



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. 98380187001

Issued 10/19/98

Expires 04/19/99

Revenue Code 3157

Establishment

JAMES J MALY
T10N R8E SEC 32
THE WHEATLANDS BLK 5 LOT 1
2501 S 122 ST-WALTON

FEES: \$150.00

Permittee

JAMES J MALY
6305 RAINIER CT
LINCOLN NE 68510-5050

TOTAL \$150.00

Issued By *Carol Boyd*
Health Director
Lincoln-Lancaster County Health Department

008204

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:

983801870

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 2501 So 122 City Walton NE, Zip 68461
(no rural route)

Legal Description 32 10N 8E Subdivision Wheatland Addition 5 Block 1 Lot 1
1/4 1/4 Section Township Range

Geographical Location (if known): Longitude _____ Latitude _____

☒ Check if system mail address is not the same as the owner's address Please use contractor address

B. Owner

Name Dr. James Maly Signature James Maly MD

Address 6305 Rainer Ct. City/State/Zip Lincoln NE 68510

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

C. Contractor

Name Steve Hall Company Name Steve Hall Construction

Address 16550 So 120 City/State/Zip Bennet NE 68317

☐ Check if contractor designed system Work Phone 432-5201

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

Designer Name Lyle Roth Firm ESP Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 5 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 10/12/98

Date fwd 10/13/98

ACTION ☒ Approved ☐ Disapproved

Signature Verrell C. Wood

2. Supt. Bldg. Insp. or Village Clerk

Date rec'd 10/13/98

Date fwd 10/13/98

ACTION ☒ Approved ☐ Disapproved

Signature Ray Spruiell

3. City or County Engineer

4-14-99, 3 beds, sewer line & tank.

Date rec'd 10-13-98

Date fwd 10-13-98

ACTION ☒ Approved ☐ Disapproved

Signature Bennett

Installation Final Written Approval

By Jim Bare Experimental system

Date 8-6-99

Business Office Use Only

Date Rec'd 10/12/98

Amt Paid 150.00

Rec'd By 10

Cash/Check No. 4613

(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: 471-7800

B

FILE NO. 983801870

Location: Township 10; Range 8; Section & $\frac{1}{2}$ Section 32.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach
Soil Type: She Sheet C with sketch of property).

Soil Type: Silty Clay ☒; Silty Clay Loam ☐; Sandy Loam ☐; Silt Loam ☐; Clay Loam ☐.

Dates of Tests: 3-16 to 3-11 1995. Weather: Precip. 0 Temp. 40

Wynona soil also
on same lot.

Lot 1- Block 5

OWNER: _____

Address: _____

PERCOLATION TEST DATA TABLE

PERCOLATION TEST DATA TABLE													
a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
Hold No.	Hole Depth (in.)	Pre-Saturation Period				Percolation Readings					Elapsed Time (Min.)	Results	
		Start		End		Start		End				Water Level Drop (in.)	Percolation Rates (Min./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.)			
1	36	3/10	4:00	3/11	2:00	3/11	5:30	26 3/4	6:00	27	30	3/4	40
2			P		P			27 1/8	P	27 7/8		3/4	40
3								26 3/4		27 3/8		5/8	48
4								28		29 1/2		1 1/2	
5								24 3/8		25 3/8		1	30
6								26 1/2		27 1/4		3/4	40
7								30		30 5/8		5/4	48
#4 consistent with others, 1 1/2 - 1 3/4 every 30 min but not consistent with the other holes - did not include in avg.													

B-1 J. T. ... Bro
Signature of Person Conducting Test

Address 47201 St. 72

Brad Southwick
Test : 4.30 = 7/20

Phone 475-2462

Sum of Percolation Rates: 246
 Wick Average of Rates: 41
 Mean of Rates:

(Do not write below this line)

REVIEWING ACTION

Remarks:

Soil Type (SCS):

Date: _____

Approved Percolation Rate (a)

A. _____ min./inch

B. _____ min./inch

C. _____ min./inch

Signature of Reviewing Official



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

C

Permit Number:

983801870

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.

Indicate North with Arrow

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

A. System Location (Indicate correct number and street)

Address (no rural route) _____ City _____ NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 180 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☐ Trench ☐ Bed ☒ Other E T A

Total Square Feet of Field Required: 1943 sq. ft.

