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. HS000434

System Type: STANDARD

Situs: 21112 NW 70 ST

Legal Description: T12N-R05E-S11-1-Lot 2 &3

Owner:

Permit Fee:	$335.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$335.00

Issued:	11/16/2010
Expires:	11/16/2011

Judith A Halstead

Judith A. Halstead, MS, 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.

Judith A Halstead

Judith A. Halstead, MS
Health Director

RAYMOND CONTRACTING
13800 NW 70TH
RAYMOND NE 68428

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

SCANNED

A

Permit Number HS000434

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 21112 NW 70th St (no rural route) City Raymond NE Zip 68428 parcel 1a

Legal Description SE 11 12 5 AGNEW 1 2&3
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 06-12-301-004-000

B. Owner

Name Federal National Mortgage Assoc. * Signature existing Agent Gaye L. Smith

Address 14221 Dallas Pkwy Ste 1000 City/State/Zip Dallas, TX 75254

Home Phone 402-432-2648 Work Phone 402-432-2648

C. Certified Installer

Name: Lloyd Jirkovsky, Raymond Contracting Signature Lloyd Jirkovsky (for Lloyd)

Address 13801 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6009 or 783-2643

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres .42

☐ 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 11/8/10
Date frwd 11/8/10
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 11-5-10 Amount Paid 335.00
Received By LH Cash/Check No. 7496

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

Form A Updated:

* Existing System


11-12-05
70TH
12-12-05

NOV 5 2010

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number HS000434

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 2112 NW 70th St (no rural route) City Raymond NE Zip 68428 partial lot

Legal Description SE 11 12 5 Agnew 1 223
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 06-12-301-004-000

B. Owner

Name Federal National Mortgage Assoc * Signature Existing Agent Sonya L. Smith

Address 14221 Dallas Pkwy Ste. 1000 City/State/Zip Dallas, TX 75254

Home Phone 402-432-2648 Work Phone 402-432-2648

C. Certified Installer

Name: Lloyd Jirousek, Raymond Contracting Signature Lloyd Jirousek (for Lloyd)

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6009 or 783-2663

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres .42

☐ 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

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1. Health Department Site visits
Date rec'd 11/8/10 Date frwd 11/8/10 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:

* Existing System

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

B

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 21112 N.W. 70th St. (no rural route) City Agnew NE, Zip

Owner Federal National Mortgage Address 14221 Dallas Pkwy Dallas Texas 7525

Soil Type (SCS): Pevrian Percolation Rate: min./inch

Date of Tests 9/24 to 9/25 Weather: Precipitation 1/2" overnight Temperature 60+

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)
36	1	9/24	6:30	9/25	1:30	9/25	5:00	32 1/2	9/25	5:30	30	1 1/8	27
36	2	9/24	6:30	9/25	1:00	9/25	5:00	30 1/8	9/25	5:30	30	1 1/4	24
38	3	9/24	6:30	9/25	1:00	9/25	5:00	30 1/2	9/25	5:30	30	1 1/4	24
36	4	9/24	6:30	9/25	1:00	9/25	5:00	33 1/8	9/25	5:30	30	1	30
39	5	9/24	6:30	9/25	1:00	9/25	5:00	33 1/8	9/25	5:30	30	1 1/4	24
36	6	9/24	6:30	9/25	1:00	9/25	5:00	30 1/4	9/25	5:30	30	1 1/4	24

Person Conducting Percolation Tests

Name: Claude Orr PE 3939
Phone: 402-486-4444
Address 6645 S. 66th St.
Lincoln NE. 68516

Sum of Percolation Rates: 153
Average of Rates: 25.5
Rate Used for Calculation: 30

