LLCHD HS000683

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

OCT 26 2012

A

Permit Number
HS000683

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 3355 Trudy Ann Cir City Raymond NE Zip 68428
(no rural route)

Legal Description Willard Estates 2nd Add 2 S
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 13-32-402-009-000

B. Owner

Name Greg Hayes Signature
Address 1847 Timber Ridge Rd City/State/Zip Lincoln, Ne 68522
Home Phone 438-6001 Work Phone 417-8750

C. Certified Installer

Name: Kurt Virgil Signature
Address 4670 W Mary Lovin Ln City/State/Zip Lincoln, Ne 68528
Work Phone 402-525-6681

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 2.44

☐ 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. 02-39

1. Health Department
Site visits
Date rec'd 10/30/12
Date frwd 10/30/12
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 10-31-12 Amount Paid 355.00
Received By BM Cash/Check No. 2132

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

Form A Updated: 5/10

10-31-2012 10:36:29

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
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OCT 30 2012

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Legal Description Willard Estates 3rd Add 2 5

1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (If known): Lat/Long: PID 13-32-402-009-000

B. Owner

Name Greg Hayes Signature

Address 1847 Timber Ridge Rd City/State/Zip Lincoln Ne 68523

Home Phone 438-6601 Work Phone 417-8750

C. Certified Installer

Name: Kent Virgil Signature

Address 4600 W Mary Lawrence Ln City/State/Zip Lincoln, Ne 68528

Work Phone 402-525-6641

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 3.44

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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 fwd
ACTION ☐ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 10-29-12
Date fwd 10-30-12
ACTION ☒ Approved ☐ Disapproved
Signature Everett Hansen

3. City or County Engineer
Comments
Date rec'd
Date fwd
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 5/10

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 3355 Trudy Ann Cir (no rural route) City Raymond NE, Zip 68428

Owner Greg Hayes Address 1847 Timber Ridge Rd Lincoln 68522

Date of Tests 3-1-12 to 3-2-12 Weather: Precipitation No Temperature 50°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop: Last 30 mins of 4 hr or last 10 mins of 1 hr					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	36	3-1	1000	3-1	200	3-2	215	6	3-2	245	30	2	15
2	"	"	"	"	"	"	"	6	"	"	"	3/4	40
3	"	"	"	"	"	"	"	6	"	"	"	1 1/4	24
4	"	"	"	"	"	"	"	6	"	"	"	2 1/4	13
5	"	"	"	"	"	"	"	6	"	"	"	3 1/2	9
6	"	"	"	"	"	"	"	6	"	"	"	1	30
7	"	"	"	"	"	"	"	6	"	"	"	3 1/4	9
8	"	"	"	"	"	"	"	6	"	"	"	2 1/4	13

Person Conducting Percolation Test

Name: Kurt Virgil

Phone: 525-6681

Address 4620 W Mary Lucia Ln

Sum of Percolation Rates: NA

Average of Rates: NA

Rate Used for Calculation: Used 41-50 mpi

Soil type (NRCS Maps/Other) Judson Silt Loam

Groundwater Depth > 9' dry test hole

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Onsite Form B 12_06

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 3355 Trudy Ann Cir (no rural route) City Raymond NE, Zip 68428

Owner Greg Hayes Address 1847 Timber Ridge Rd Lincoln 68527

Date of Tests 3-1-12 to 3-2-12 Weather: Precipitation No Temperature 50°

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		Initial	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 Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
9	36	3-1	1000	3-1	200	3-1	215	6	3-2	245	30	1 5/8	48
10	1	1	1	1	1	1	1	6		1	1	1 3/4	17
11	1	1	1	1	1	1	1	6		1	1	2 1/2	12
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Kurt Vipond

