Nate C Hartman/Notes
04/23/2008 10:54 AM

To Richard D Faubel/Notes@Notes
cc Mark A Kenne/Notes@Notes, John J Chess/Notes@Notes, Diana G Lane/Notes@Notes
bcc
Subject Permits`

Richard:

I am sending you 2 checks. Mark is working on a way to receipt them. The checks are both for $135 each for the difference in fees from a standard to a non-standard system. Please make a note that check number 1690 is going to be applied to permit number HS000078 and check number 1692 is going to be applied to permit HS000025, I will keep record of the checks up here.

Thanks!!

Nate Hartman C.P.
Environmental Health Specialist I
NPDES Program Specialist
Lincoln-Lancaster County Health Department
(402)-441-8643

LLCHD HS000078

HES640 HEALTH ENVIRONMENT SYSTI UPDATE 03/20/08

CASE NUM 0838033 (01 TYPE 38 SEWAGE INSTALLATION HS000078

COMMENT: LAGOON-PERMIT EXTENSION .
: .

ISSUED TO 071633 CRETE LUMBER & FARM SU
ESTABLSHMNT: T8N R5E SEC 17
LOC. TYP L ELSNER LAKESIDE ESTS BLK 1 LOT 8
LOC. CR# 5945 (3.02 ACRES)CRETE

LICENSEE & : . ATTN RON DITTMER .
MAILING : . CRETE LUMBER & FARM SUPPLY .
ADDRESS - : . BOX 283 .
BLANK IF : . CRETE NE 68333 .
SAME AS ISS:

ISSUE DAT 03270 EXPIRES 09270 TOTAL FEES 80.00
PERMIT FE 80.00 ACC 00315 OTHER FEE .00 ACC
CLEAR=MASTER MEN PF11: ALL PERMITS FOR C/ REPRINT? Y N

