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. HS000220

System Type: STANDARD

Situs: 8601 LIANA LN L

Legal Description: T11N-R07E-S14-Lot 6

Owner:

Permit Fee:	$315.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$315.00

Issued: 05/13/2009
Expires: 05/13/2010

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

RAYMOND CONTRACTING
13800 NW 70TH
RAYMOND NE 68428

LLCHD HS000220

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

A

Permit Number
HS000220

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 8601 Liana Ln (no rural route) City Lincoln, NE Zip 68517

Legal Description SW 14 11 7 Finigan View 6
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:

B. Owner

Name Drew & Heather Ferguson Signature See attached

Address 2401 Chanticleer Cir City/State/Zip Lincoln, NE 68521

☐ Check if owner designed system Home Phone Work Phone

C. Contractor

Name: Scott Schneider Company Name Schneider Custom Homes

Address 8431 Pineapple Ave City/State/Zip Lincoln, NE 68520

☐ Check if contractor designed system Work Phone 402-429-9331

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

Designer Name Lloyd Jakubek 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
Date rec'd 5/7/09
Date frwd 5/7/09
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

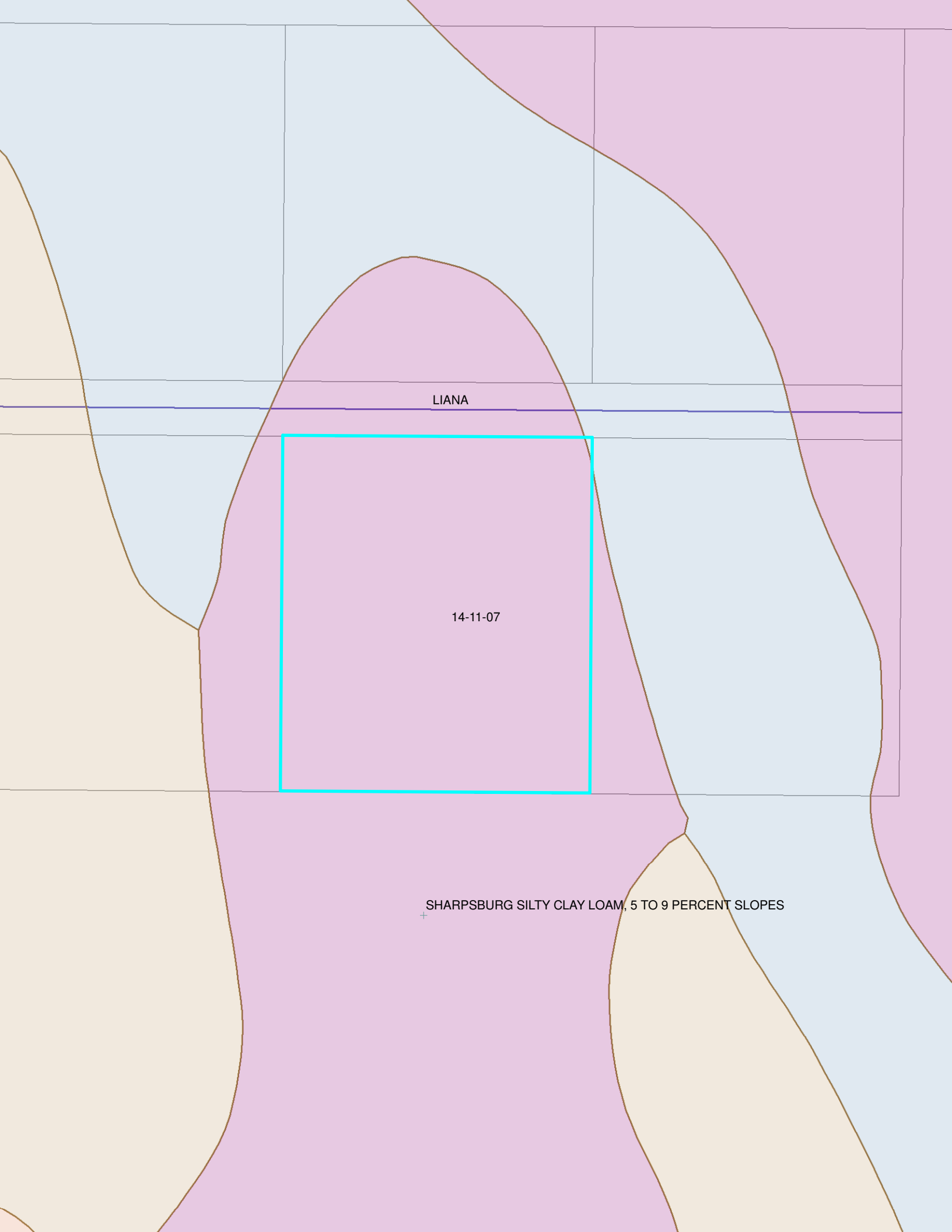
Installation Final Written Approval
By
Date