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

RM 23-101 10-96

LLCHD HS000434

C

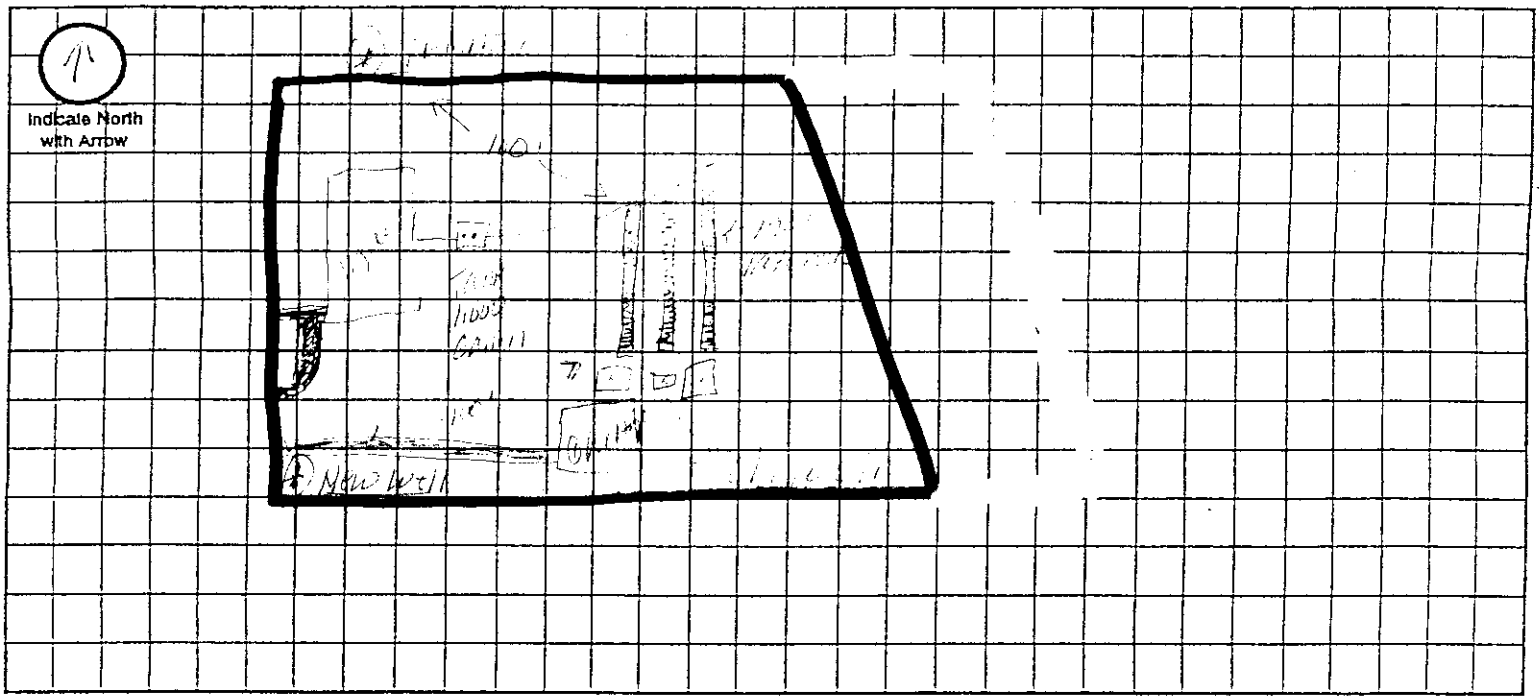
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) 2112 NW 70th St City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 25 (min. per inch) Soil Type: Kennebec Land Slope: _____ %

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

Total Square Feet of Field Required: 750 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☑ Other Lateral Material: Cultec chambers - HD5

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 150 ft. Number of Trenches 3 Trench Width 40"

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 Existing Home Date _____

Installer _____ Date 11-4-10

NOV 5 2010

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

SCANNED

A

Permit Number #5000434

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 2112 NW 70th St (no rural route) City Raymond NE Zip 68428 (part of)

Legal Description SE 11 12 5 Agnew 1 283

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

Geographical Location (if known): Lat/Long: PID 06-12-301-004-000

B. Owner

Name Federal National Mortgage Assoc * Signature (listing agent) Sara L. Smith

Address 14221 Dallas Pkwy Ste. 1000 City/State/Zip Dallas, TX 75254

* Home Phone 402-432-2648 Work Phone 402-432-2648

C. Certified Installer

Name: Lloyd Jirkovsky, Raymond Contracting Signature Lloyd Jirkovsky (for Lloyd)