TRANSACTION COMPLETE BUSINESS OWNER ADDRESS NOT F

4-23-2008 12:54:59

LLCHD HS000078

Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

009905

Permit: SEWAGE INSTALLATION
LAGOON

Permit #: 07380331601

Issued: 03/27/07
Expires: 03/27/08
Revenue Code: 3157

Establishment:
CRETE LUMBER & FARM SUPPLY
T8N R5E SEC 17
ELSNER LAKESIDE ESTS BLK 1 LOT 8
(3.02 ACRES) CRETE

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

FEES: $290.00

Permittee:
CRETE LUMBER & FARM SUPPLY
BOX 283
CRETE NE 68333

COPY

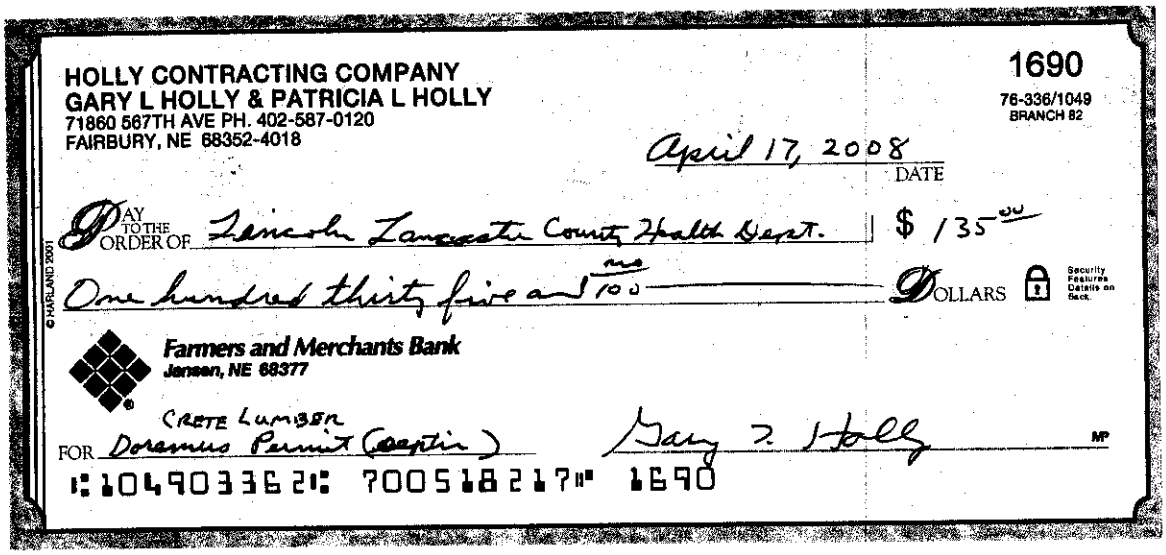
TOTAL: $290.00

Bruce D. Dart

Bruce D. Dart, Health Director

IFM COPY

4-23-2008 12:56:37



HOLLY CONTRACTING COMPANY
GARY L HOLLY & PATRICIA L HOLLY
71860 567TH AVE PH. 402-587-0120
FAIRBURY, NE 68352-4018

1690
76-336/1049
BRANCH 82

April 17, 2008
DATE

PAY TO THE ORDER OF Lincoln Lancaster County Health Dept. $ 135.00

One hundred thirty five and no/100 DOLLARS

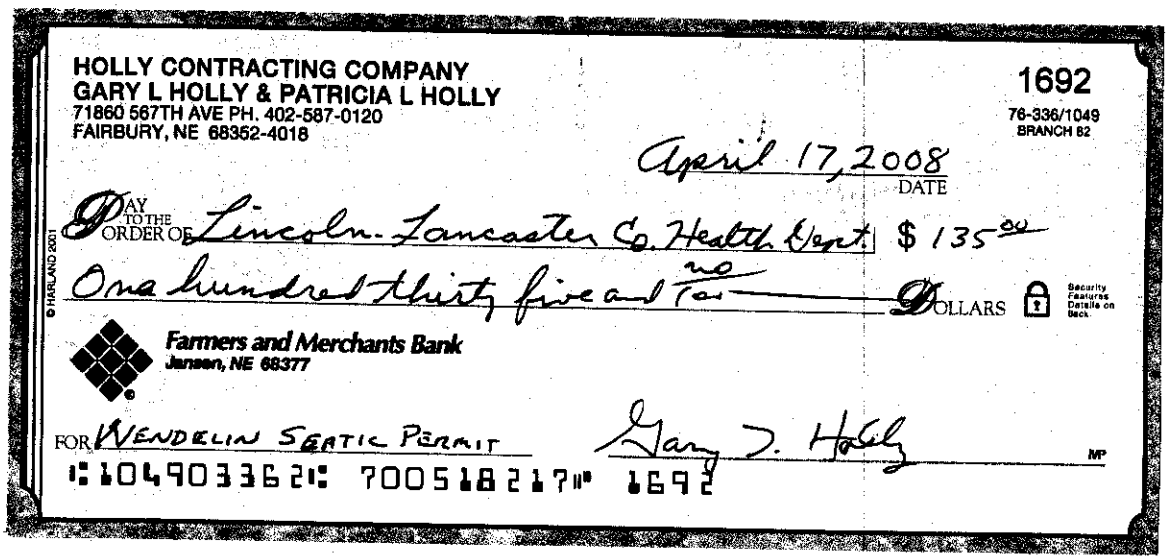
Security Features Details on Back

Farmers and Merchants Bank
Jansen, NE 68377

FOR Crete Lumber Doaremus Permit (Coaptin) Gary J. Holly MP

⑆104903362⑆ 7005182179 1690

© HARLAND 2001



HOLLY CONTRACTING COMPANY
GARY L HOLLY & PATRICIA L HOLLY
71860 567TH AVE PH. 402-587-0120
FAIRBURY, NE 68352-4018

1692
76-336/1049
BRANCH 82

April 17, 2008
DATE

PAY TO THE ORDER OF Lincoln-Lancaster Co. Health Dept. $ 135.00

One hundred thirty five and no/100 DOLLARS

Security Features Details on Back

Farmers and Merchants Bank
Jansen, NE 68377

FOR WENDELIN SEPTIC PERMIT Gary J. Holly MP

⑆104903362⑆ 7005182179 1692

© HARLAND 2001

3/27/07 → HS 07380331601
extension 08380331601

MAR 19 2008
HS000078

CITY OF LINCOLN
NEBRASKA
MAYOR CHRIS BEUTLER
lincoln.ne.gov

Lincoln-Lancaster County
Health Department
Bruce D. Dart, Ph.D., Health Director
3140 "N" Street
Lincoln, Nebraska 68510-1514
402-441-8000
TDD 402-441-6284
fax 402-441-8323
health@lincoln.ne.gov

March 13, 2008

Certified

Ron Dittmer
Box 283
Crete, Ne 68333

Mr. Dittmer:

According to our records, you obtained an onsite wastewater construction permit for Elsner Lake Estates, Block 1, Lot 8. This permit will expire 30 days from the mailing of this letter. Failure to apply for a permit extension within this timeframe will result in having to reapply for a new onsite wastewater permit at a fee of $305.00 should you choose to continue build on this property.

If you choose to renew this permit, please se[redacted] Lincoln-Lancaster County Health Department (LLCHD) [redacted] xtension is valid for a period of 6 months.

If you do not wish to apply for the extension, please contact LLCHD so that we can maintain current record.

A copy of the initial permit application is enclosed.

If you have any questions, please contact my office.

Sincerely,

Nate Hartman
Environmental Health Specialist
Lincoln-Lancaster County Health Department
(402) 441-8643

Please post fees to HS000078

Enclosure

3-26-08
ck #10960
80

thanks

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. HS000078

System Type: NONSTAND

Situs: 15355 BOBWHITE TRL LC

Legal Description: T08N-R05E-S17-1-Lot 8

Owner:

Permit Fee:	$440.00
Variance Fee:	$0.00
Extension Fee:	$80.00
Total Fees:	$440.00

Issued: 04/23/2008
Expires: 04/23/2009

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

CRETE LUMBER AND FARM SUPPLY
BOX 283
CRETE NE 68333

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street
Lincoln, NE 68510-1514
(402) 441-8022

APPLICATION
Site Clearance and Permit for
Individual Water Well
Permit No. HS000078

INSTRUCTIONS: *REVIEW this application. Write in any missing or incorrect information in the space provided. If there are any questions, contact the Environmental Health Water Program at (402) 441-8030. Please make a photocopy for your records.*

The undersigned hereby requests approval for site celearance and a permit to construct a new water well at this location within the **LAGOON** limits of Lincoln, Nebraska:

1. Well Site Address: 15355 BOBWHITE TRL LC
2. Legal Description: Township: 08N Range: 05E Section: 17 1/4 Section:
   Subdivision: Block: 1 Lot: 8
3. Parcel ID: 0217302008000
4. Well Use: ? Domestic (Residential) ? Commercial
   ? Irrigation ? Heat Pump
   Other: ??
5. Sewage Permit Applied for: ??
6. Address has City Water connection: ?
7. Applicant:
   CRETE LUMBER AND FARM SUPPLY
   BOX 283
   CRETE NE

   68333

   Phone:
   FAX #:
   email:
8. Owner:

9. Applicant Signature ___/___/___ Date

10. Owner Signature ___/___/___ Date

Please submit Permit Fee with this request. **(Fee must be included before application is proccessed. Incomplete information will delay processing)**

Permit Fee: $0.00
Total Amount Due: **$0.00**

Make Checks Payable to LLCHD.

