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. HS000065

System Type:	LAGOON
Situs:	9988 W PELLA RD RUR
Legal Description:	T07N-R05E-S22-Lot 1
Owner:	

Permit Fee:	$305.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$305.00

Issued:	01/02/2009
Expires:	01/02/2010

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

LEONARD HARPER
PO BOX 15
ADAMS NE 68301

LLCHD HS000065

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

A

Permit Number HS000065

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 ~~SW 14th & Wittstruck~~ 100th & Pella Rd (no rural route) City Hallam, NE Zip

Legal Description 22 (1/4) 7 (1/4) 5 (Section) (Township) (Range) (Subdivison) (Addition) (Block) 1 (Lot)

Geographical Location (if known): Longitude: Latitude:

☐ Check if system mail address is not the same as the owner's address Total Acres: 1.75

B. Owner

Name Signature

Address City/State/Zip

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name: 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 EDWARD HARPER Firm HARPER WELL & PLUMBING Work Phone

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 1 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
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 3/12/08
Date frwd 3/12/08
ACTION ☒ Approved ☐ Disapproved
Signature

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 2/27/08 Amount Paid 305.00
Received By JR Cash/Check No. 4551

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

Form A Updated: 5-07

Harper Well #4851 305

3-12-2008 15:15:48

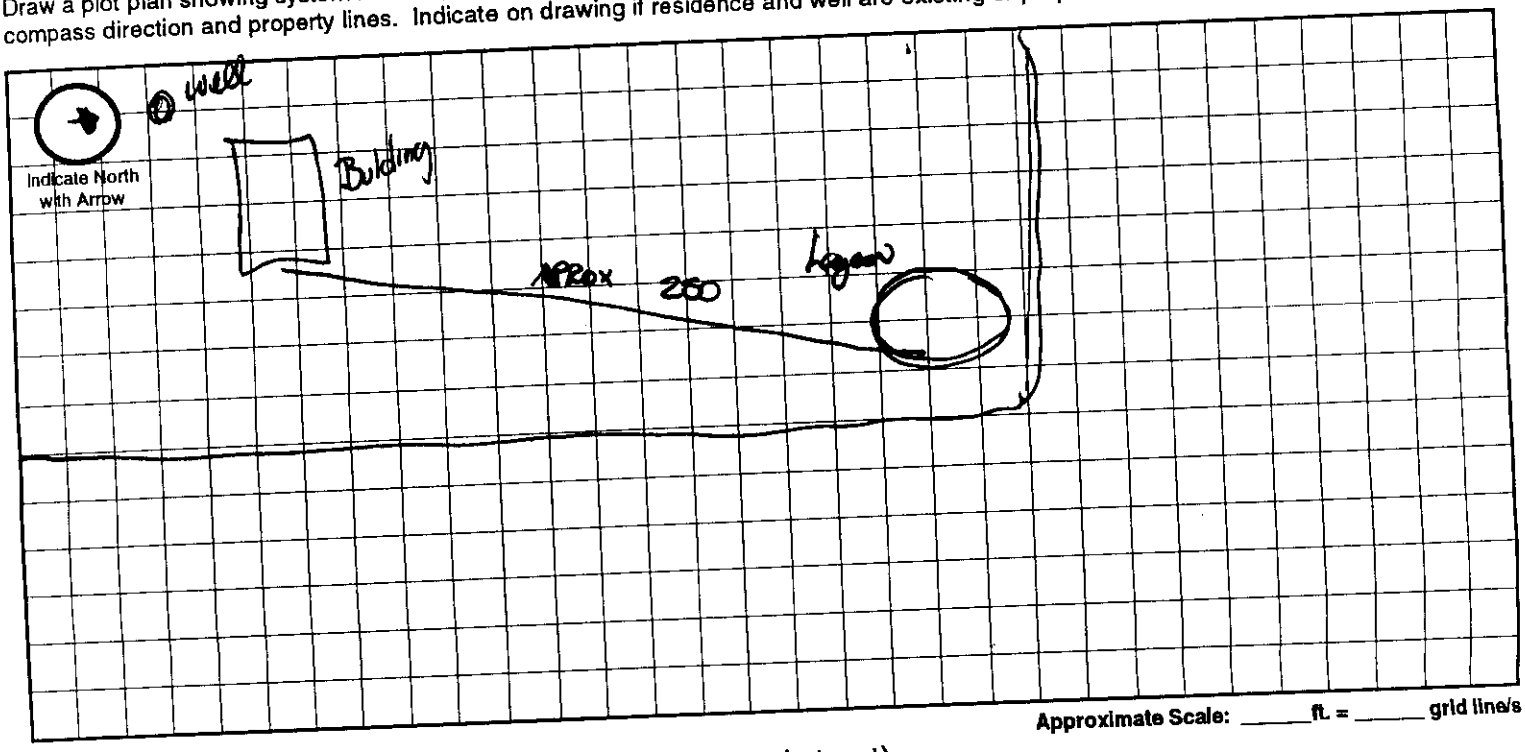
C

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

Permit Number: H S000065

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) 360 14th Litchfield 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 _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