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6009 or 783-2663

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres .42

☐ 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 11/8/10
Date frwd 11/8/10
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

Business Office Use Only
Date Received 11-8-10 Amount Paid 335.00
Received By LN Cash/Check No. 7496

Installation Final Written Approval
By Doug Smith
Date 11/12/10

SCANNED

White - Health Department Yellow - Engineer Pink - Building & Safety Form A Updated:

* Existing System

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

SCANNED

NOV 5 2010

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 21112 N.W. 70th St. (no rural route) City Agnew NE, Zip

Owner Federal National Mortgage Address 14221 Dallas PKWAY Dallas Texas 7525

Soil Type (SCS): Peorian Percolation Rate: min./inch

Date of Tests 9/24 to 9/25 Weather: Precipitation 1/2" overnight Temperature 60+

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A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			End				
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36	4	9/24	6:30	9/25	1:00	9/25	5:00	33 1/8	9/25	5:30	30	1	30
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36	6	9/24	6:30	9/25	1:00	9/25	5:00	30 1/4	9/25	5:30	30	1 1/4	24

Sum of Percolation Rates: 153
Average of Rates: 25.5
Rate Used for Calculation: 30

Person Conducting Percolation Tests

Name: Claude Orr PE 3939
Phone: 402-486-4444
Address 6645 S. 66th St.
Lincoln Ne. 68516

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

RM 23-101 10-96

SCANNED

NOV 5 2010

C

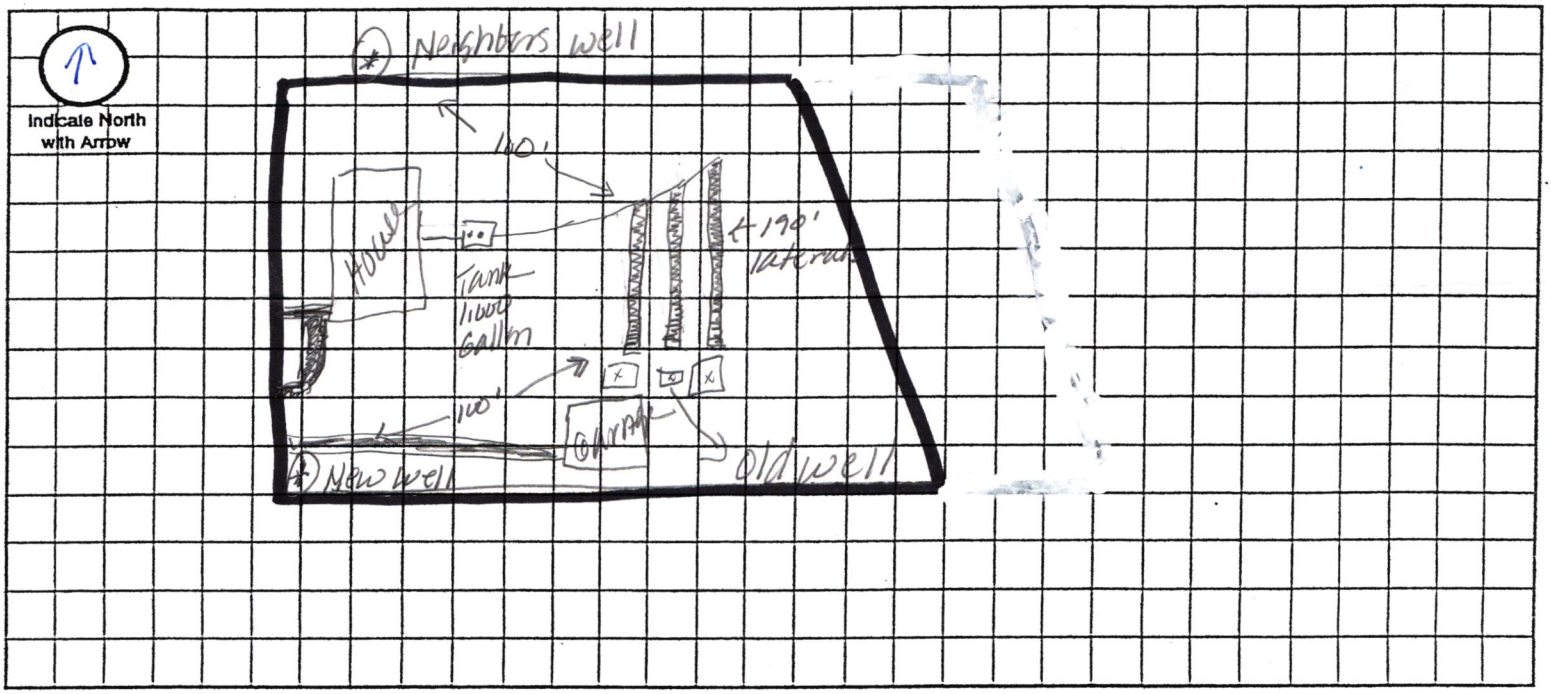
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) 2112 NW 70th St City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 30 (min. per inch) Soil Type: Kennebec Land Slope: _____ %