Legal notices for this permit are mailed to:

4-23-08 ac
#135
ck #1692
rdf

CRETE LUMBER AND FARM SUPPLY
BOX 283
CRETE NE 68333

APD Number: **HS000078**

FOR OFFICE USE ONLY
Rec'd By rdf Date 3/19/08
Amt $ 80.00 Check # 10960
Posted By rdf Date 3/26/08
HOLD ____ ISSUED rdf
Permit Printed By rdf Date 5/26/08
Permit Mailed By rdf Date 3/26/08
Application Complete and
Verified By ____ Date ____
Scanned By ____ Date ____

H_WE_CONAP Rev 021407

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. HS000078

System Type: LAGOON

Situs: 15355 BOBWHITE TRL LC

Legal Description: T08N-R05E-S17-1-Lot 8

Owner:

Permit Fee:	$0.00
Variance Fee:	$0.00
Extension Fee:	$80.00
Total Fees:	$0.00

Issued: 03/26/2008
Expires: 09/26/2008

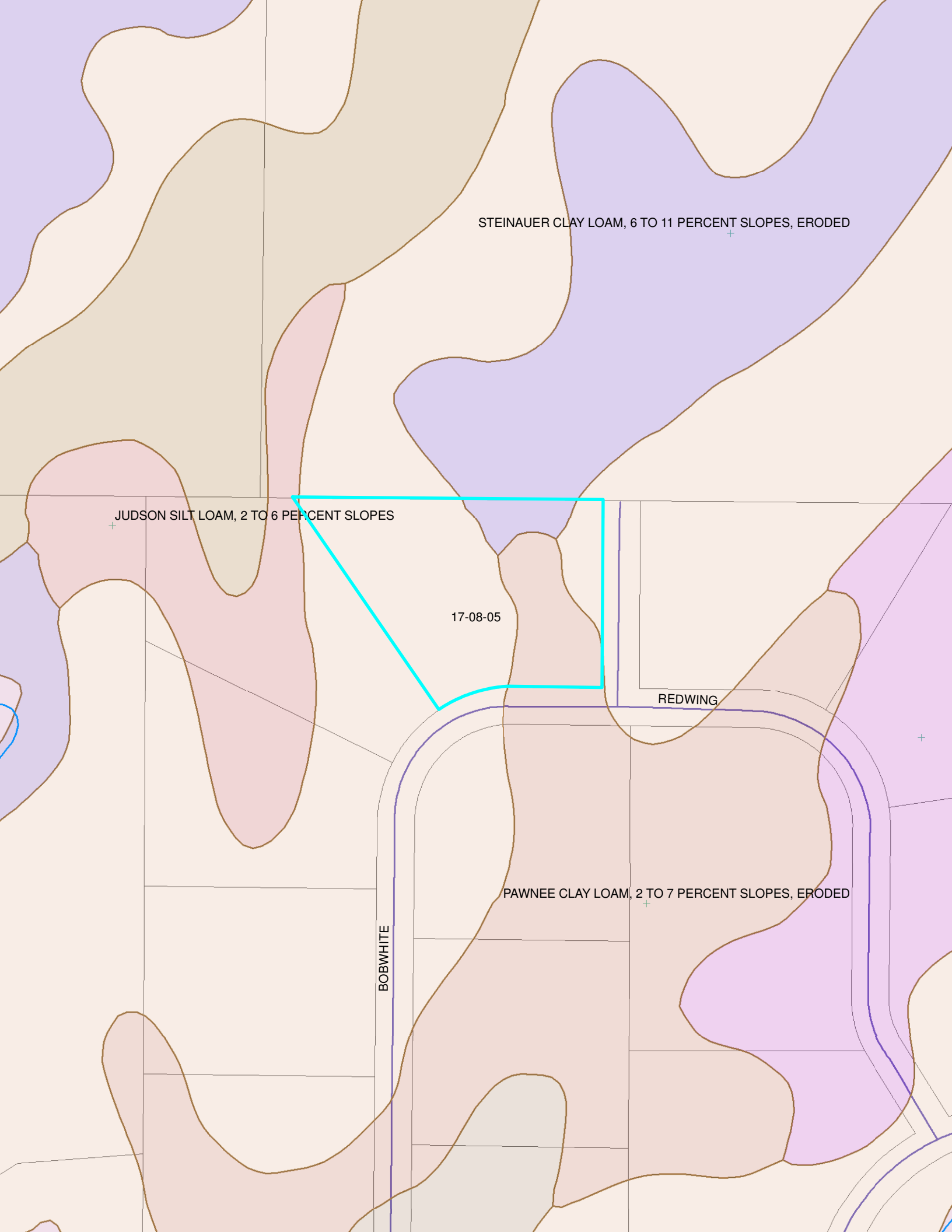
Bruce D. Dart, PhD, Health Director

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

CRETE LUMBER AND FARM SUPPLY
BOX 283
CRETE NE 68333


STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
17-08-05
REDWING
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
BOBWHITE

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street
Lincoln, NE 68510-1514
(402) 441-8022

APPLICATION
Site Clearance and Permit for Individual Water Well
Permit No. HS000078

INSTRUCTIONS: *REVIEW this application. Write in any missing or incorrect information in the space provided. If there are any questions, contact the Environmental Health Water Program at (402) 441-8030. Please make a photocopy for your records.*

The undersigned hereby requests approval for site celearance and a permit to construct a new water well at this location within the **LAGOON** limits of Lincoln, Nebraska:

1. Well Site Address: 15355 BOBWHITE TRL LC

2. Legal Description: Township: 08N Range: 05E Section: 17 1/4 Section:
   Subdivision: Block: 1 Lot: 8

3. Parcel ID: 0217302008000

4. Well Use: ? Domestic (Residential) ? Commercial
   ? Irrigation ? Heat Pump
   Other: ??

5. Sewage Permit Applied for: ??

6. Address has City Water connection: ?

7. Applicant:
   CRETE LUMBER AND FARM SUPPLY
   BOX 283
   CRETE NE

   68333

   Phone:
   FAX #:
   email:

8. Owner:

_____ ___/___/____ _____ ___/___/___
9. Applicant Signature Date 10. Owner Signature Date

Please submit Permit Fee with this request. **(Fee must be included before application is proccessed. Incomplete information will delay processing)**

Permit Fee: $0.00
Total Amount Due: **$0.00**

Make Checks Payable to LLCHD.

