Lincoln-Lancaster County
Health Department
3140 "N" Street
Lincoln, NE 68510-1514

RETURN SERVICE REQUESTED

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

XX FCMPRSRT DMA 11-08

PRESORTED FIRST CLASS

$00.373
04/10/2008
Mailed From 68510
US POSTAGE

APR 14 2008

681 NFE 1 408I 00 04/13/08
RETURN TO SENDER
ADAMS
6547 ROLLING HILLS CT
LINCOLN NE 68512-2214

RETURN TO SENDER

BANISII 68516
68510@1514

LLCHD HS000080

4-15-2008 11:5:13

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. HS000080

System Type:	LAGOON
Situs:	4700 SW 140 ST RUR
Legal Description:	T09N-R05E-S07-Lot 5
Owner:	CUNNINGHAM, THEODORE R & LENOR 2561 WOODS BLVD LINCOLN NE 68502

Permit Fee:	$305.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$305.00
Issued:	04/07/2008
Expires:	04/07/2009

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

ADAMS ENTERPRISES
5950 ABIGAIL DR
LINCOLN NE 68516

LLCHD HS000080

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

A

Permit Number
HS000080

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 4700 SW 140th St. (no rural route) City Denton, NE Zip

Legal Description 57, T9, R5, 6th Principal Meridian, Lot 5 NW

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: 10.03

B. Owner

Name Brian Cunningham Signature Mike Adams - contractor

Address 2561 Woods Blvd. City/State/Zip Lincoln NE 68502

☐ Check if owner designed system Home Phone 423-2575 Work Phone 441-7011

C. Contractor

Name: Mike Adams Company Name Adams Enterprises Inc.

Address 201 N. 8th St. #430 City/State/Zip Lincoln NE 68508

☐ Check if contractor designed system Work Phone 499-8635

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

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 2 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 Date frwd
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 3/28/08 Amount Paid 305 cc
Received By AL Cash/Check No. 3691

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

Form A Updated: 5-07

LLCHD HS000080

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

A

Permit Number
HS000080

Onsite Wastewater Treatment System Request for Site Clearance and Permit

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PLEASE PRINT OR TYPE

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Address 4700 SW 140th St. (no rural route) City Denton, NE Zip

Legal Description S7, T9, R5, 6th Principal Meridian, Lot 5 NW

1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

Geographical Location (if known): Longitude: Latitude:

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Site visits
Date rec'd 4/4/08
Date frwd 4/4/08
ACTION ☑ ~~Approved~~ ☐ ~~Disapproved~~
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 4/4/08
Date frwd 4/4/08
ACTION ☑ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments Confirm Flood Plain Elevation Prior to Construction
Date rec'd 4-4-08
Date frwd 4-4-08
ACTION ☒ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