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

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

Form A Updated: 5-07

5-8-2009 11:17:59


LIANA
14-11-07
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES

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

A

Permit Number
H5000220

Onsite Wastewater Treatment System Request for Site Clearance and Permit

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PLEASE PRINT OR TYPE

A. Onsite System Location

Address 8601 Liana Ln (no rural route) City Lincoln, NE Zip 68517

Legal Description SW 14 11 7 Finigan View 6
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: _____

B. Owner

Name Drew & Heather Ferguson Signature See attached

Address 2401 Chanticleer Cir City/State/Zip Lincoln, NE 68521

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

C. Contractor

Name: Scott Schneider Company Name Schneider Custom Homes

Address 8431 Pinedale Ave City/State/Zip Lincoln, NE 68520

☐ Check if contractor designed system Work Phone 402-429-9331

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Designer Name Lloyd Jakoubek Firm Raymond Contracting Inc Work Phone 402-890-6009

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1. Health Department
Site visits _____
Date rec'd 5/7/09
Date frwd 5/7/09
ACTION ☑ Approved ☐ Disapproved
Signature _____

2. Supt. Bldg. Insp. or Village Clerk
Comments _____
Date rec'd 5-13-09
Date frwd 5-13-09
ACTION ☒ Approved ☐ Disapproved
Signature _____

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

Installation Final Written Approval
By _____
Date 6/29/09

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

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

SCANNED

A

Permit Number
H5000220

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

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Legal Description SW 14 11 7 Finigan View 6

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: _____

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1. Health Department
Site visits _____
Date rec'd 5/7/09 Date frwd 5/7/09
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 5-8-9 Amount Paid 315.00
Received By AL Cash/Check No. 1043

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

Form A Updated: 5-07

SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section _____
Township _____ Range _____
1/4 Section _____

Owner: Schneider Custom Homes
Address: 860 Liana Lane

Property Dimensions: _____ acres

Soil Type: Silty Clay ____ Silty Clay Loam ____ Sandy Loam ____ Silty Loam ____ Clay Loam X Sandy Clay ____

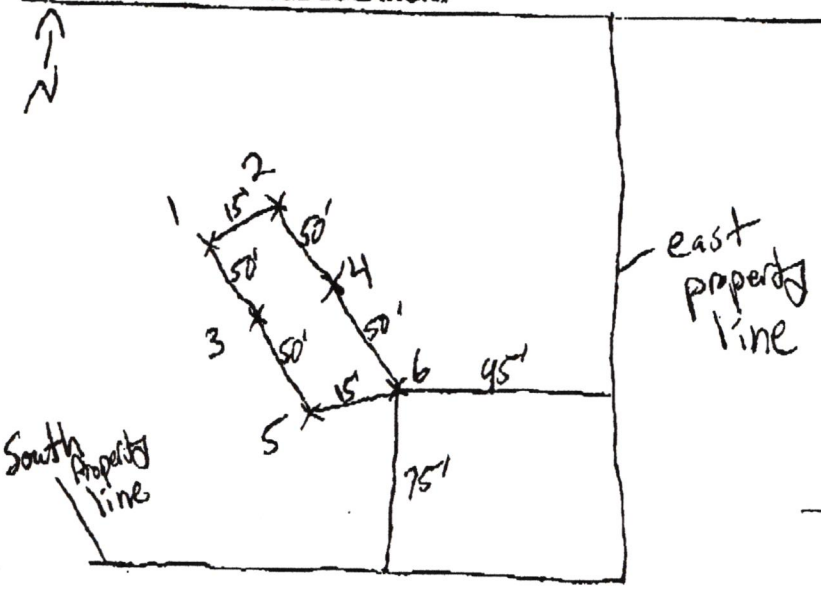
Dates of Tests: 12-13-08 to 12-14-08 Weather: Precip. Ø Temp. 12°-35°