Legal notices for this permit are mailed to:

CRETE LUMBER AND FARM SUPPLY
BOX 283
CRETE NE 68333

APD Number: **HS000078**

FOR OFFICE USE ONLY	
Rec'd By _____	Date _____
Amt $ _____	Check # _____
Posted By _____	Date _____
HOLD _____	ISSUED _____
Permit Printed By _____	Date _____
Permit Mailed By _____	Date _____
Application Complete and Verified By _____	Date _____
Scanned By _____	Date _____

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

A

Permit Number: 0738033160 1 MF

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

* Geothermal wells located on site *

☐ 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: 3.02 acres ~~2.47 acres~~ ??

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 15355 Bobwhite Tr City Crete NE NE, Zip 68333
LCR 5945 (no rural route)
Legal Description 17 8 5 Elsner Lakeside Estates 1 8
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 Paul + Sheri Dorcmus Signature _____ 3/13/08
Address _____ City/State/Zip _____
☐ Check if owner designed system Home Phone 826-4900 Work Phone _____

C. Contractor

Name Crete Lumber + Farm Supply Company Name Ron Dillon
Address Box 283 City/State/Zip Crete NE 68333
☐ Check if contractor designed system Work Phone 402-826-2197 641-7740

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

Designer Name Gary Hall Firm Hall Contracting Work Phone 587-0120

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 600 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 3/28/07 Date frwd 3/28/07 ACTION ☒ Approved ☐ Disapproved Signature Gary Hall
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 3/28/07 Date frwd 3/28/07 ACTION ☒ Approved ☐ Disapproved Signature Linda McGill
3. **City or County Engineer** Date rec'd 3-28-07 Date frwd 3-28-07 ACTION ☒ Approved ☐ Disapproved Signature _____

5/6/08 – Partial – Septic tanks only

Installation Final Written Approval

By Gary Hall
Date 5/20/08

Business Office Use Only Extension through 9/26/08
Date Rec'd 3-27-07
Amt Paid 290.00
Rec'd By _____ Cash/Check No. 10657

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

CRETE LUMBER

HOLLY
CONTRACTING COMPANY

Gary L. Holly
71860 567th Ave. Fairbury, Ne. 68352
402-587-0120

ON-SITE WASTEWATER TREATMENT SYSTEM	SOIL ABSORPTION DATA REPORT	PROPERTY ADDRESS

SOIL TEST PROPERTY

OWNER ADDRESS PAUL DOREMUS	PROPERTY LOCATION 15355 BOBWHITE TRAIL LAKESIDE ESTATES, CRETE
1875 ARTHUR DR.	LEGAL DESCRIPTION
CRETE, NE 68333	GPS DRAINFIELD N40° 39' 40.2" W096° 53' 23.5" / HOUSE WEST SIDE N40° 39' 39.6 W096° 53' 23.5"
PHONE NO. WORK 826-8825 HOME 826-3400 CELL 826-7383	
PROPERTY ACRES	TEST DATES DEC-4 2007
SOIL TYPE CLAY LOAM-SILTY LOAM BURCHARD	WEATHER 30°-50° PARTLY CLOUDY

PERCOLATION TEST DATA

DATE PRE-SATURATION PERIOD START Nov 29 END DEC 4 2007 DATE

PERCOLATION READINGS

HOLE NO.	HOLE DEPTH	HOLE DIA.	START TIME	END TIME	GAL. USED	TIMES (HOLES FILLED TO 6" LEVEL EACH READING) 1030	1100	1130	1200	1230	1300	1330	1400	1430	PERC-END RESULT MIN/INCH
1	32"	8"				DROP IN INCHES	.5	.5	.4	.25	.25	.25	.25	.25	120/INCH
2							.5	.5	.5	.4	.4	.4	.4	.4	75
3							.4	.4	.4	.4	.4	.3	.3	.3	100
4							.75	.75	.7	.7	.6	.6	.6	.6	50
5							.75	.7	.7	.7	.7	.7	.7	.7	43
6							.75	.7	.7	.6	.6	.6	.6	.6	50
7							.6	.6	.6	.4	.4	.4	.4	.4	75
8							.6	.6	.6	.6	.5	.5	.5	.5	60
9							.5	.5	.5	.4	.4	.4	.4	.4	75
10							.7	.7	.6	.6	.5	.5	.5	.5	60
11	V	V					.4	.4	.4	.4	.4	.3	.3	.3	100
12															
13															
14															
15															