Form A Updated: 5-07

4-9-2008 9:51: 9

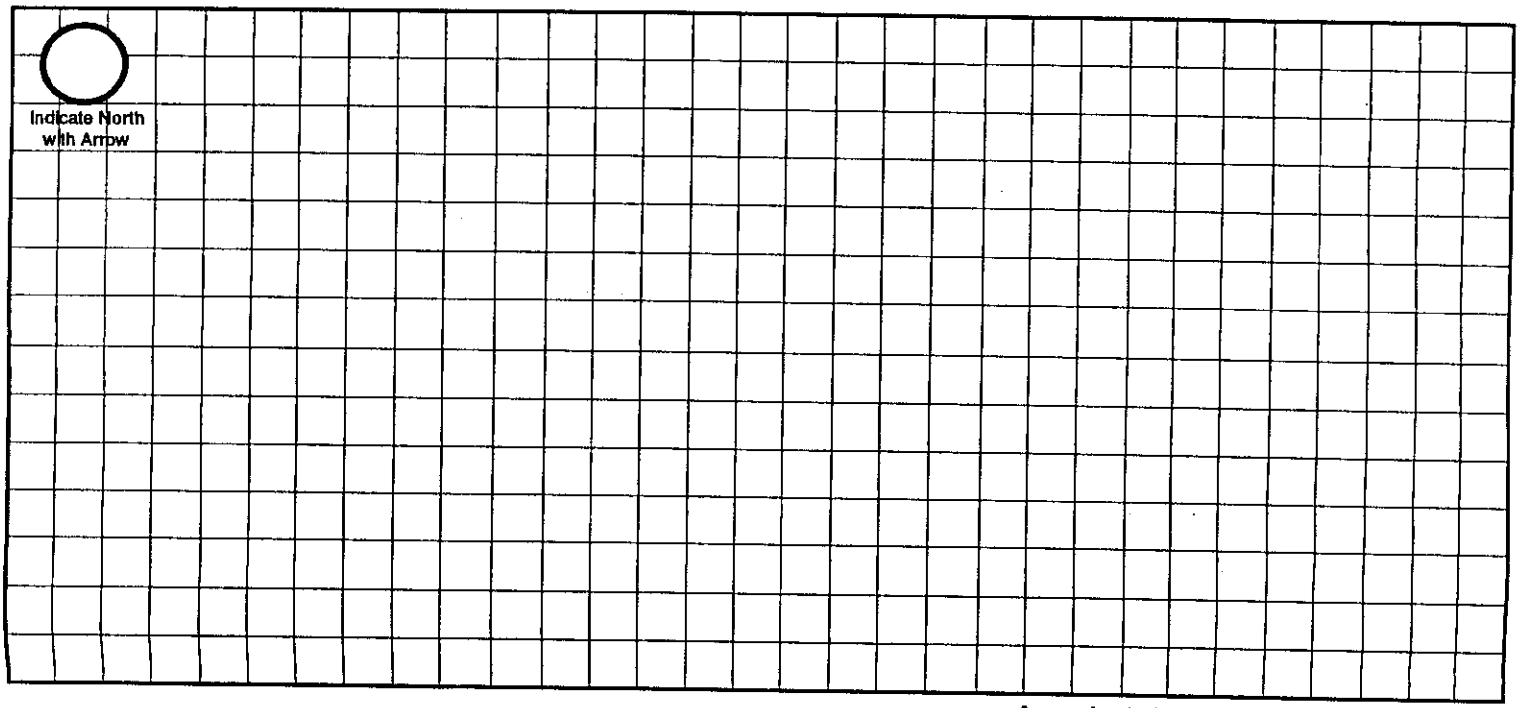
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number:

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) _____ 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 [signature] Basement Trenching Date 3-24-08

FORM 23-102 10-96

Attn: Nate Hartman

from: Mike Adams

499-8635

441-3890

2 pages

Mike A. Adams

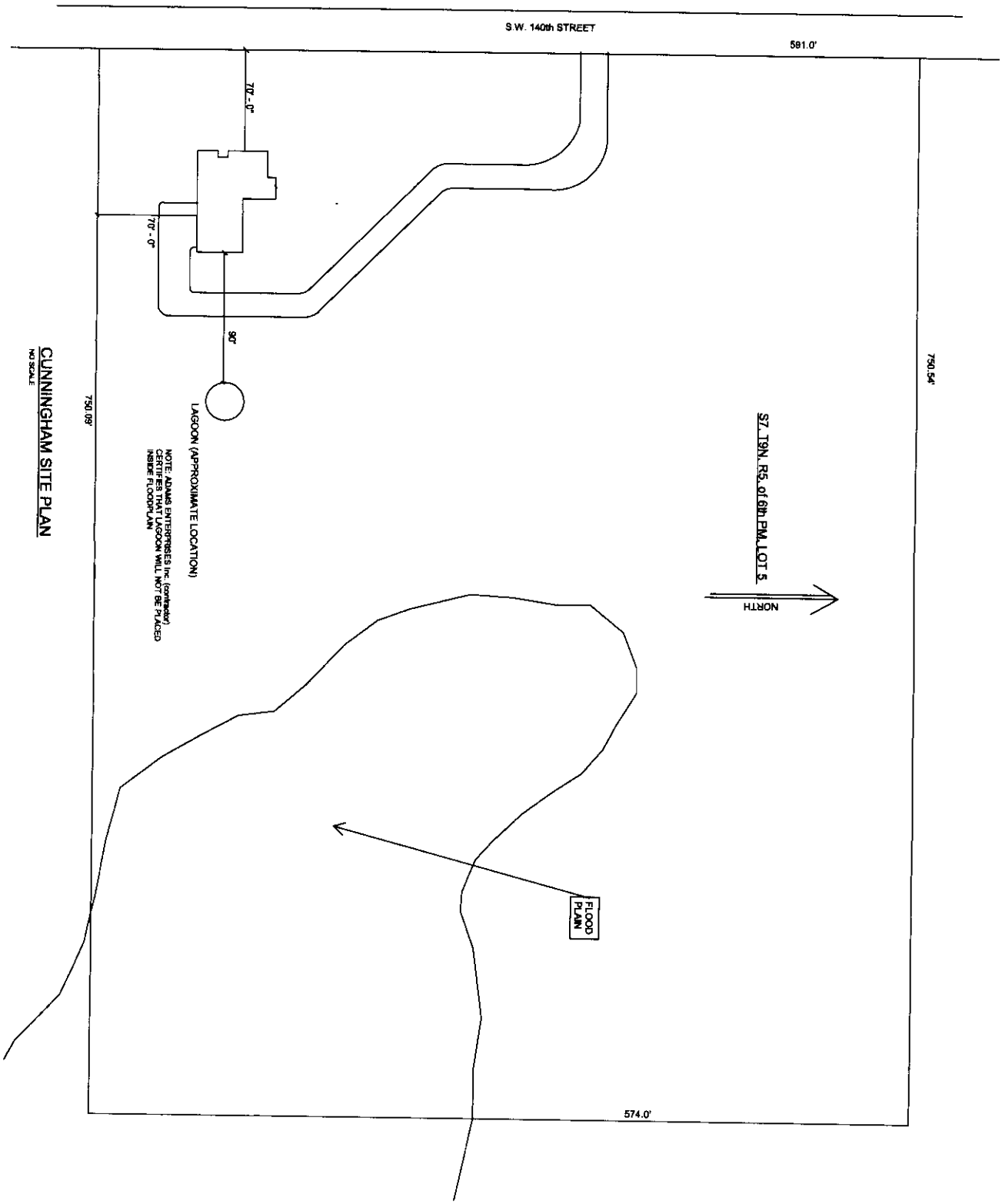
From: Mike A. Adams [mike@buildadams.com]
Sent: Thursday, April 03, 2008 8:00 AM
To: 'nhartman@lincoln.ne.gov'
Subject: 4700 SW 140th St.
Attachments: Cunningham_SheetSite_LetterSize.pdf; image002.jpg