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

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

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

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

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

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

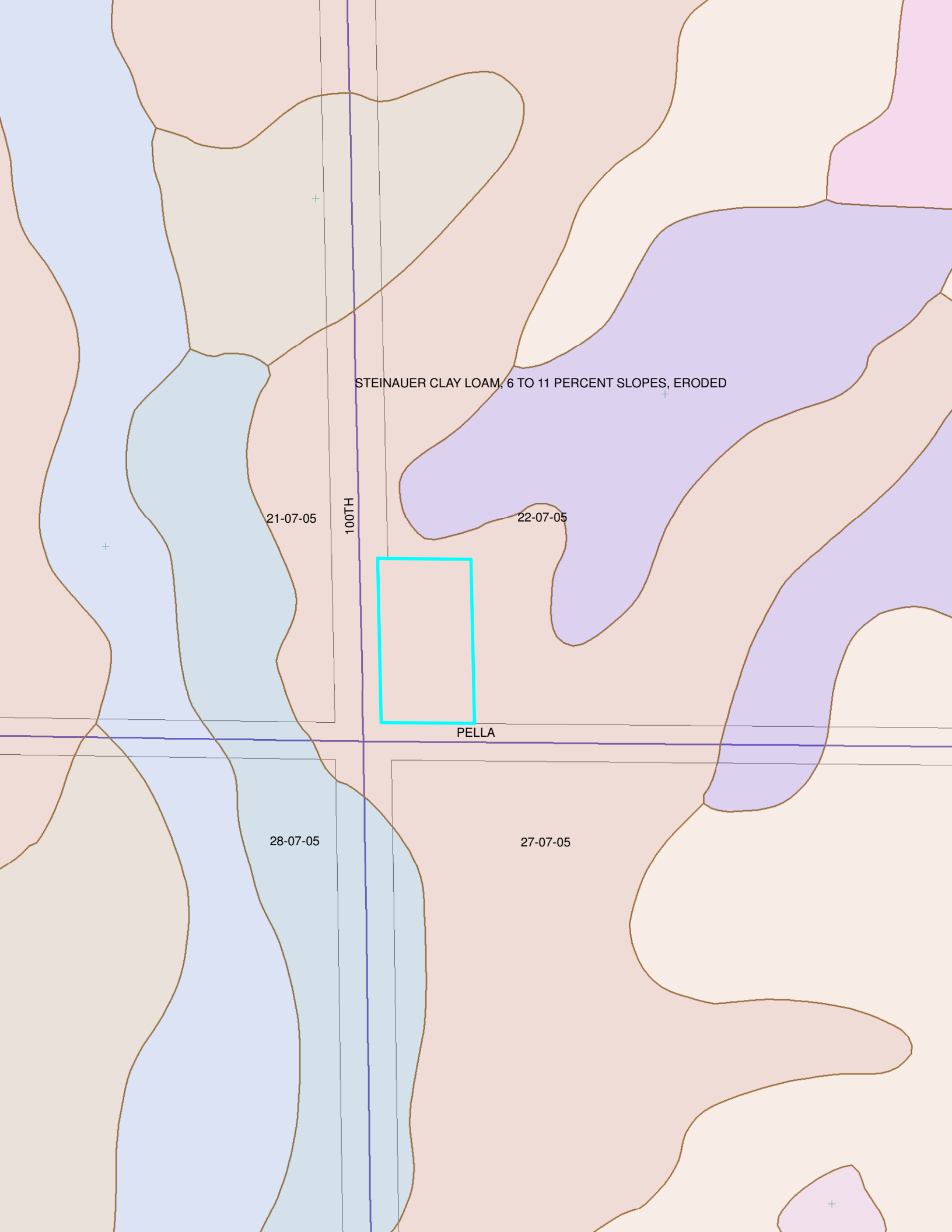
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor _____ Date _____

Installer _____ Date 2-2-05

FORM 23-102 10-96


STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
100TH
21-07-05
22-07-05
PELLA
28-07-05
27-07-05

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

SCANNED

A

Permit Number
H5000065

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 ~~SW 70th & Wedgewood~~ 100th & Pella Rd City Hallam, NE Zip
(no rural route)

Legal Description 22 7 5 1
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: 1.75

