LLCHD HS000681

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

A

Permit Number
HS000681

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 6525 Winterberry Ln (no rural route) City Lacq , NE Zip

Legal Description Preserve at Cross Creek 1st Addition Lot 2 Blk 2

1/4	1/4	Section	Township	Range	Subdivison	Addition	Block	Lot
		16	8	7				

Geographical Location (if known): Lat/Long: PID

B. Owner

Name Chad + Amy Termaat Signature

Address PO Box 373 City/State/Zip Firth

Home Phone Work Phone

C. Certified Installer

Name: Nathan Peterson Signature

Address 7701 Cornhusker Hwy City/State/Zip Lincoln NE 68507

Work Phone 402-202-8130

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 5 Is there a Whirlpool Bathtub? ☒ Yes ☐ No Total Acres 3+

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 2100

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 10/29/12
Date frwd 10/29/12
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 10-29-12
Date frwd 10-29-12
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 10-29-12
Date frwd 10-29-12
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploug

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 10-30-12 Amount Paid 355.00
Received By B Hull Cash/Check No. 3290

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

Form A Updated: 5/10

10-31-2012 8:45:53

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

B

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 6525 Winterberry Ln. City Roca NE, Zip
(no rural route)
Owner Chad & Amy Termaat Address PO Box 373 Firth NE 68358

Date of Tests 10/4/12 to 10/5/12 Weather: Precipitation 0 Temperature 75°

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					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)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	48	10/4	8:00	10/4	12:00	10/5	1:00	6	10/5	5:00	30	5/8	48
2	42							6			30	5/8	48
3	48							6			30	1/2	60
4	48							6			30	1/2	60
5	46							6			30	5/8	48
6	44							6			30	1/2	60
								6					
								6					

Person Conducting Percolation Test

Name: Nathan Peterson
Phone: 402-202-8130
Address 7701 Cornhusker Hwy Suite 5
Lincoln NE 68507

Soil type (NRCS Maps/Other) 7206 + 7684 Wymore
Groundwater Depth N/A

Sum of Percolation Rates: 324
Average of Rates: 54
Rate Used for Calculation: 54

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

Onsite Form B 12_06

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Environmental Public Health Division
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Phone: 402-441-8022

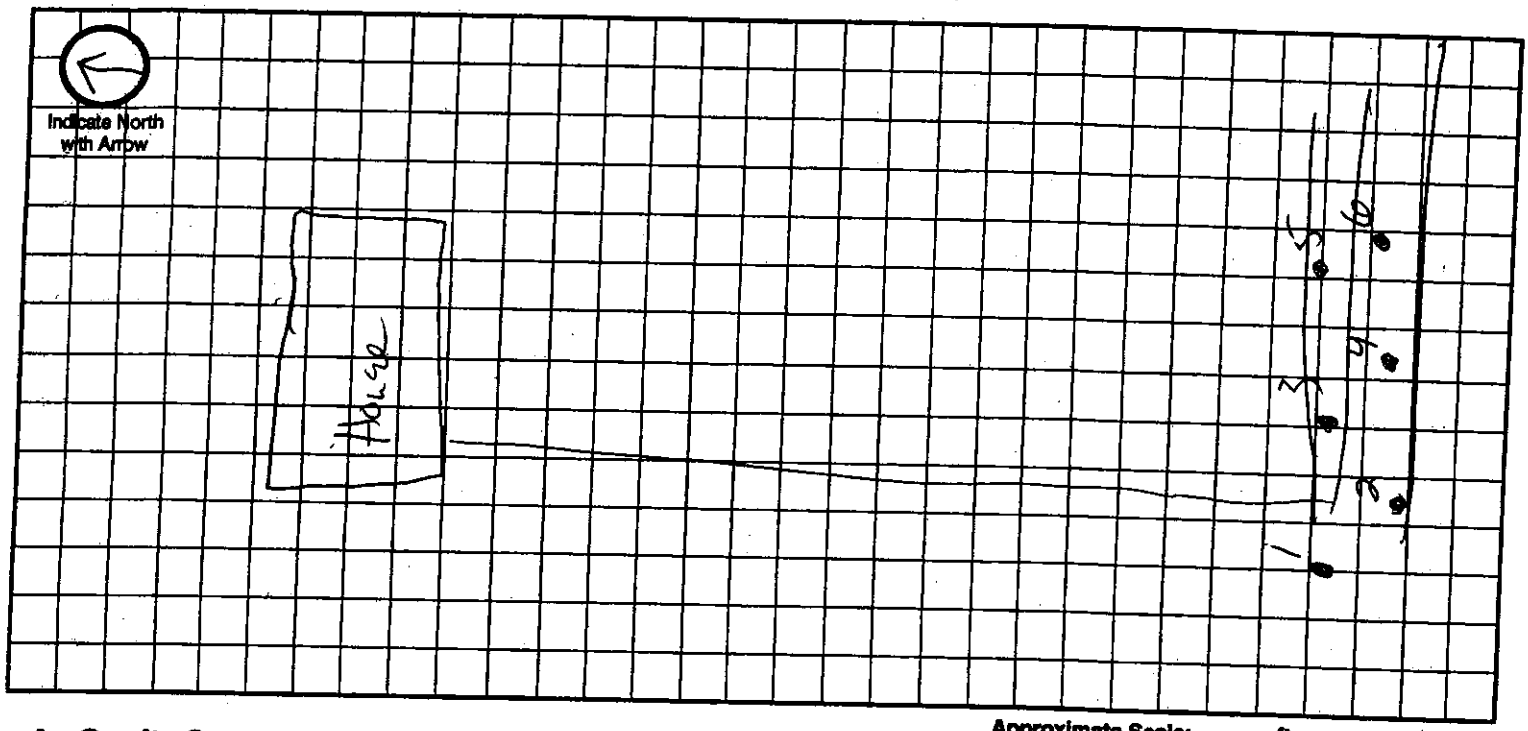
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ft. = _____ grid line/s

A. Onsite System Location

Address (no rural route) 6525 Winterberry Ln City Roca NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap. 1750 gals Tank Material: ☒ Concrete ☐ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1/8" per day)

C. Reserve Area for Replacement Onsite System

☒ Drainfield Absorption Area (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 54 (min/inch = mpi) No. of Bedrooms 5 Soil Type Wymore Land Slope_____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 2400 sq.ft.

Total length of laterals 525 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches 4 Width 3' No. of drop boxes 1/2 Distrubtion Box no

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

E. 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 ☐	☐

F. Required Signatures

Home Building Contractor_____ Date _____

Installer_____ Date _____

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. HS000681

System Type: STANDARD

Situs: 6525 WINTERBERRY LN

Legal Description: T08N-R07E-S16-2-Lot 2

Owner:

Permit Fee:	$355.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$355.00

Issued: 10/30/2012
Expires: 10/30/2013

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

INFINITY EXCAVATING
7701 CORNHUSKER HWY STE 5
LINCOLN NE 68507