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
		Pre-Saturation Period				Percolation Readings					Results	
		Start		End		Start			End			Water
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Level Drop (in.)
1	36	12-13	9:00am	12-13	1:00pm	12-14	10:45am	6	11:15am	5	30	
2	36	12-13	9:00am	12-13	1:00pm	12-14	10:45am	6	11:15am	5	30	
3	36	12-13	9:00am	12-13	1:00pm	12-14	10:50am	6	11:20am	5¼	30	¼
4	36	12-13	9:00am	12-13	1:00pm	12-14	10:50am	6	11:20am	5¼	30	¼
5	36	12-13	9:00am	12-13	1:00pm	12-14	10:55am	6	11:25am	5¼	30	¼
6	36	12-13	9:00am	12-13	1:00pm	12-14	10:55am	6	11:25am	5	30	1

Sum of Water Level Drops (in.) (Column m): 5¼
Average of Water Level Drops (in.) (Column m): .875
~~Inches per Minute:~~ _____
34.29 MPI

PERSON CONDUCTING TEST:
Name: Justin Peterson
Address: 742 B Street
Milford NE 68405
Phone: 402-761-4414
Signature: Justin Peterson

SKETCH SHOWING HOLE LOCATION:



Square Feet of Lateral per Bedroom: _____

Officials Signature

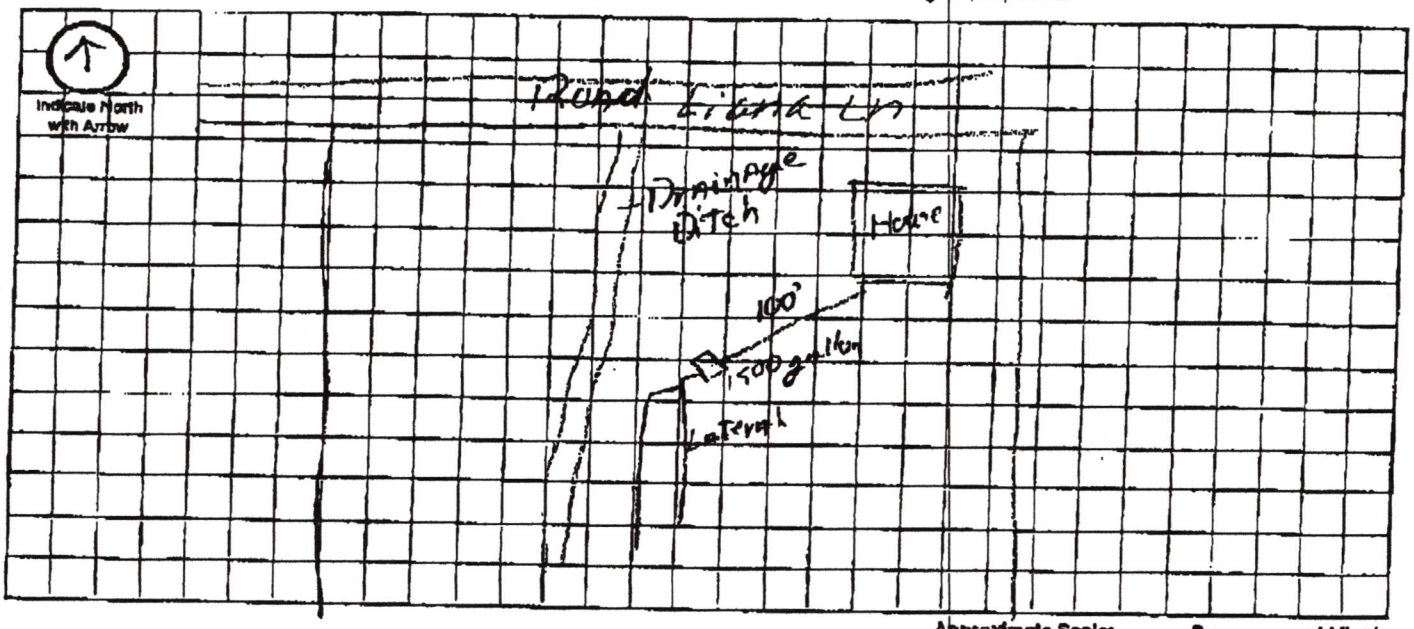
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) 8601 Liana Ln City Lincoln NE, Zip 68517