B. Owner

Name Signature

Address City/State/Zip

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name: Doug Southwick Company Name Southwick Sewer & Drain

Address PO Box 191 City/State/Zip Sycamore, NE 68372

☐ Check if contractor designed system Work Phone 430-2166

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

Designer Name EDWARD HARPER Firm HARPER WELL & PLUMBING Work Phone

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 1 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 3/16/08 D.S.
Date rec'd 5/11/08
Date frwd 5/11/08
ACTION ☑ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 3/12/08
Date frwd 3/12/08
ACTION ☑ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☑ Approved ☐ Disapproved
Signature See attached

3/16 line + lagoon need fence D.S

Installation Final Written Approval
By Doug Mod
Date 6/29/09

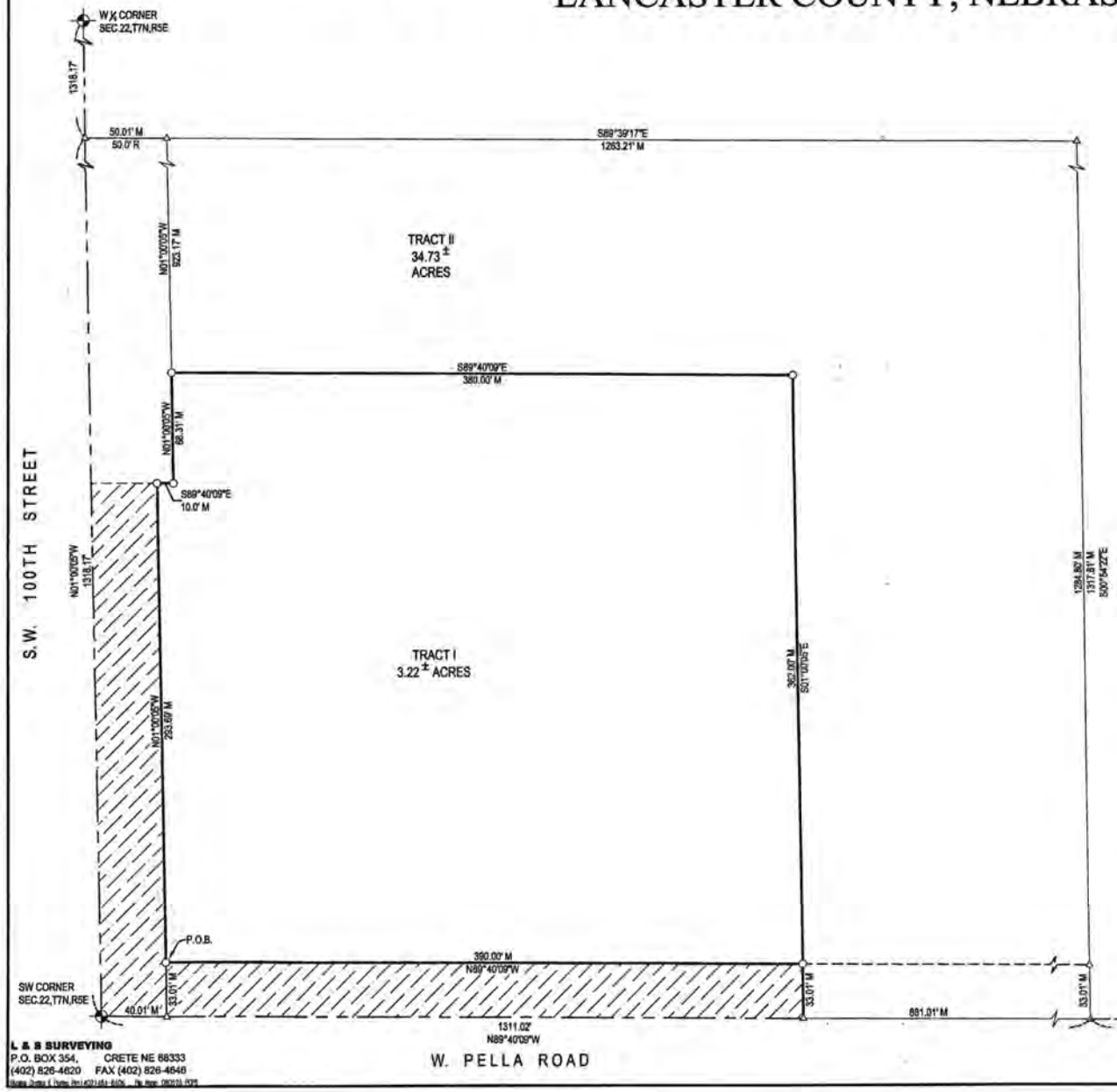
Business Office Use Only
Date Received 2/27/08 Amount Paid 305.00
Received By JR Cash/Check No. 4551

