LLCHD HS000234

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

SCANNED **A**

Permit Number HS000234

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 4070 SW 112th (no rural route) City DENTON, NE Zip 68339

Legal Description SW 4 9 North Range 5 E of 6th P.M.
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: 23

B. Owner

Name Ben Messman Signature _____

Address 720 West Pioneers Blvd City/State/Zip Denton NE 68339

☐ Check if owner designed system Home Phone _____ Work Phone 525-1801

C. Contractor

Name: Ryan VanAndel Company Name VanAndel Excavation & Const.

Address Box 42 City/State/Zip Pleasant Dale NE 68423

☒ Check if contractor designed system Work Phone 499-1348

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 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 _____ 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 6-3-9 Amount Paid 315.00
Received By AL Cash/Check No. 1133

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

1-8-2010 14:20:21

Form A Updated: 5-07

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. HS000234

System Type:	LAGOON
Situs:	L
Legal Description:	T09N-R05E-S04-Lot 27
Owner:	MESSMAN, BENJAMIN D 7201 W PIONEER BLVD DENTON NE 68339

Permit Fee:	$315.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$315.00
Issued:	06/22/2009
Expires:	06/22/2010

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

RYAN VANANDEL
PO BOX 42
PLEASANT DALE NE 68423

LLCHD HS000234

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
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Legal Description SW 4 9 North Range 5 E of 6th P.M. 27

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 _____ Date frwd _____
ACTION ☐ Approved ☐ Disapproved Signature _____

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Date rec'd 6-22-09 Date frwd 6-22-09
ACTION ☒ Approved ☐ Disapproved Signature _____

3. City or County Engineer
Comments _____
Date rec'd 6-22-09 Date frwd 6-22-09
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

6-22-2009 15:14:29 Form A Updated: 5-07

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

B

Permit Number: HS000234

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 4070 SW 112th (no rural route) City Denton NE NE, Zip 68339

Owner Ben Messman Address 7201 W Pioneers Blvd Denton NE 68339

Soil Type (SCS): Loam / Silt Percolation Rate: 32 min./inch

Date of Tests 5/28 to 5/29 Weather: Precipitation _____ Temperature 75

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	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	2	30
2	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	1 3/4	35
3	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	2	30
4	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	1 7/8	31
5	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	2	30
6	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	1 7/8	32

Person Conducting Percolation Tests

Name: Ryan VanAndel
Phone: 499-1348
Address Box 42 Pleasant Dale NE

Sum of Percolation Rates: 184
Average of Rates: _____
Rate Used for Calculation: 32 min/in