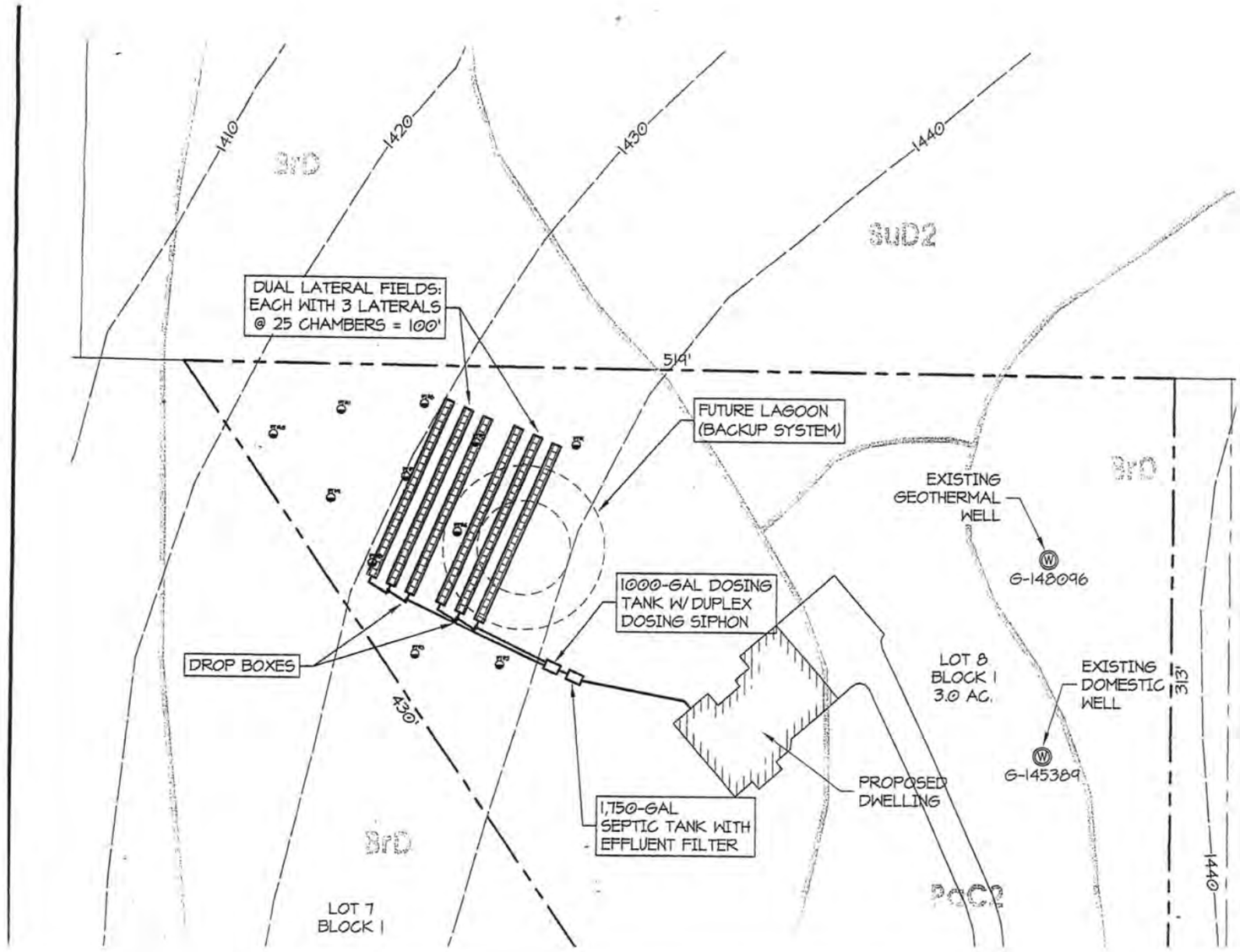
TEST CONDUCTED BY: GARY L. HOLLY — SUM OF RATES 808

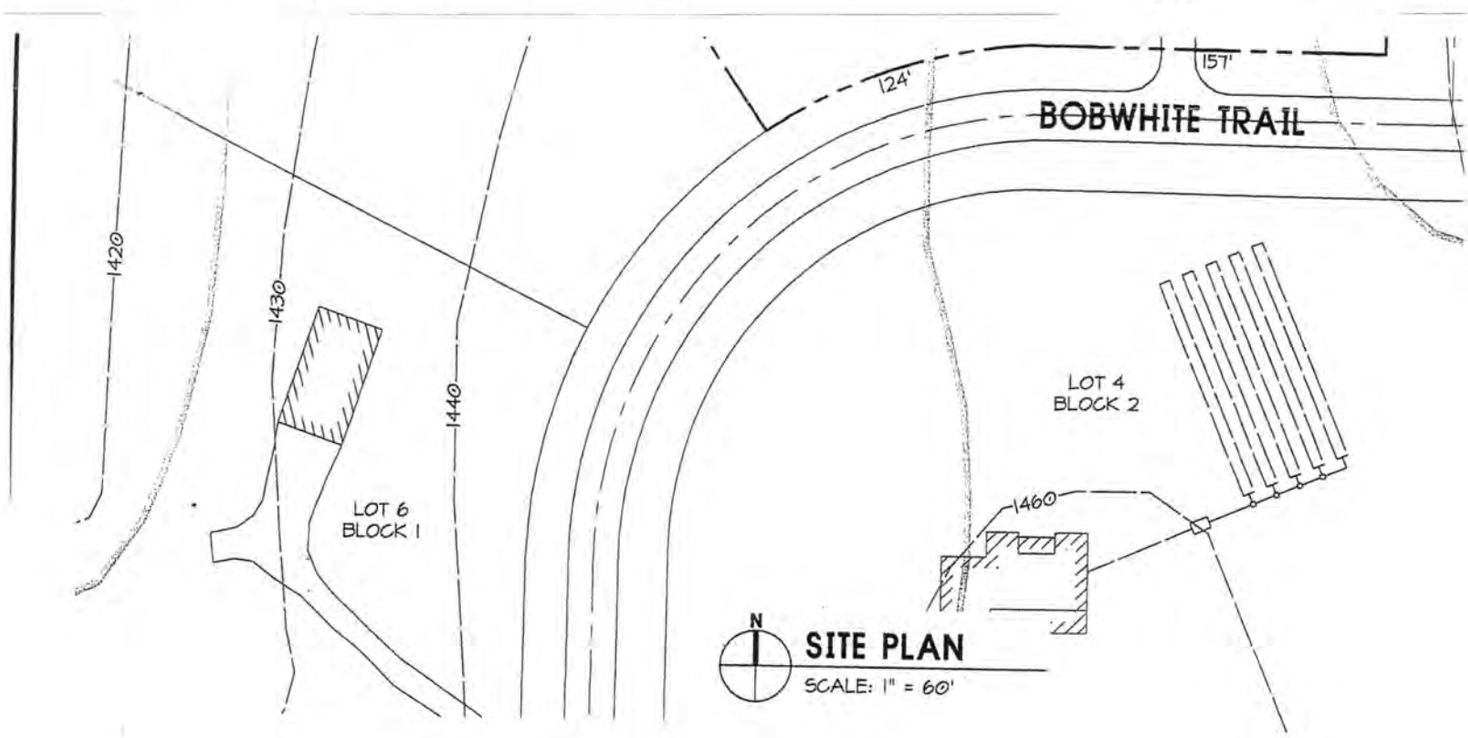
NDEQ LICENSE NO: C 1650 — AVERAGE OF RATES 73 MIN/IN

