: $30.00

2. Site Visits:
   Date: 7-27-76 by: jw
   Date: by:
   Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/2/76
   by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 7-27-76 by: James Wewerka

FORM HD- 43(73) 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
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 475-6221)

FILE NO. 8/5-C

PROPERTY WHERE SOIL TESTED:
Location: Township 11-N; Range 5E
Section & ¼ Sect. E ½ of S ½ of SW 1/4 of Sec. 4
Property Dimensions: 282 ft. x 1320 ft.
Area: 8.4 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay [X]; Silty Clay Loam [ ]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Owner: Thomas W. Sundling
Address RFD MALCOLM

Dates of Tests: 4-30, 1976 to 5-1, 1976. Weather: Precip. NONE Temp. 78°

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				
Hole 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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	40"	4/30	1:00PM	5/1	2:30PM	5/1	5:30	6"	6:00	4 1/2	30	1 1/2	60/3
2	36"	4/30	1:00PM	5/1	2:30 "	5/1	5:32	6"	6:02	5 1/4	30	3/4	60/1.5
3	38"	4/30	1:00PM	5/1	2:30 "	5/1	5:34	6"	6:04	3 1/2	30	2 1/2	60/5
4	38"	4/30	1:00PM	5/1	2:30 "	5/1	5:36	6"	6:06	5 1/2	30	1/2	60/1
5	36"	4/30	1:00PM	5/1	2:30 "	5/1	5:38	6"	6:08	5 1/4	30	3/4	60/1.5
6	38"	4/30	1:00PM	5/1	2:30 "	5/1	5:40	6"	6:10	5 1/4	30	3/4	60/1.5

Sum of Percolation Rates 360/13.5
Average or Rates: 60/2.25
Mean of Rates: 60/1.5

Thomas W. Sundling
Signature of Person Conducting Test

Address RFD MALCOLM, Ne.
Phone: 796-2393

(Do not write below this line)

REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 38 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: May 12, 1976

Gerald C. Hoos
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM

(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 815-C

SPECIFICATIONS

DATE: 5-2-76

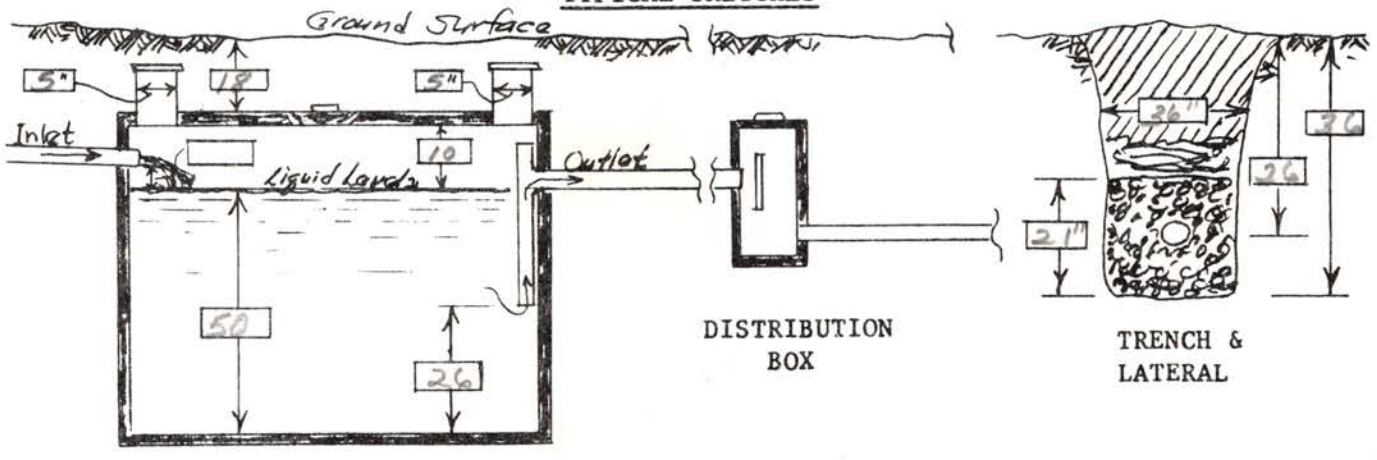
A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 12 in.
3. Distance between dwelling and septic tank 60 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 170 ft.;
Stream — ft.; Pressure Line 40 ft.;
Property Line 180 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Cement; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 50 in.
3. Factory Built: Yes ☒ (Company Pre CAST)
No ☐
4. Manholes: Over Inlet; diam. 5 in.
Over Outlet; diam. 5 in.
Below Grade 18 in.
5. Inlet: Baffle ☒; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet 1 in.
7. Depth of top of tank below finished grade 12 in.
8. Distances To:
Well or Suction Line 170 ft.;
Stream None ft.; Pressure Line 135 ft.;
Property Line 120 ft.