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

Form A Updated: 5-07

Harper Well #4851 305.00

ADMINISTRATIVE SUBDIVISION
IN THE
SW¼ OF THE SW¼ OF SECTION 22, T7N, R5E OF THE 6TH P.M., LANCASTER COUNTY, NEBRASKA



L & S SURVEYING
P.O. BOX 354, CRETE NE 68333
(402) 826-4620 FAX (402) 826-4646

RECEIVED
JUN - 9 2008

N

Scale: 1" = 30'

CORNER TIES - SECTION 22, T7N, R5E

SW CORNER - FOUND LCSM 2" ALUMINUM CAP.

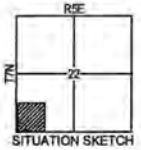
46.39' NE TO TOP CENTER OF CYCLONE FENCE END POST.
58.68' SW TO A NAIL IN DISK IN THE NW FACE OF A POWER POLE
57.42' SE TO A P.K. NAIL IN TOP OF EAST END OF C.M.P.

W½ CORNER - FOUND LCSM 2" ALUMINUM CAP.

53.45' WEST TO A NAIL IN DISK IN THE NORTH FACE OF END POST.
43.50' NW TO A P.K. NAIL IN TOP OF NORTH END C.M.P.
50.00' EAST TO A ⅝" IRON BAR.

S¼ CORNER - FOUND LCSM 2" ALUMINUM CAP.

37.78' NORTH TO A NAIL IN DISK IN THE EAST FACE OF CORNER POST.
34.65' NE TO A NAIL IN DISK IN THE EAST FACE OF FENCE POST.
61.26' SW TO A NAIL IN DISK IN THE NW FACE OF A POWER POLE.



SITUATION SKETCH

Legend
- Corners Found
- Corners Found
- Corners Set (5/8" Rebar W/1.25 Cap)
- Survey Marker
- Temporary Point
- R Record Distance
- M Monument Distance
- W.C. Witness Corner
- Fence

HATCH KEY

TO BE DEEDED TO COUNTY

TOTAL LAND INVOLVED

LOTS 1 AND 4 OF IRREGULAR TRACTS LOCATED IN THE SW ¼ OF THE SW¼ IN SECTION 22, T7N, R5E OF THE 6TH P.M., LANCASTER COUNTY, NEBRASKA.

TRACT I

COMMENCING AT THE SW CORNER OF SAID SW¼SW¼; THENCE S89°40'09"E (ASSUMED BEARING) ON THE SOUTH LINE OF SAID SW¼SW¼, 40.01 FEET; THENCE N01°00'05"W PARALLEL WITH THE WEST LINE OF SAID SW¼SW¼, 33.01 FEET TO THE POINT OF BEGINNING; THENCE CONTINUING N01°00'05"W PARALLEL WITH THE WEST LINE OF SAID SW¼SW¼, 293.69 FEET; THENCE S89°40'09"E PARALLEL WITH THE SOUTH LINE OF SAID SW¼SW¼, 10.00 FEET TO THE EASTERLY R.O.W. LINE OF SW 100TH STREET; THENCE N01°00'05"W ON SAID EASTERLY R.O.W. LINE, 68.31 FEET; THENCE S89°40'09"E PARALLEL WITH THE SOUTH LINE OF SAID SW¼SW¼, 380.00 FEET; THENCE S01°00'05"E PARALLEL WITH THE WEST LINE OF SAID SW¼SW¼, 362.00 FEET; THENCE N89°40'09"W ON A LINE 33.0 FEET NORTH OF AND PARALLEL WITH THE SOUTH LINE OF SAID SW¼SW¼, 390.00 FEET TO THE POINT OF BEGINNING. CONTAINING 3.22 ACRES MORE OR LESS.

TRACT II

THE REMAINDER OF LOT 4 OF IRREGULAR TRACTS IN THE SW¼ OF THE SW¼ OF SECTION 22, T7N, R5E OF THE 6TH P.M., LANCASTER COUNTY, NEBRASKA, CONTAINING 34.73 ACRES MORE OR LESS.

SURVEYOR'S CERTIFICATE

I, Leslie J. Siedschlag, a Registered Land Surveyor in the State of Nebraska, hereby certify that this survey was made under my direct supervision on May 28, 2008 and that all dimensions shown are in feet and decimals of a foot and correct to the best of my knowledge and belief.

NEBRASKA REGISTERED LS-469 LAND SURVEYOR LESLIE J. SIEDSCHLAG

Leslie J. Siedschlag, Nebraska L.S. No. 469

Date of Completion: June 4, 2008

SHEET 1 OF 1