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

Capacity of Septic Tank 1750 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals _____ ft. Number of Trenches 4 Trench Width 5

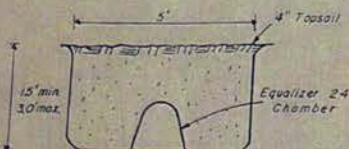
D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	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 ☐	☐

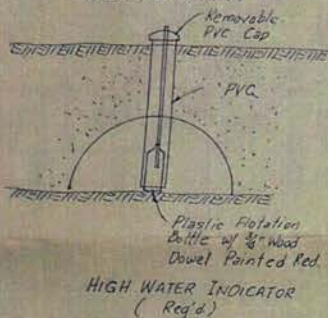
E. Required Signatures

Home Building Contractor Steve Hall Date 10-12-98

Installer Blaine Walker (Pres) Date 10-12-98



SECTION A-A



HIGH WATER INDICATOR (Req'd)

OWNER
ADDRESS
LEGAL

Steve Hall
2301 So. 122nd Street
Lot 1, Block 5 Wheatland Addition
SW 1/4, Section 32, T. 10 N., R. 6 E.

SIZE OF HOUSE
DESIGN FLOW
PERCOLATION RATE
EVAPORATION LOSS
ABSORPTION RATE

5 Bedrooms
5 BR x 150 gal/day/BR = 750 gal/day
150 minutes/inch
6" per year = 0.0135 gal/sq. ft./day
Allowable Absorption based on Formula:
 $Q = 5 \cdot t$
1 = Percolation Rate

TOTAL LOSSES

For $t = 150$ min., $Q = 0.375$ gal/day
 $0.0135 + 0.375 = 0.388$ gal/sq. ft./day

REQUIRED AREA

750 gal/day = $0.388 = 1943$ sq. ft.
 1943 sq. ft. x $25\% = 486$ sq. ft. Infiltrator Base Area
 486 sq. ft. x 10.41 sq. ft. per chamber = 46.7 chambers

Use 4 trenches with 12 Equalizer 24 Infiltrator Chambers per trench

Each Trench to be 5' wide x 105' long

46 Equalizer 24 Chambers @ 33.3 gal = 1598 gal
2.04 gal/cu ft of Wicking Sand x 5036 cu ft = $10,274$
Total Storage Volume = $11,872$

NOTE: (The Contractor shall excavate an inspection pit to confirm that a 4" separation can be maintained from any seasonal water table (perched or otherwise) or impermeable clay or rock layer)

It is recommended that water meter be installed on the water supply so that the owner can monitor their water use and ensure that not more than 1050 gallons per day are being used.

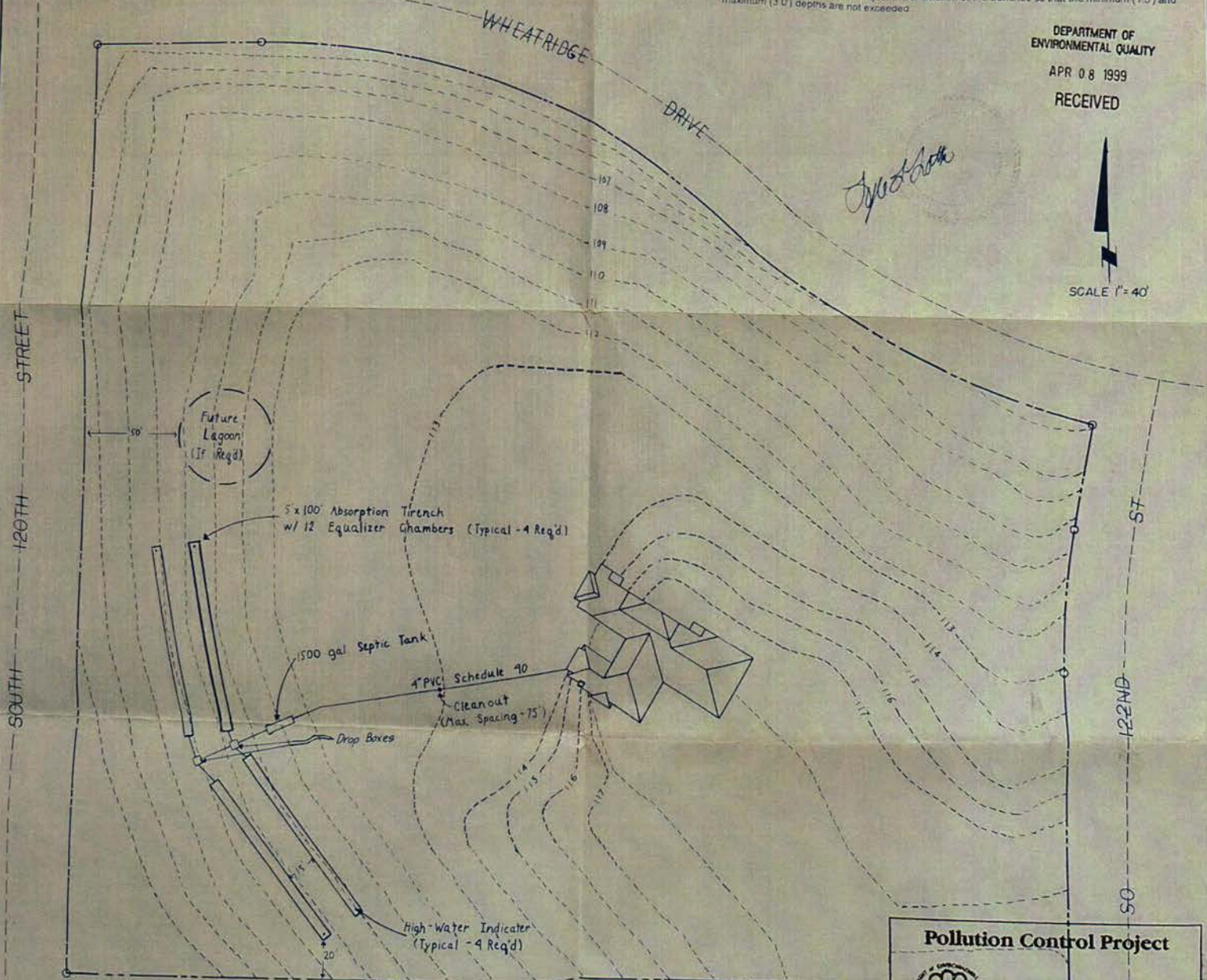
It may be necessary to adjust the orientation of the trenches so that the minimum (1.5') and maximum (3.0') depths are not exceeded.