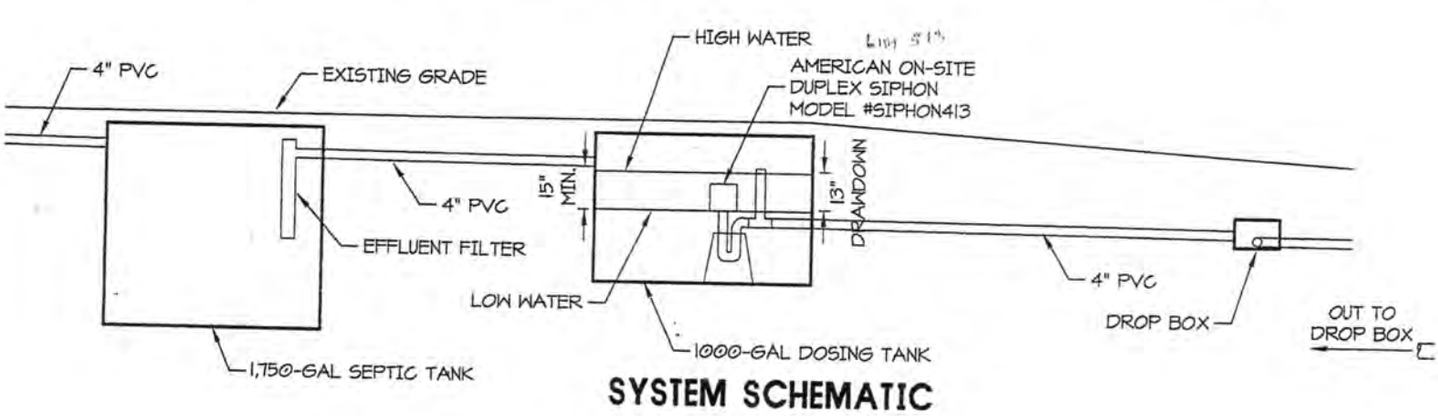
ABSORPTION FIELD DRAWING:

DRAWING ON NEXT PAGE SOIL REPORT

PRESOAK HOLES FILED TO 12" ON NOV 29 NOV 30 RAIN DEC 1. SNOW DEC 2
FILED TO 12" FROM ~~TOP~~ BOTTOM AGAIN ON DEC 3RD
TEST ON DEC. 4







SYSTEM SCHEMATIC

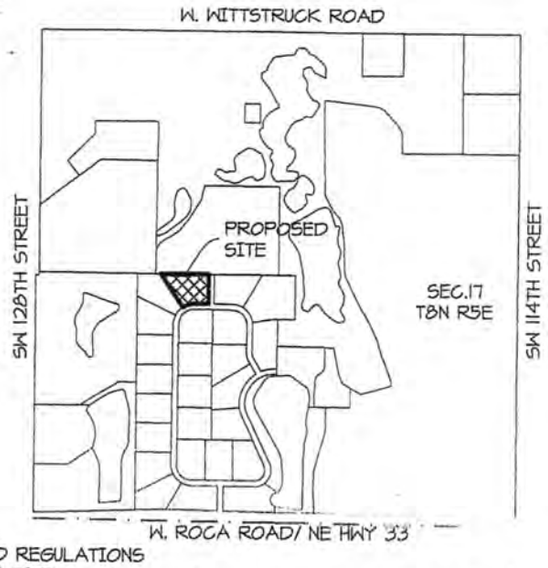
DIAL BEFORE YOU DIG

DIAL BEFORE YOU DIG. CALL 1-800-331-5666 FOR LOCATION OF UNDERGROUND TELEPHONE, ELECTRIC, GAS MAINS, CABLE TELEVISION, AND CITY UTILITIES.

LEGAL DESCRIPTION:

LOT 8, BLOCK 1
ELSNER LAKESIDE ESTATES 1ST ADDITION

SW 1/4 SEC. 17 T8N R5E
LANCASTER COUNTY, NEBRASKA



GENERAL NOTES:

1. ALL WORK SHALL CONFORM TO TITLE 124 - RULES AND REGULATIONS FOR THE DESIGN, OPERATIONS AND MAINTENANCE OF ON-SITE WASTEWATER TREATMENT SYSTEMS.

2. THE ON-SITE WASTEWATER TREATMENT SYSTEM SHALL BE INSTALLED BY A CERTIFIED ON-SITE WASTEWATER PROFESSIONAL.

3. IT MAY BE NECESSARY TO ADJUST THE ORIENTATION OF THE LATERALS SO THAT THE MINIMUM (1.5FT) AND THE MAXIMUM (3.0FT) DEPTHS ARE NOT EXCEEDED.

4. 100-150' LONG LATERALS SHALL BE CONSTRUCTED IN ACCORDANCE WITH "NDEQ TITLE 124 - 14.002".

5. IT IS RECOMMENDED THAT A WATER METER BE INSTALLED ON THE WATER SUPPLY LINE SO THAT THE OWNER CAN MONITOR WATER USAGE AND ENSURE THAT NO MORE THAN 600 GALLONS PER DAY IS BEING USED.

N

VICINITY MAP

NOT TO SCALE

FEB 27 2008

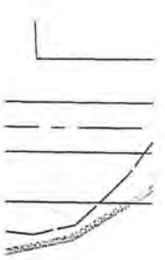
PROFESSIONAL CIVIL ENGINEER
JEREMY J. WILLIAMS
E-10521
2/25/08
STATE OF NEBRASKA

