LLCHD HS000049

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

**A**

Permit Number
HS000049

# Onsite Wastewater Treatment System Request for Site Clearance and Permit

**Include Form B and C. Submit correct fee with this Application**

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

**PLEASE PRINT OR TYPE**

## A. Onsite System Location

Address 3741 Oakview Blvd (no rural route) City Raymond, NE Zip 68428

Legal Description NW 5 11 6 Oak Valley Estates 2 4
1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

Geographical Location (if known): Longitude: _____ Latitude: _____

☐ Check if system mail address is not the same as the owner's address Total Acres: 3.4

## B. Owner

Name Ben & Anita Higgins Signature Ben Higgins

Address 915 Krupp Dr City/State/Zip Papillion, NE 68046

☐ Check if owner designed system Home Phone 402-689-8070 Work Phone 402-441-7589

## C. Contractor

Name: Owner 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 Well Permit Applied for ☐ Yes ☐ No ☒ Not Applicable

***DO NOT WRITE BELOW THIS LINE***

**Approval Process** ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

**1. Health Department**
Site visits * Moved Soil on property
Date rec'd 11/23/07
Date frwd 11/24/07
**ACTION** ☒ Approved ☐ Disapproved
Signature _____

**2. Supt. Bldg. Insp. or Village Clerk**
Comments Everett Hansen
Date rec'd _____
Date frwd 11-20-07
**ACTION** ☒ Approved ☐ Disapproved
Signature Everett Hansen

**3. City or County Engineer**
Comments _____
Date rec'd _____
Date frwd _____
**ACTION** ☐ Approved ☐ Disapproved
Signature _____

**Installation Final Written Approval**
By _____
Date _____

***Business Office Use Only***
Date Received 11/21/07 Amount Paid 305
Received By SM Cash/Check No. 6513

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 5-07

12-3-2007 12:38:17

B

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

Permit Number: HS000049

# Sewage Disposal System
## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

**System Location** (Indicate correct number and street)

Address 3741 Oak View Blvd (no rural route) City Raymond NE, Zip 68428

OAK VALLEY ESTATES Block 2 Lot 4 35-T11-R6 NW 1/4

Owner Ben Higgins Address 915 Knapp Dr Papillion, NE 68046

Soil Type (SCS): SuD2 Steinauer Percolation Rate: 60 min./inch

Date of Tests 3-17-07 to 3-18-07 Weather: Precipitation 0 Temperature 45°

## 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 | 32 | 3-17 | 8:00a | 3-17 | 12:00p | 3-18 | 2:00p | 6 | 3-18 | 6:00p | 30 | 1 1/4 | 24 |
| 2 | 28 | " | " | " | " | " | " | " | " | " | " | 1/2 | 60 |
| 3 | 30 | " | " | " | " | " | " | " | " | " | " | 1/2 | 60 |
| 4 | 32 | " | " | " | " | " | " | " | " | " | " | 5/8 | 48 |
| 5 | 36 | " | " | " | " | " | " | " | " | " | " | 1/2 | 60 |
| 6 | 35 | " | " | " | " | " | " | " | " | " | " | 2 1/4 | 13 |
| | | | | | | " | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Sum of Percolation Rates: 265/44

Average of Rates:

Rate Used for Calculation: 60 (20mpi Variance)