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 34 (min. per inch) Soil Type: Sharpsburg Land Slope: _____ %

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

Total Square Feet of Field Required: 990 sq. ft.

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

Capacity of Septic Tank 1000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 250 ft. Number of Trenches 2 Trench Width 4'

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 5-4-09

Installer _____ Date 5-4-09

FORM 22-102 10-96

JUL 01 2009

D

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

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 6-24-09 Legal Description SW 1/4 SW 1/4 14-11-7 Section Township Range Finnigan View Lot 6

Onsite System Location

Address (no rural route) 8601 Lianaln City Lincoln NE, Zip 68517

Owner Drew Ferguson Address 2401 Chanticleer Cir Lincoln NE 68521

A. Sewer Pipe

1. Material: SDR26
   Diameter: 4 in.
2. Distance above basement floor: ——— in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 77 ft.
4. Number of clean-outs: one inside house
5. Distances to: well or suction line 100+ ft.
   stream 100+ ft.
   pressure line 100+ ft.
   property line 100+ ft.

B. Septic Tank

☑ Label with Manufacturer, address and gallon capacity

1. Material: concrete
   Number of compartments: one
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade AT grade in.
5. Inlet: ☑ baffle ☐ tee ☐ 6" dia. inspection pipe
6. Outlet: ☑ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: 22 in.
8. Distances to: Well or suction line 100+ ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 100+ ft.

C. ☐ Distribution Box ☐ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: Plastic
   Number available outlets: 3per CAP
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 5' 15' ft.

D. Drainfield Absorption

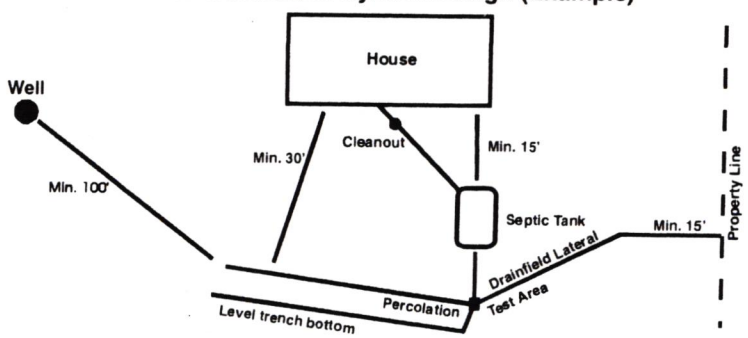
☑ Trench ☐ Bed ☐ Level Bottom

1. Type: ☑ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 12" Tall x 34" wide
   Number of distribution lines in bed ———
   Material: ☑ fiberglass ☑ plastic ☐ concrete
   ☐ other ———
2. Drainfield Laterals: Number 2
   Length of each line: 120' ft. 130' ft.
   ——— ft. ——— ft., ——— ft.
3. Drainfield dimensions: Width 40' ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 42-32 in
4. Filter material: Dirt
   Depth of material 42-32 in.
5. Distances to: Well or suction line 100+ ft.
   Pressure line 100+ ft.
   Property line 10' ft.
   House or building 100+ ft.
   Lake or Stream 100+ ft.

Complete As-Built drawing on the back fo this form.

Onsite Wastewater System Design (Example)

Indicate North with Arrow




N
13'
5'
1500 gallon
2 Riser
77'
10'
cleanout
water
Line
2-45°
owell