Pollution Control Project

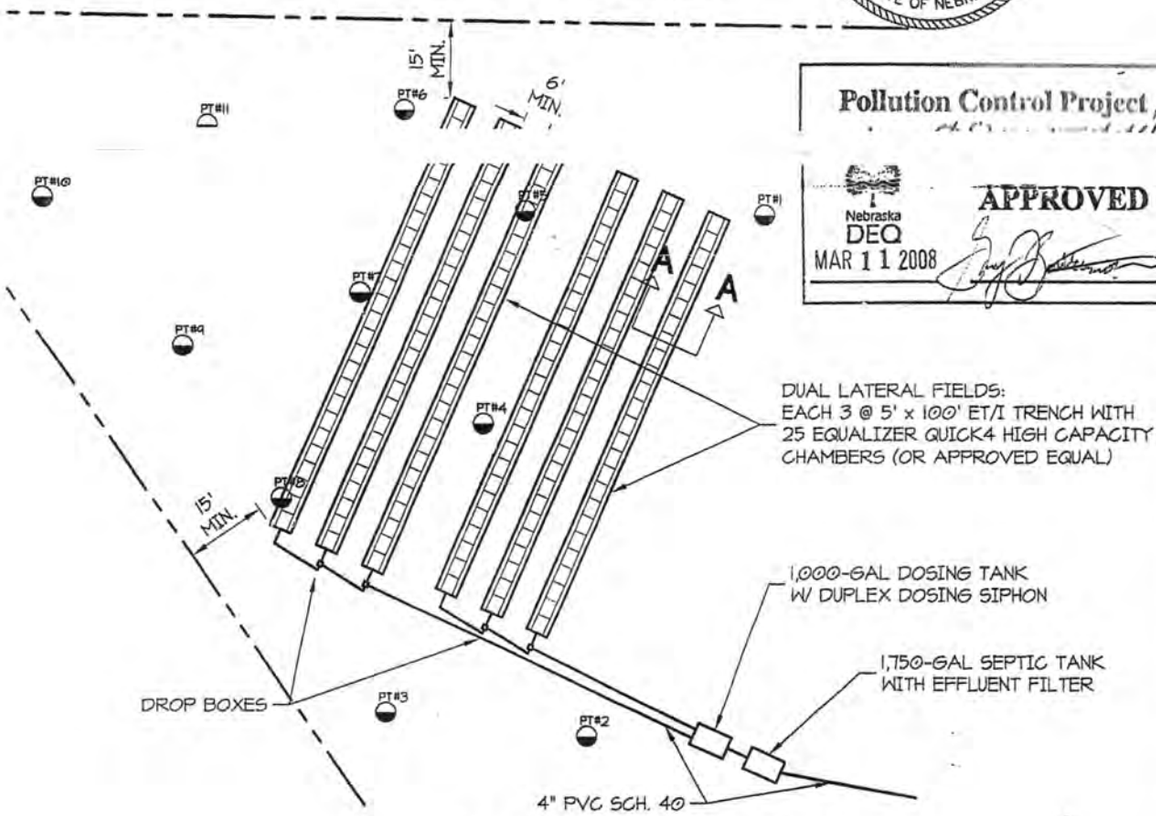
Nebraska DEQ
APPROVED
MAR 11 2008





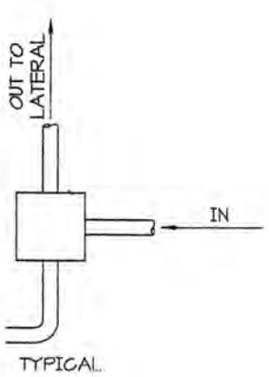


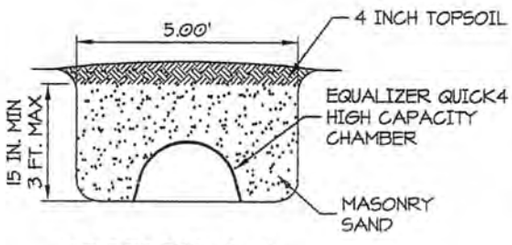
LOT 5
BLOCK 2



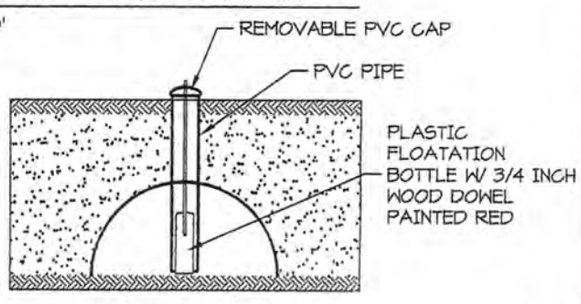
EVAPOTRANSPIRATION/ INFILTRATION TRENCH PLAN

SCALE: 1" = 30'





SECTION A-A



HIGH WATER INDICATOR

date: 25 F
revised:

355 BOBWHITE TRAIL

Design Associates

project no.

sheet no.
1

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

HOLLY CONTRACTING CO.
71860 567 Ave.
Fairbury, NE 68352
GARY L. HOLLY
C-1650

D

Permit Number: 0738033/601

NDEQ CONSTRUCTION PERMIT # 080WT004

Sewage Disposal System
As Built Plans & Specifications

Date 06/16/08

PAUL DOREMUS

System Location (Indicate correct number and street)

Address 15355 BOBWHITE TRAIL (no rural route) City CRETE NE, Zip 68333

A. Building Sewer

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

B. Septic Tank

1. Material: PLASTIC
   Number of compartments: 2 TANKS 1050 EA.
2. Capacity: 2100 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 2 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee WITH FILTER
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 183 ft.
   Stream < 300 ft.
   Pressure line < 100 ft.
   Property line 44 ft.

C. Distribution Box

1. Material: PLASTIC 3 BOXES TWO FIELDS 5 LINES
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: LOT = 31' ft.

D. Absorption Field

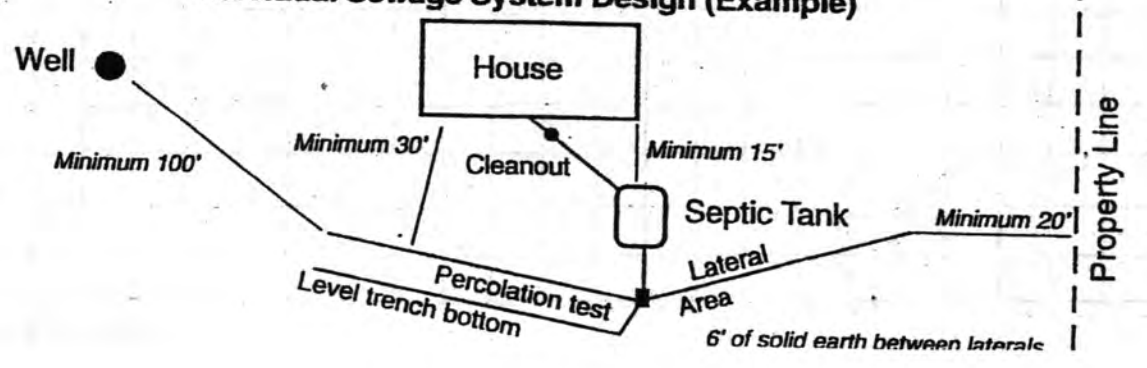
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe ☒ GRAVELLESS CHAMBERS
   ~~Diameter of half round:~~ 34" WIDE
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 5
   Length of each line: 1ST FIELD 150 ft. 150 ft.
   SEC. FIELD 150 ft. 75 ft., 75 ft.
3. Trench dimensions: Width 5 ft.
   Slope LEVEL in/100 ft.
   Average depth 24 in
4. Filter material: MASONARY SAND
   Depth of material AV 20 in.
5. Distances to: Well or suction line 180 ft.
   Stream NA ft.
   Pressure line < 150 ft.
   Property line 20 ft.