**Person Conducting Percolation Tests**

Name: Terri Jakoubek, Raymond Contracting, Inc

Phone: 402-783-2663 or 402-890-3878

Address 13800 NW 70th St

Raymond, NE 68428 # C1198

DO NOT WRITE BELOW THIS LINE

**Reviewing Action**

Remarks

Signature of Reviewing Official Date

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

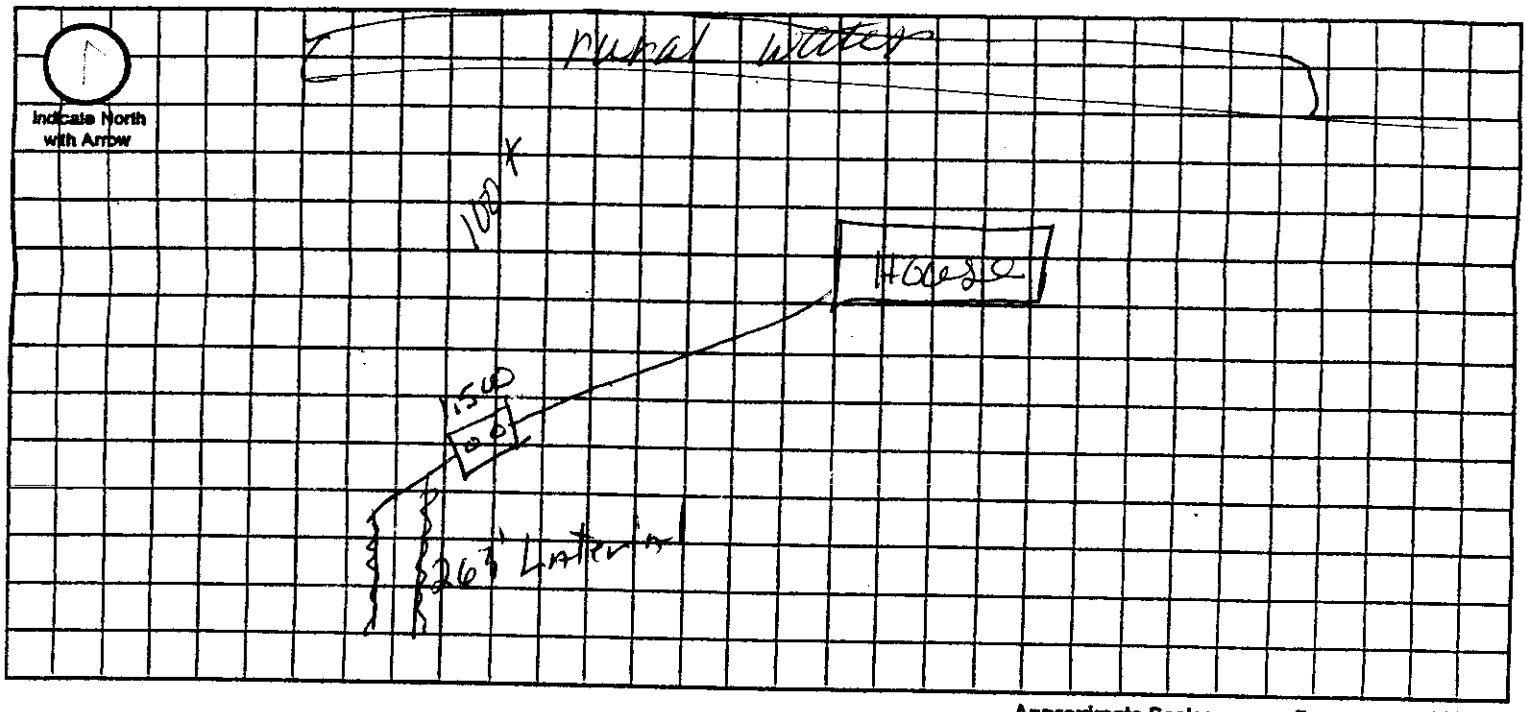
C

Permit Number: HS000049

# 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) 3741 Oakview Blvd City Brymad 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 60 (min. per inch) Soil Type: Steinauer (SU02) Land Slope: _____ %

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

Total Square Feet of Field Required: 1,050 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: Infiltrator Quick 4

Capacity of Septic Tank 1,500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 243 ft. Number of Trenches 2 Trench Width 40"