Good Morning Nate I have attached a plot map showing both lagoon location and flood plain area. Please print this email and attachment and put it in your file for this project. Per our conversation I, Mike Adams, certify that I will build the lagoon for this home a minimum of 2 feet above the established flood plain elevation. I have also printed off this email, signed it, and mailed a hard copy to your office. I have also faxed this email to you in order to continue the permit process forward. Please let me know if you have any questions or if you need anything else from me at this point. Prior to lagoon placement and excavation I will get in contact with you and we will both verify the lagoon site together. Have a great week.

Sincerely,

Mike A. Adams
President
Adams Enterprises Inc.

Mike A. Adams
President
Adams Enterprises Inc.
dba Adams Custom Homes
201 N. 8th St. Suite 430
Lincoln, Nebraska 68508
(402) 499-8635 Cellular
(402) 438-3712 Fax
mike@buildadams.com
www.buildadams.com



These plans have been drawn for a residential dwelling to illustrate the owner's design. The dimensions & location of footings & foundation are provided. Construction should meet your State's energy code and be in accordance with all the codes and requirements of a responsible professional. The builder is responsible to be sure the construction and capacity of these drawings for any specific site or application.

ADAMS CUSTOM HOMES

BRIAN & JEANNE CUNNINGHAM

4700 SW 140th STREET LINCOLN, NE
S7, T9N, R5, of 6th PM, LOT 5

COPYRIGHT 2007
ADAMS CUSTOM HOMES
LINCOLN, NE
ALL RIGHTS RESERVED

DRAWN BY: A.A.