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

LLCHD HS000234

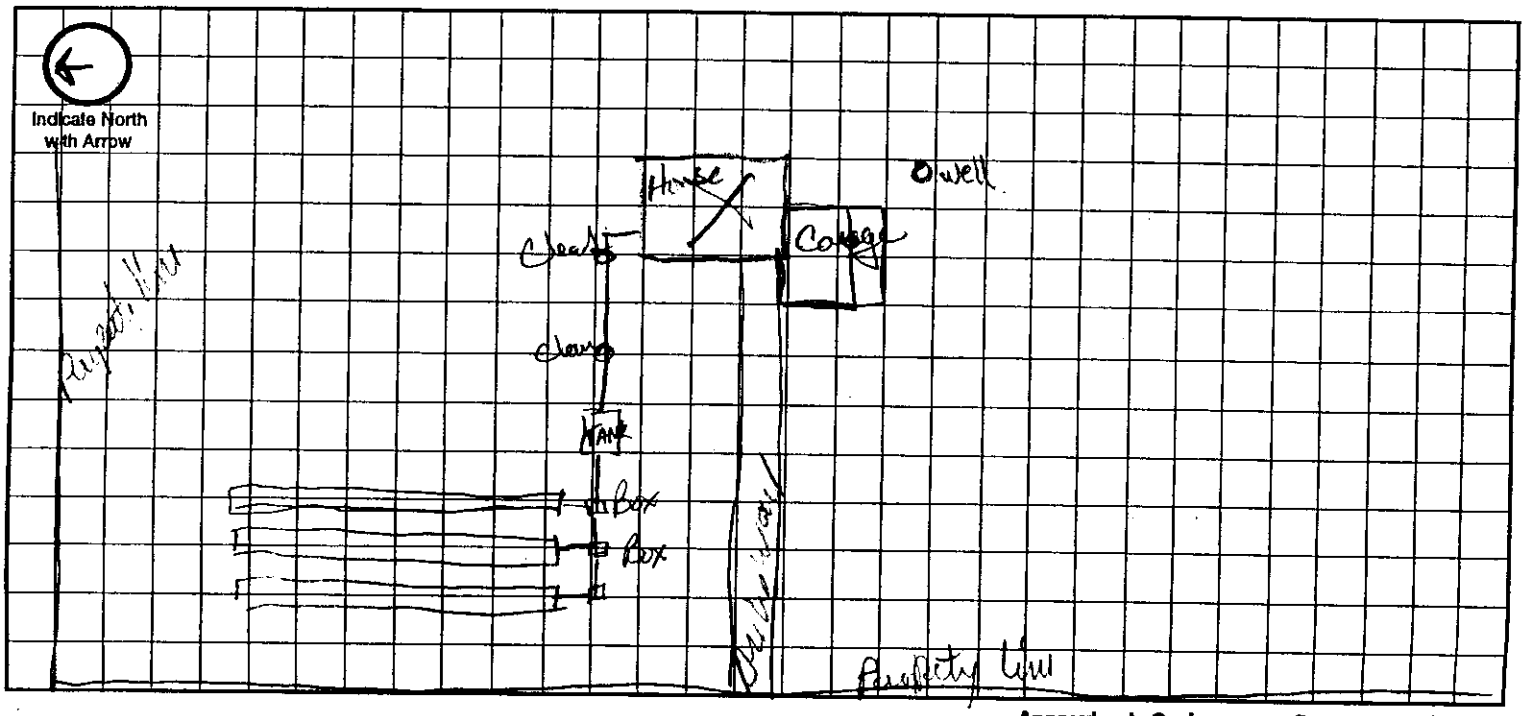
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: HS000234

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) 1070 SW 112th City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other _____

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

Percolation Rate 32 (min. per inch) Soil Type: Sitl Loam Land Slope: 3 %

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

Total Square Feet of Field Required: 825 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 270 ft. Number of Trenches 3 Trench Width 36"

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 Ryan Vorthal Date 5-3-09

Installer _____ Date _____

FORM 23-102 10-96
6-22-2009 15:14:32

LLCHD HS000234

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

JUN 02 2009

D

Permit Number: HS000234

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 5-29-09 Legal Description SW 1/4 (1/4) 1/4 Sect 4 Township 9 N Range 5E of 6th PM
Section Township Range

Onsite System Location

Address (no rural route) 4070 SW 112th City Denton NE, Zip 68339
Owner Ben Messman Address 7201 West Pioneers Blvd 22 the NE

A. Sewer Pipe

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 8 in.
3. Distance between dwelling and septic tank: 120 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100 ft.
   stream / ft.
   pressure line / ft.
   property line / 100 ft.

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Plastic
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☑ below grade 6" 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: 24 in.
8. Distances to: Well or suction line 100 ft.
   Stream / ft.
   Pressure line / ft.
   Property line 100 ft.

C. ☐ Distribution Box ☐ Drop Boxes

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

1. Material: Plastic
   Number available outlets: 3
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 40 ft.

D. Drainfield Absorption

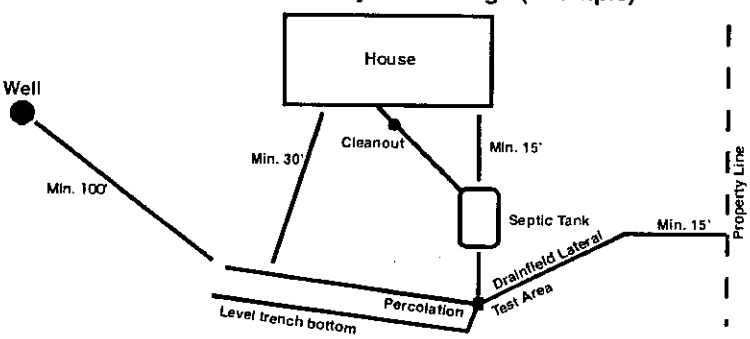
☑ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed ____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other ____
2. Drainfield Laterals: Number 3
   Length of each line: 90 ft. ____ ft.
   ____ ft. ____ ft., ____ ft.
3. Drainfield dimensions: Width 36" ft.
   Distribution Pipe Slope 5" in/100 ft.
   Average depth 60 in
4. Filter material: ____
   Depth of material ____ in.
5. Distances to: Well or suction line ____ ft.
   Pressure line ____ ft.
   Property line ____ ft.
   House or building ____ ft.
   Lake or Stream ____ ft.