DEPARTMENT OF
ENVIRONMENTAL QUALITY

APR 08 1999

RECEIVED

SCALE 1" = 40'



Pollution Control Project



APPROVED

April 8, 1999 [Signature]

STEVE HALL

2301 So. 122nd STREET

EVAPORATION/TRANSPIRATION/ABSORPTION SYSTEM

E-S-P

Scale: 1" = 40'

Date: MARCH, 1999

Drwg. No.

9585



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

D

Permit Number:

983801870

Sewage Disposal System As Built Plans & Specifications

Date 4-26-99

System Location (Indicate correct number and street)

Address 2501 S. 122nd City _____ NE, Zip _____
(no rural route)

A. Building Sewer

- Material: 4" PVC EL 160
Diameter: 4" in.
- Distance above basement floor: 36 in.
or distance below basement floor: 0 in.
- Distance between dwelling and septic tank: 150 ft.
- Number of clean-outs: 1
- Distances to: well or suction line 100+ ft.
stream _____ ft.
pressure line _____ ft.
property line 20+ ft.

B. Septic Tank

- Material: Concrete
Number of compartments: 3
- Capacity: 1750 gal.
- Factory built: ☒ Yes ☐ No
- Manholes: Over inlet, diameter _____ in.
Over outlet, diameter _____ in.
Riser: ☒ above ☐ below grade 6 in.
- Inlet: ☒ baffle ☐ tee
- Outlet: ☒ baffle ☐ tee
- Depth to top of tank, below unfinished grade: 24 in.
- Distances to: Well or suction line 100+ ft.
Stream 100+ ft.
Pressure line 100+ ft.
Property line 100+ ft.

C. Distribution Box

- Material: Plastic
Number available outlets: 5
- Factory built: ☒ Yes ☐ No
- Distance from septic tank: 30' ft.

D. Absorption Field

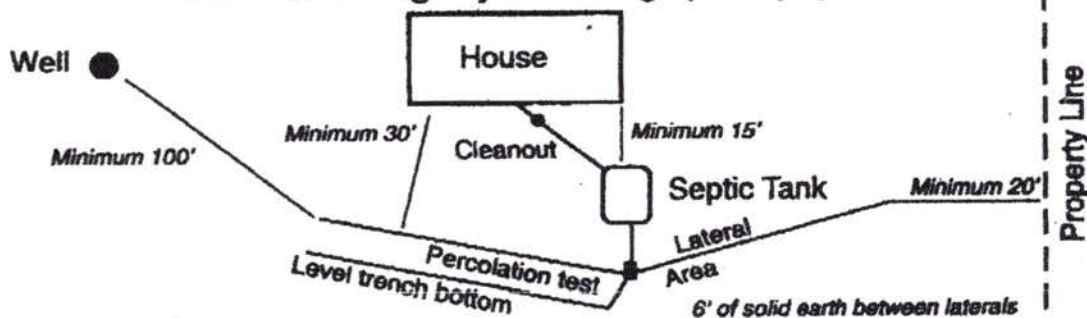
(Provide as-built drawings on back of this form)