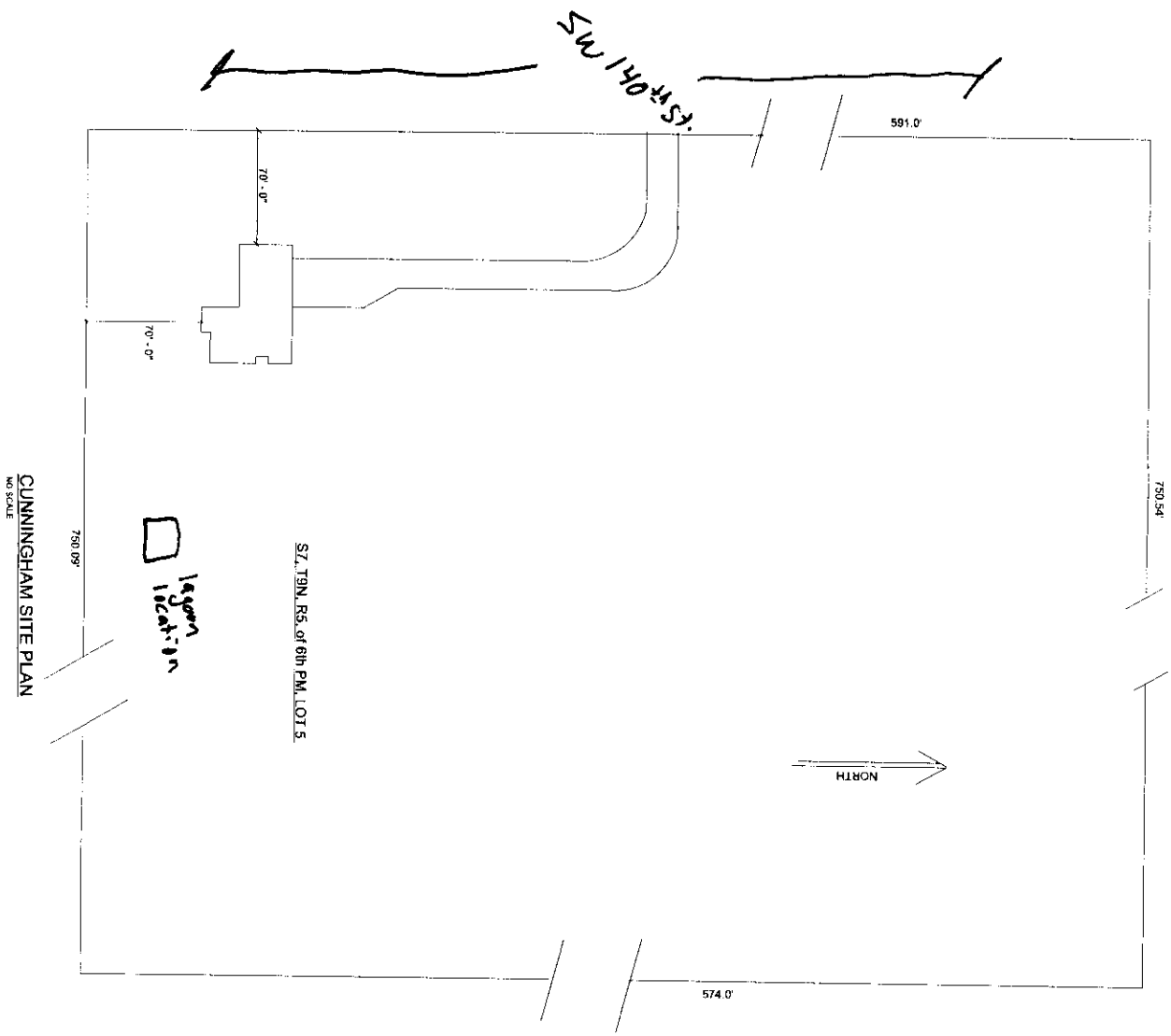
APPROVAL FOR CONSTRUCTION
BUILDER _____
CLIENT _____

BROADVIEW DESIGNS
1346 SOLANO DRIVE
BENNET, NE
(308) 324-4286

REVISIONS

DATE DRAWN
April 03, 2008

SITE



CUNNINGHAM SITE PLAN
NO SCALE

BRIAN & JEANNE CUNNINGHAM

4700 SW 140th STREET LINCOLN, NE

S7, T9N, R5, of 6th PM, LOT 5

ADAMS CUSTOM HOMES

COPYRIGHT 2007
ADAMS CUSTOM HOMES
LINCOLN, NE
ALL RIGHTS RESERVED

DRAWN BY: A.A.