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

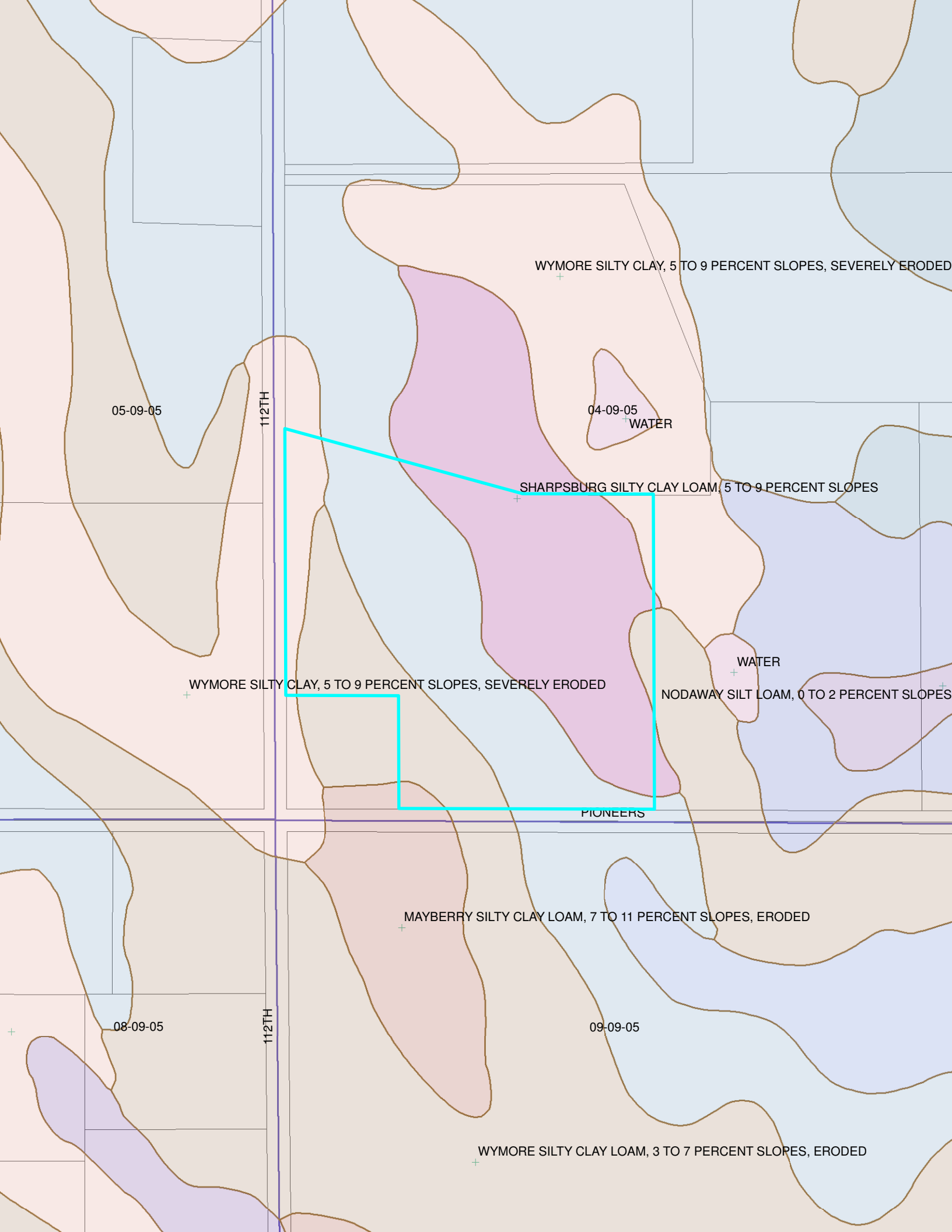
Onsite Wastewater System Design (Example)