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

Total Square Feet of Field Required: 750 sq. ft.

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

Capacity of Septic Tank 1,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 190 ft. Number of Trenches 3 Trench Width 40"

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 Existing Home Date _____

Installer [signature] Date 11-4-10

FORM 23-102 10-96

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

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 11-11-10 Legal Description SE 1/4 1/4 11-12-5 Section Township Range Acreu Lot 273 and part of Lot 1

Onsite System Location

Address (no rural route) 21112 NW 70th St City Raymond NE, Zip 68428

Owner Federal National Mortgage Address 14221 Dallas Pkwy St 1000 Dallas Tx 75254

A. Sewer Pipe

1. Material: old 3" Heavy out of House / Then SDR26
   Diameter: 4" in.
2. Distance above basement floor: 36" in.
   or distance below basement floor: 12" in.
3. Distance between dwelling and septic tank: 28'+- ft.
4. Number of clean-outs: one
5. Distances to: well or suction line 90' 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: 1000 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: 12 in.
8. Distances to: Well or suction line 90 ft.
   Stream 100+ ft.
   Pressure line 100+ ft.
   Property line 90+ ft.

C. ☑ Distribution Box ☑ Drop Boxes

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

1. Material: ADS Endcaps.
   Number available outlets: 2 per Cap
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 7' 17' 27' ft.