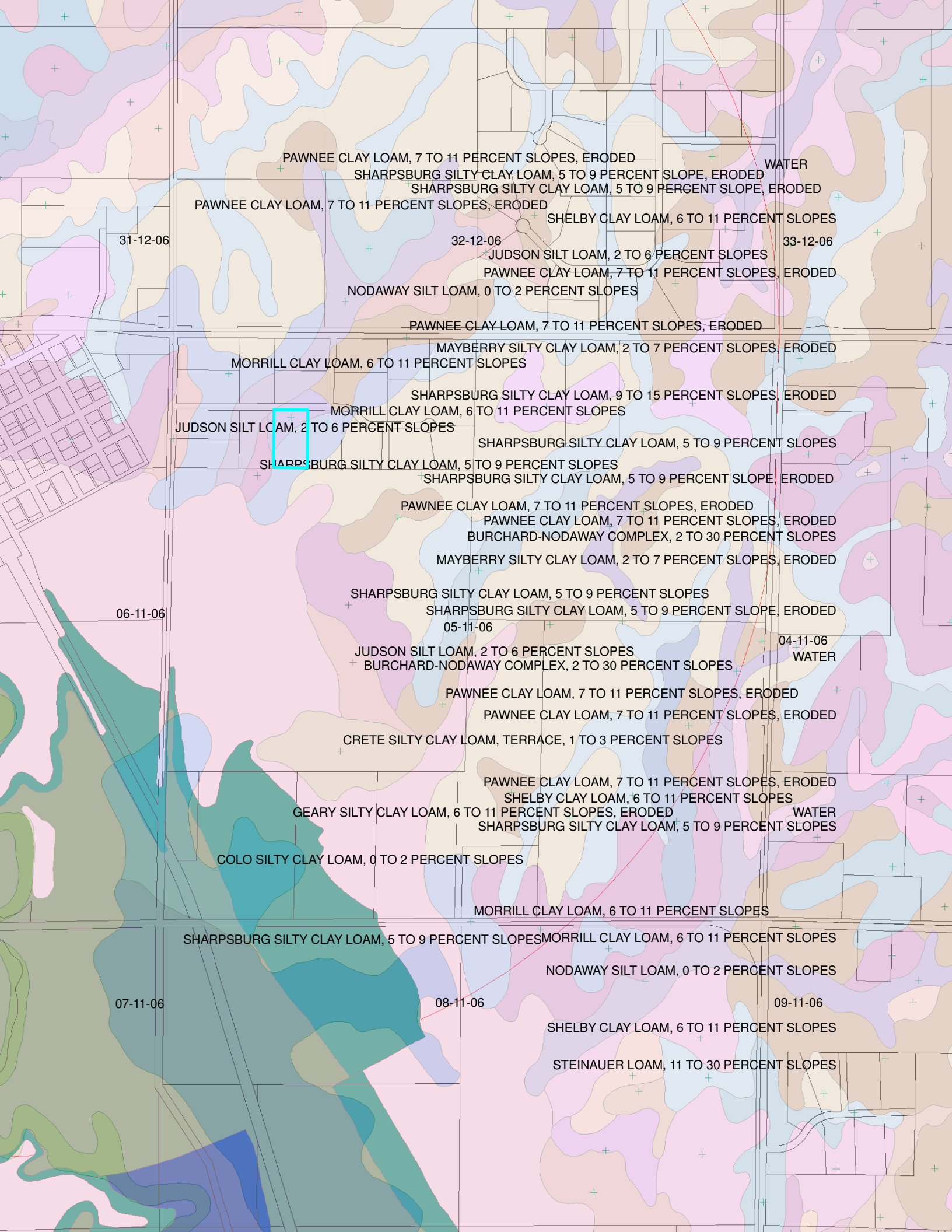
### D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

| 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~~ Ben Higgins by Terri Johnson Date 11-20-07

Installer _____ Date 11-20-07


PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
WATER
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
31-12-06
32-12-06
33-12-06
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 9 TO 15 PERCENT SLOPES, ERODED
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
BURCHARD-NODAWAY COMPLEX, 2 TO 30 PERCENT SLOPES
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
06-11-06
05-11-06
04-11-06
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
WATER
BURCHARD-NODAWAY COMPLEX, 2 TO 30 PERCENT SLOPES
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
CRETE SILTY CLAY LOAM, TERRACE, 1 TO 3 PERCENT SLOPES
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
GEARY SILTY CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
WATER
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
COLO SILTY CLAY LOAM, 0 TO 2 PERCENT SLOPES
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
07-11-06
08-11-06
09-11-06
SHELBY CLAY LOAM, 6 TO 11 PERCENT SLOPES
STEINAUER LOAM, 11 TO 30 PERCENT SLOPES

**Lincoln-Lancaster County Health Department**
**Environmental Public Health Division (402) 441-8027**
**3140 N Street Lincoln, NE 68510-1514**

**ON-SITE WASTE WATER SYSTEM**
**CONSTRUCTION - INSTALLATION PERMIT**

**No. HS000049**

| | |
|---|---|
| **System Type:** | STANDARD |
| **Situs:** | 3741 Oakview Blvd. |
| **Legal Description:** | T11N-R06E-S05-NW-OAK VALLEY ESTATES-BI |
| **Owner:** | BEN & ANITA HIGGINS<br>915 KNAPP DR<br>PAPILLION NE<br>68046 |

| | |
|---|---|
| Permit Fee: | $305.00 |
| Variance Fee: | $0.00 |
| Extension Fee: | $0.00 |
| Total Fees: | $305.00 |
| Issued: | 11/29/2007 |
| Expires: | 11/28/2008 |

Bruce D. Dart, PhD, Health Director

On-site Waste System Permit Holder:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Bruce D. Dart, PhD
Health Director

BEN & ANITA HIGGINS
915 KNAPP DR
PAPILLION NE 68046