Indicate North with Arrow



Onsite Form D 12_06

6-22-2009 15:14:34


WYMORE SILTY CLAY, 5 TO 9 PERCENT SLOPES, SEVERELY ERODED
05-09-05
112TH
04-09-05
WATER
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
WATER
WYMORE SILTY CLAY, 5 TO 9 PERCENT SLOPES, SEVERELY ERODED
NODAWAY SILT LOAM, 0 TO 2 PERCENT SLOPES
PIONEERS
MAYBERRY SILTY CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
08-09-05
112TH
09-09-05
WYMORE SILTY CLAY LOAM, 3 TO 7 PERCENT SLOPES, ERODED

LLCHD HS000234

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

A

Permit Number HS000234

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 4070 SW 112th (no rural route) City DENTON, NE Zip 68339

Legal Description SW 4 9 North Range 5 E of 6th P.M.
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: 23

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Name Ben Messman Signature _____

Address 720 West Pioneers Blvd City/State/Zip Denton NE 68339

☐ Check if owner designed system Home Phone _____ Work Phone 525-1801

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Name: Ryan VanAndel Company Name VanAndel Excavation & Const.

Address Box 42 City/State/Zip Pleasant Dale NE 68423

☒ Check if contractor designed system Work Phone 499-1348

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 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 _____ 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 _____ Amount Paid _____
Received By _____ Cash/Check No. _____

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

6-3-2009 15:38: 5

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

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Permit Number
H5000234

Onsite Wastewater Treatment System
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Date rec'd _____ Date frwd _____
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Comments _____
Date rec'd 6-22-09 Date frwd 6-22-09
ACTION ☒ Approved ☐ Disapproved Signature Todd Wist

3. City or County Engineer
Comments _____
Date rec'd 6-22-09 Date frwd 6-22-09
ACTION ☒ Approved ☐ Disapproved Signature Doug Rinn

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

Business Office Use Only
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Received By DML Cash/Check No. 1133

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

Form A Updated: 5-07

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SCANNED

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
Date Received 6-3-9 Amount Paid 315.00
Received By AL Cash/Check No. 1133

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

Form A Updated: 5-07

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

SCANNED

B

Permit Number: HS000234

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

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Owner Ben Messman Addresss 7201 W Pioneers Blvd Denton NE 68339

Soil Type (SCS): Loam / Silt Percolation Rate: 32 min./inch

Date of Tests 5/28 to 5/29 Weather: Precipitation _____ Temperature 78

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		Start		End		Start			End				
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6	36	05/28	9:00	05/29	11:00	5/29	11:30		5/29	12:30	60	1 7/8	32

Person Conducting Percolation Tests

Name: Ryan VanAndel

Phone: 499-1348

Address Box 42 Pleasant Dale NE

Sum of Percolation Rates: 188

Average of Rates: _____

Rate Used for Calculation: 32 min/in

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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