D. Drainfield Absorption

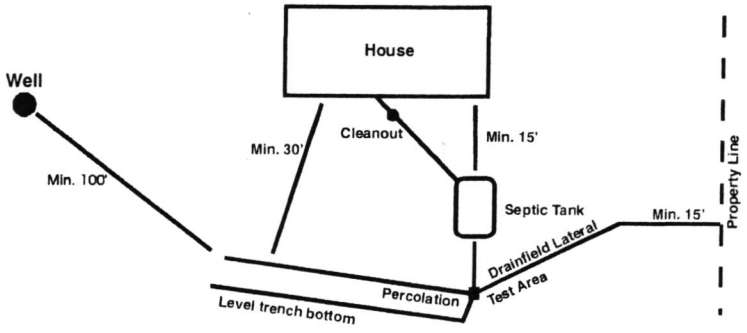
☑ Trench ☐ Bed ☐ Level Bottom

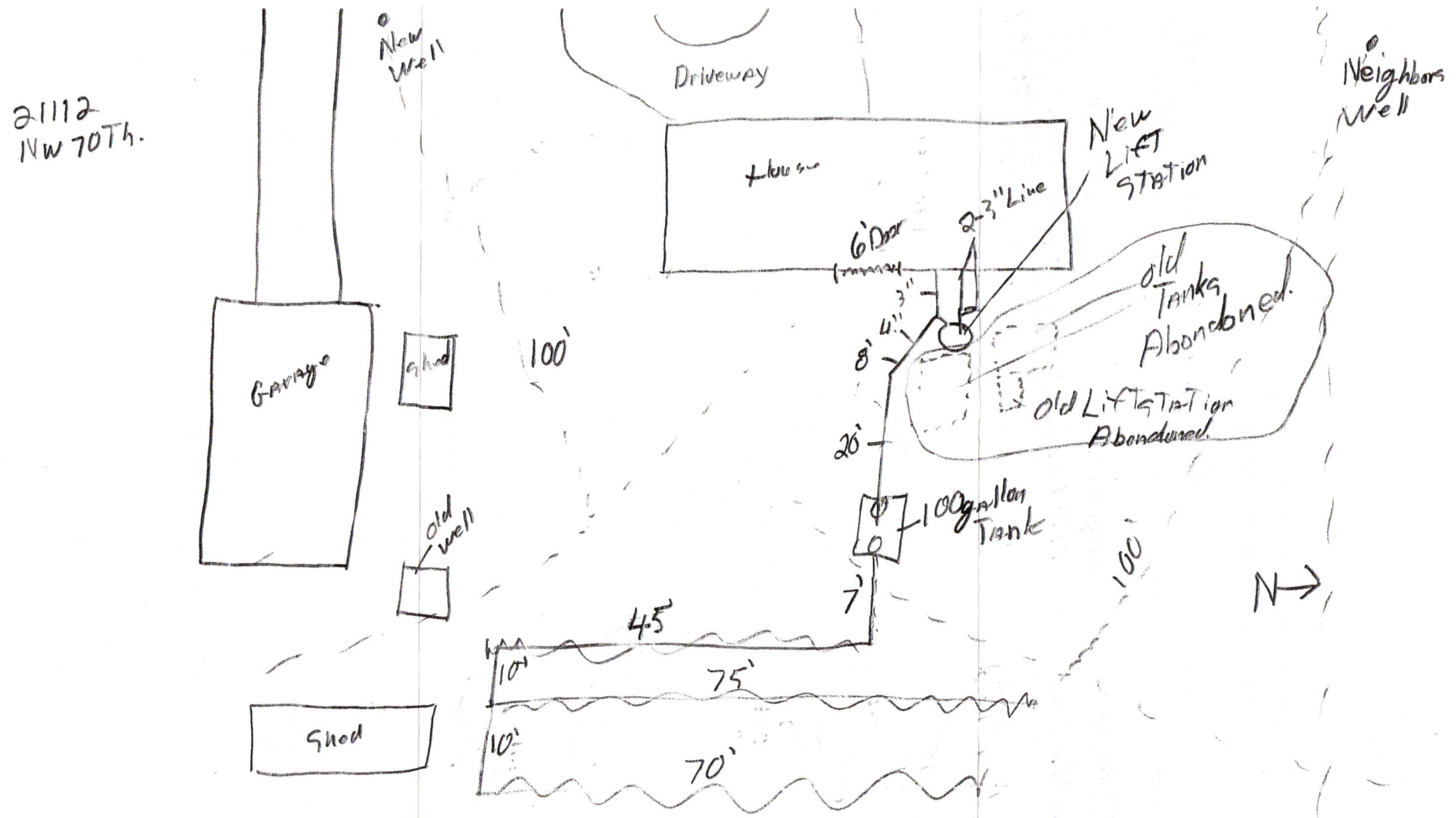
1. Type: ☐ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width:
   Number of distribution lines in bed
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other
2. Drainfield Laterals: Number 3
   Length of each line: 45 ft. 75 ft.
   70 ft. ft., ft.
3. Drainfield dimensions: Width 40 ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 24 - 32 in
4. Filter material: Dirt
   Depth of material 24-32 in.
5. Distances to: Well or suction line 100+ ft.
   Pressure line 100+ ft.
   Property line 10+ ft.
   House or building 30+ ft.
   Lake or Stream 100+ ft.

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

Indicate North with Arrow

Onsite Wastewater System Design (Example)





Raymond Contracting.
783-2663
11/11/2010