- Type: ☐ Half round ☐ Perforated pipe
Diameter of half round: _____
or perforated pipe: _____
Material: ☐ fiberglass ☐ plastic ☐ concrete
☒ other Infiltrator
- Lateral lines: Number 4 x 5'
Length of each line: 100 ft. 100 ft.
100 ft. 100 ft. _____ ft.
- Trench dimensions: Width 5 ft.
Slope 6 in/100 ft.
Average depth 30 in.
- Filter material: Whicking Sand
Depth of material 30 in.
- 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)

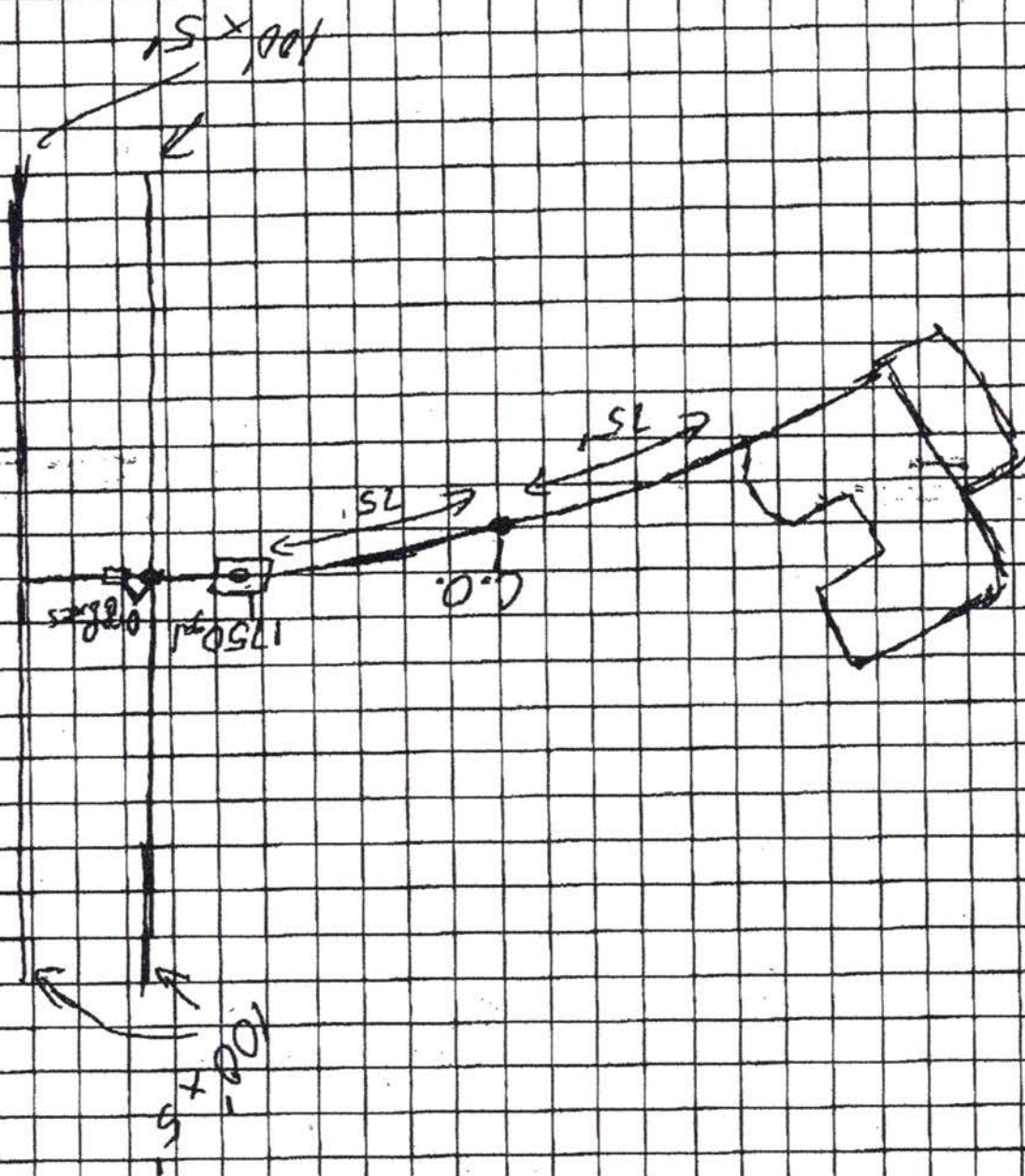


As Built Drawing

2501 S. 122ND SE



Indicate North
with Arrow



Approximate Scale: _____ ft. = _____ grid lines

2501 S. 122 12 SE

32



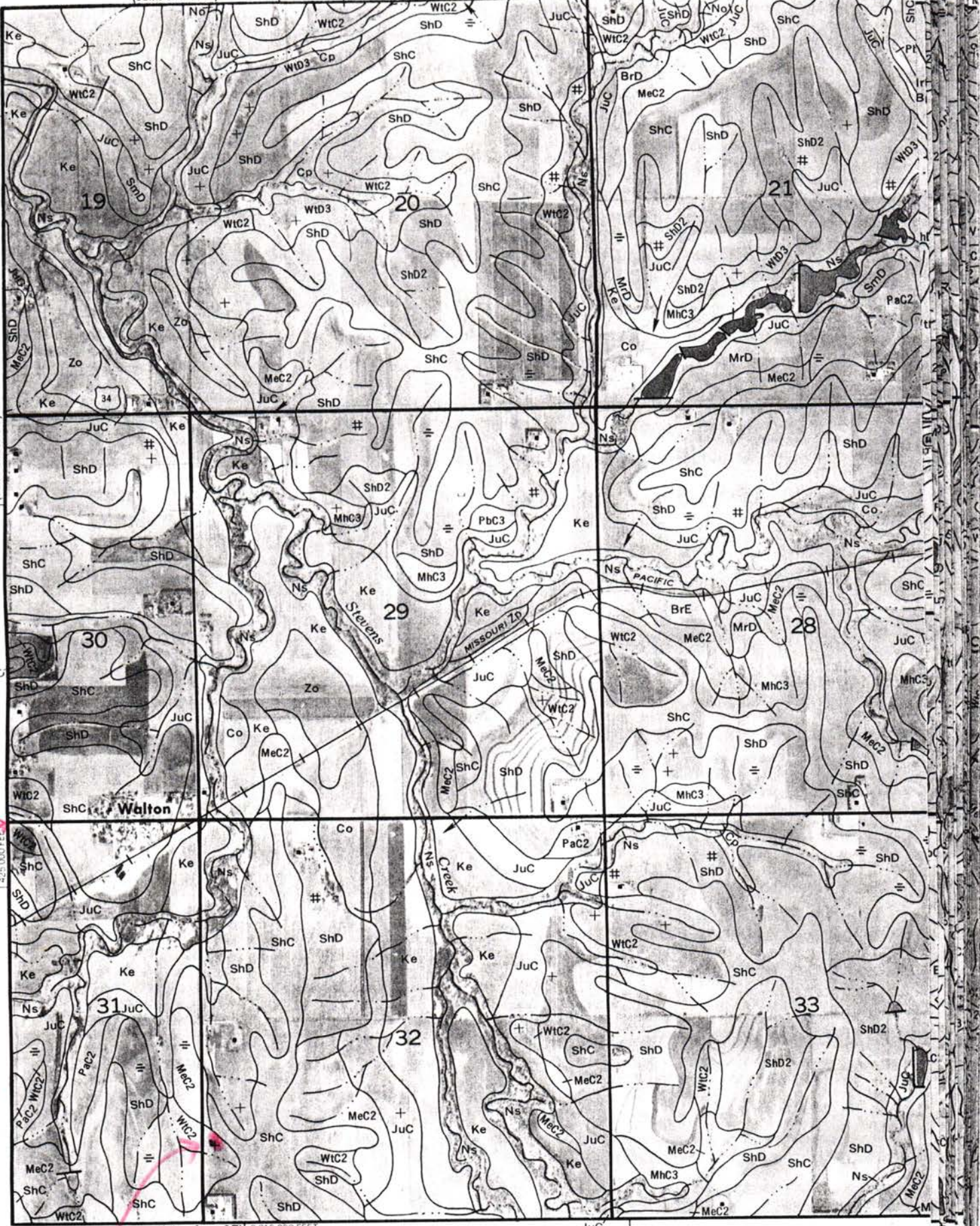
1 Mile
5,000 Feet

Scale 1:20,000
0 1,000 2,000 3,000 4,000 5,000
1:425,000 FEET

Ast.

(Joins sheet 26)

ShD



(Joins sheet 37) 2,815,000 FEET

New system
5,120th