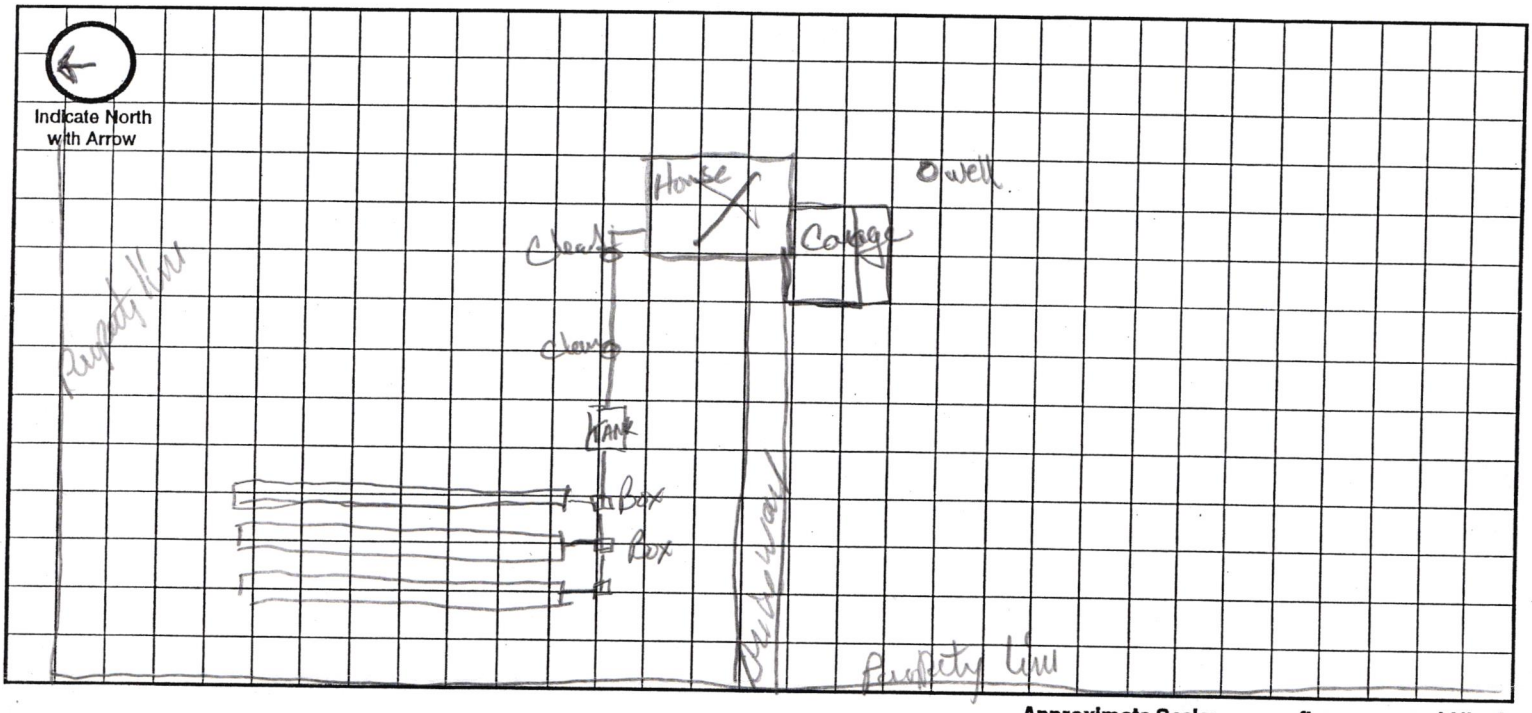
SCANNED

C

Permit Number: HS000234

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) 4070 SW 112th City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☒ Plastic ☐ Other _____

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

Percolation Rate 32 (min. per inch) Soil Type: Silt Loam Land Slope: 3 %

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

Total Square Feet of Field Required: 825 sq. ft.

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

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 270 ft. Number of Trenches 3 Trench Width 36"

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 Ryan Vanstal Date 5-30-09

Installer _____ Date _____

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

JUN 02 2009

D

Permit Number: HS0000234

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 5-29-09 Legal Description SW 1/4 1/4 Sect 4 Township 9 N Range 5E of 6th PM
Section Township Range

Onsite System Location

Address (no rural route) 4070 SW 112th City Denton NE, Zip 68339
Owner Ben Messman Address 7201 West Pioneers Blvd Denton NE

A. Sewer Pipe

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 8 in.
3. Distance between dwelling and septic tank: 120 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 150 ft.
   stream / ft.
   pressure line / ft.
   property line 100 ft.

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Plastic
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☑ below grade 6" 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: 32 in.
8. Distances to: Well or suction line 150 ft.
   Stream / ft.
   Pressure line / ft.
   Property line 100 ft.

C. ☐ Distribution Box ☐ Drop Boxes

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

1. Material: Plastic
   Number available outlets: 3
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 40 ft.

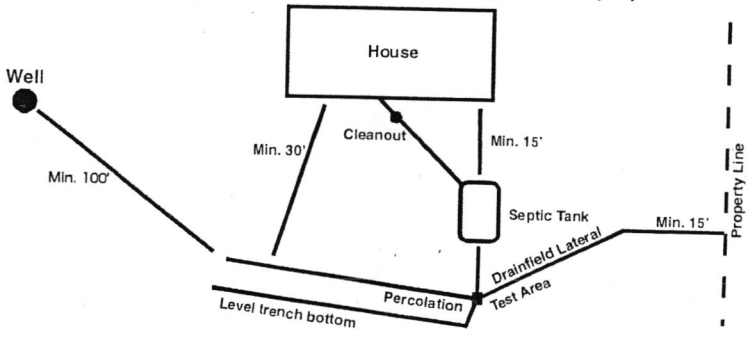
D. Drainfield Absorption

☑ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 3
   Length of each line: 90 ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width 36" ft.
   Distribution Pipe Slope 5" in/100 ft.
   Average depth 60 in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   House or building _____ ft.
   Lake or Stream _____ ft.

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

Onsite Wastewater System Design (Example)



Indicate North with Arrow