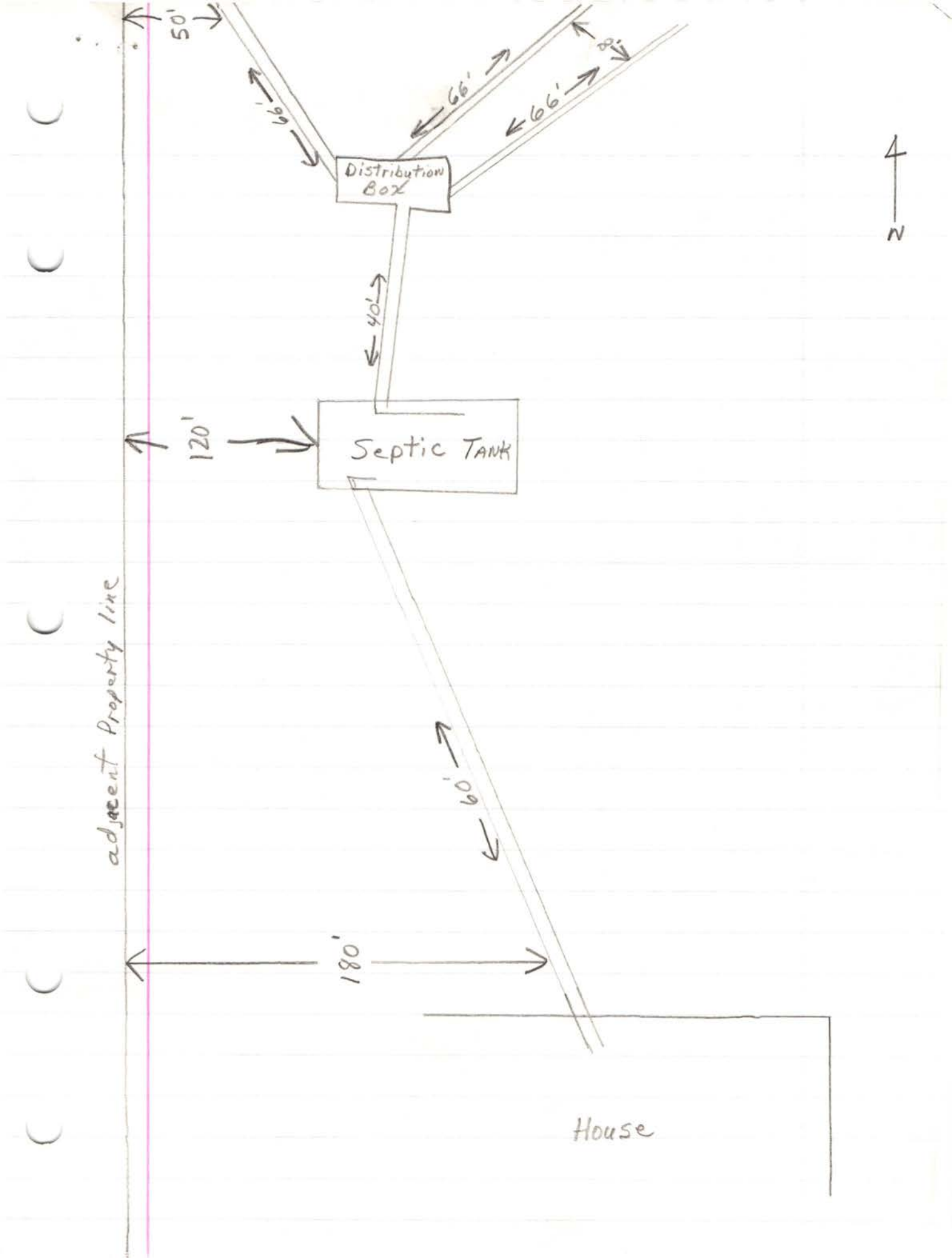
C. DISTRIBUTION BOX
1. Material Cement; No. available outlets 6.
2. Factory Built: Yes ☒, (Company Pre CAST) No ☐
3. Dimension: Length 96 in.; Width 60 in. Depth 60 in.
4. Distance from Septic Tank 40 ft.
5. Serial Distribution: Yes ☒, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: laterals (fiber glass
2. Lateral Lines: Depth below grade 36 in. Number 3; Length of each line 66 ft Total length of Laterals 211 ft.; Slope 3 in/100 ft. Diameter of pipe 36 in.; Shape ◠ halfmoon Material: concrete ☐; fiber asbestos ☒; clay ☐; other ___ Distance between lateral lines 8 ft.
3. Trench Dimensions: Depth 36 in.; Width 48 in.
4. Filter Material: Gravel. Depth of material from trench bottom 21 in. from bottom of trench to top of halfmoon
5. Distances To:
Well or Suction Line 220 ft.;
Stream — ft.; Pressure Line 185 ft.
Property Line 50 ft.
6. Percolation Rate: 60/2.25 minutes/inch

TYPICAL SKETCHES



Signature of Applicant


50'
66'
66'
66'
8'
Distribution Box
N
40'
120'
Septic Tank
adjacent Property line
60'
180'
House

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: 8-15-79

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☑ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. T11N ; Range R5E ; Section 4 ;
Block ; Lot ; Addition ALL OF SE¼ OF THE SW¼ EXCEPT THE WEST 485' AND WEST 485' S' AND EXCEPT THE EAST 555'.

Street Address 10700 W. Mill Road.

Directions on how to get to property 3 MILES NORTH OF MALCOLM ON N55C AND ½ MILE EAST ON W. MILL RD.

Location of well east of house - vicinity of rock garden.

Where is tap: Inside ☐ Outside ☒ Orange pump east of house.

	NAME	ADDRESS	PHONE
Present Owner:	THOMAS SUNDLING		
Tenant:			
Lending Agency:	FIRST FEDERAL	135 N Cotner Gail Forbes	475-0521

(Do not write below double lines)

Health Department: Date Received 8-15-79
Received $45.00 Check ☒ Cash ☐
Site Visits: Date 8-20-79 by DM
Date ____ by ____
Date ____ by ____

Karla C. Clem
Signature of Applicant
3910 South St.
Address
Lincoln NE 68506

PRELIMINARY STATUS -- DATE 8-20-79

Water System:
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☒ Provisional Approval ☐
Disapproved ☐

Corrections Required or Reasons for Disapproval ____

☐ See Attached Letter.

FINAL APPROVAL -- DATE 8-22-79

Water System ☒ . Sewage Disposal System ☒ . BY Ron Morgan

Form Number 20215-0878