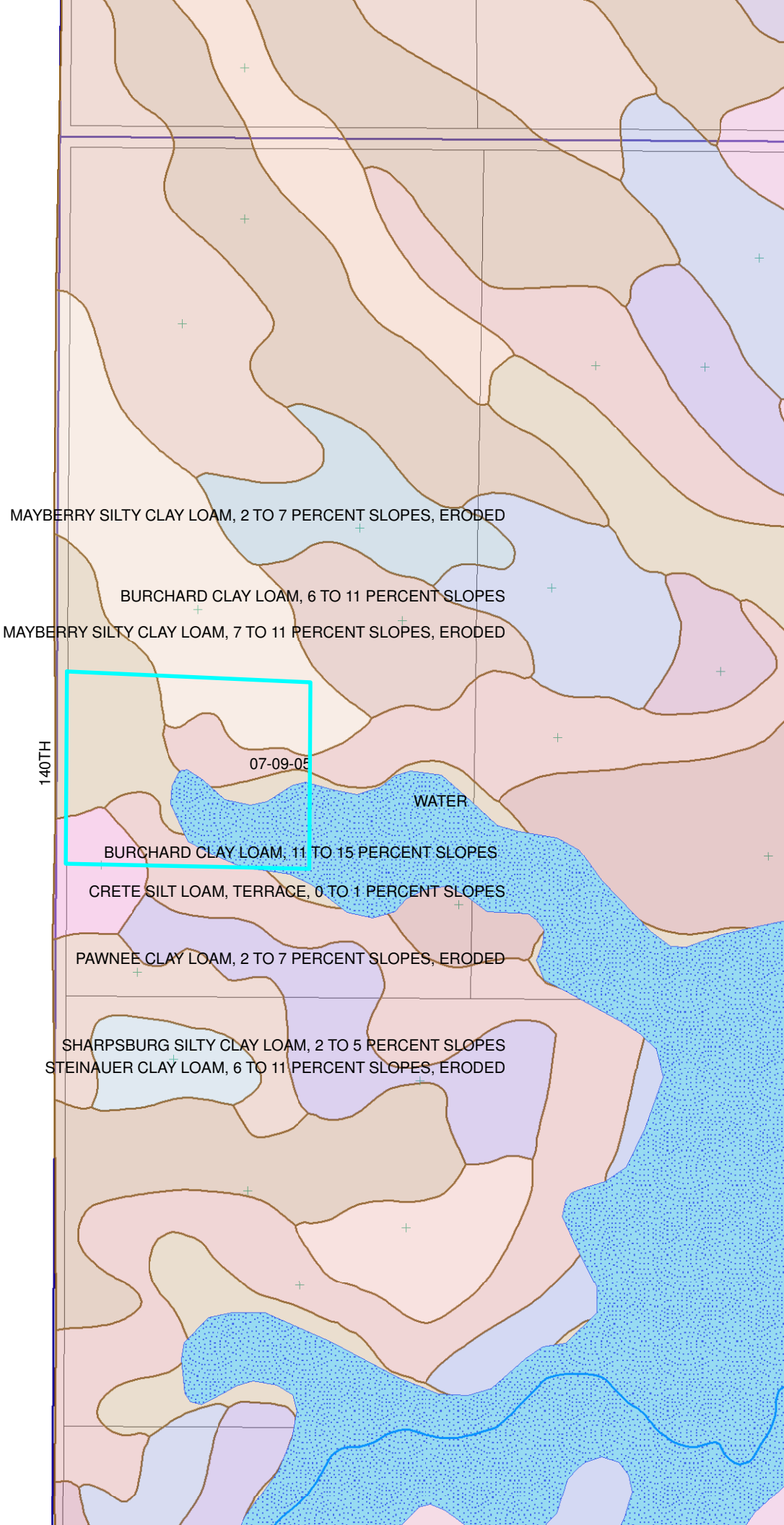
APPROVAL FOR CONSTRUCTION
BUILDER
CLIENT

BROADVIEW DESIGNS
1366 SOLAND DRIVE
SIDNEY, NE
(308) 254-2286

REVISIONS

DATE DRAWN
March 22, 2008

SITE


MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
MAYBERRY SILTY CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
140TH
07-09-05
WATER
BURCHARD CLAY LOAM, 11 TO 15 PERCENT SLOPES
CRETE SILT LOAM, TERRACE, 0 TO 1 PERCENT SLOPES
PAWNEE CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED
SHARPSBURG SILTY CLAY LOAM, 2 TO 5 PERCENT SLOPES
STEINAUER CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED

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

SCANNED

A

Permit Number
H5000080

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Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
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Date rec'd
Date frwd
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 12/17/08

Sand pocket noted - informed installer of need for additional bentonite 9/23/08 AS
Line & lagoon
Informed owner of sand issue. 9/23/08

Business Office Use Only
Date Received 3/28/08 Amount Paid 305 cc
Received By Cash/Check No. 3691

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

Form A Updated: 5-07