Indicate North with Arrow

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

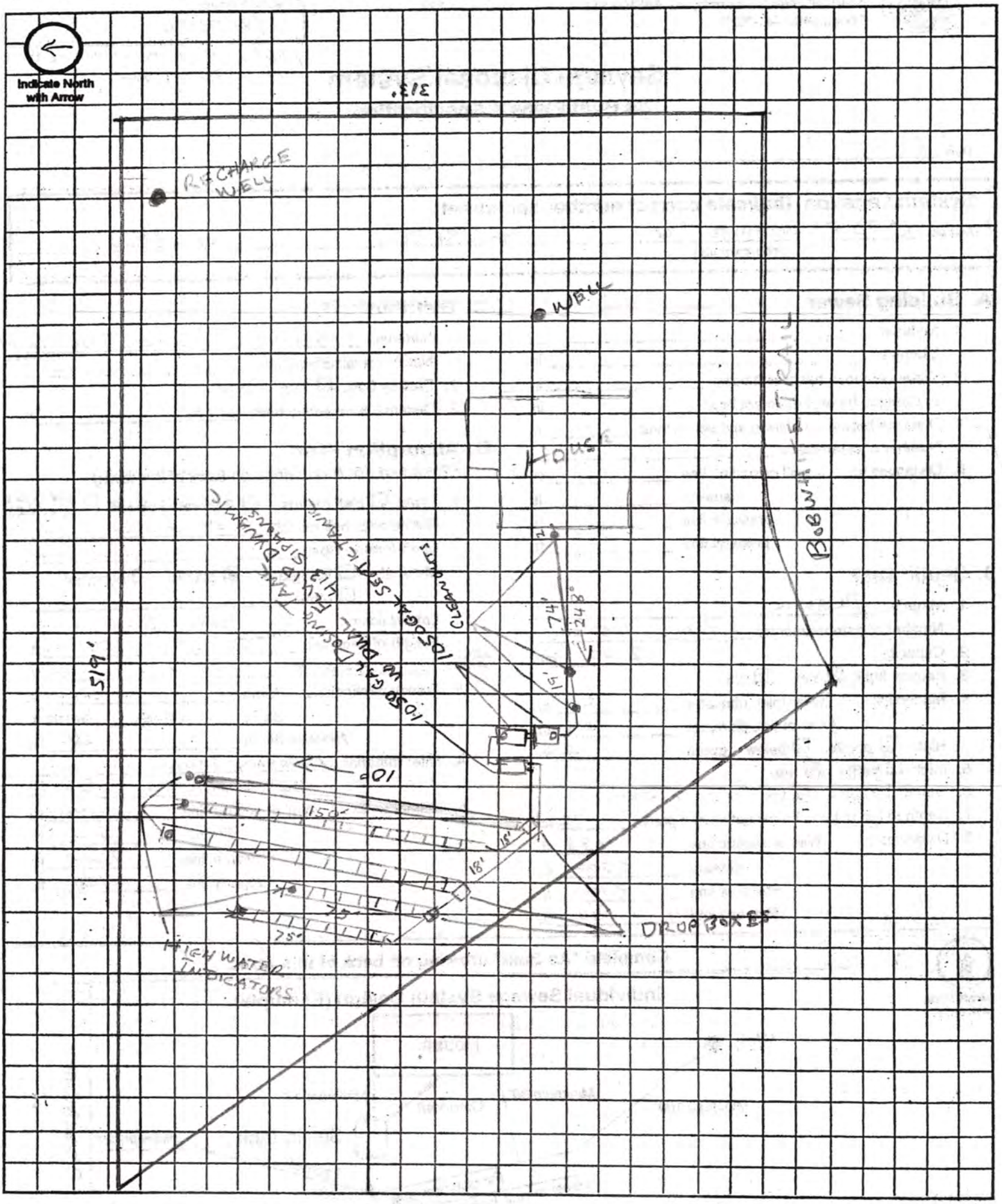
Individual Sewage System Design (Example)



As Built Drawing

HOLLY CONTRACTING CO.
71860 567 Ave.
Fairbury, NE 68352

AS PER DRAWING
USED 2 - 1050 SEPTIC TANKS INSTEAD
OF 1 - 1750 GAL



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

Nebraska Department of Environmental Quality

Construction Permit No. 08OWT004

is hereby issued to

Paul Doremus

for the

On-site Wastewater Treatment System

located at

15355 Bobwhite Trail, Crete, NE 68333
Elsner Lakeside Estates, Block 1, Lot 8
SW ¼, Sec. 17, T8, R5E
Lancaster County

Pursuant to a Delegation Memorandum dated January 12, 1999, and signed by the Director, the undersigned hereby executes this document on behalf of the Director.

Signed March 11, 2008

Patrick W. Rice

Patrick W. Rice, Assistant Director

Suite 400, The Atrium, 1200 "N" Street, P. O. Box 98922, Lincoln, Nebraska, 68509-8922
Phone (402) 471-2186, Fax (402) 471-2909, e-mail Pubinfo@mail.deq.state.ne.us