Phone: 525-6681

Address 4620 W Mary Lois Ln

Sum of Percolation Rates: NA

Average of Rates: NA

Rate Used for Calculation: wet 41-50 mpi

Soil type (NRCS Maps/Other) Judson Silt Loam

Groundwater Depth > 91

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Onsite Form B 12_06

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

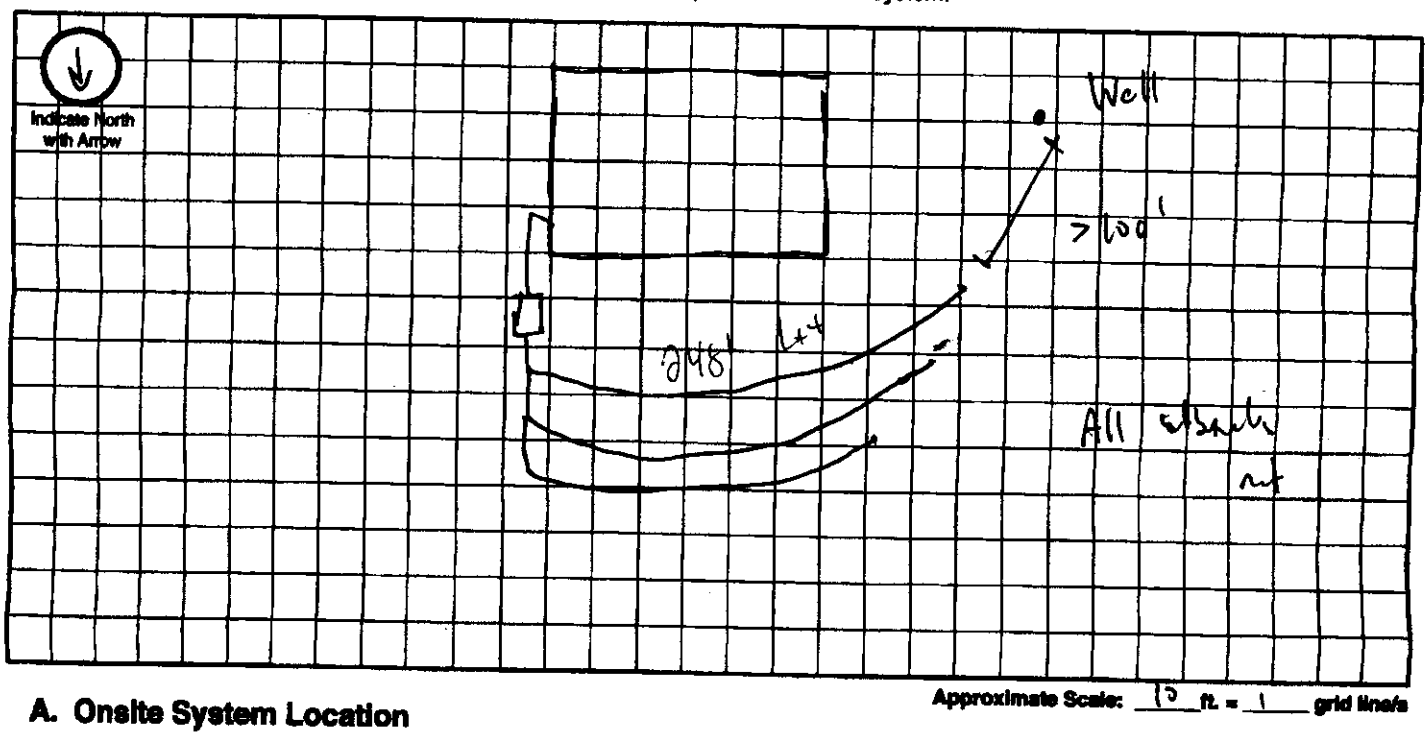
C

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: 10 ft. = 1 grid line/s

A. Onsite System Location

Address (no rural route) 3355 Trudy Ann Cir City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 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 41-50 (min/inch = mpi) No. of Bedrooms 3 Soil Type Judson Land Slope 7 %

☑ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 990 sq.ft.

Total length of laterals 248 Type of distribution: ☐ Perforated pipe ☑ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches 3 Width 36" No. of drop boxes 3 Distrubtion Box —

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 10-24-12

Onsite Form C 12_06

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. HS000683

System Type:	STANDARD
Situs:	3355 Trudy Ann Cir.
Legal Description:	T12N-R06E-S32-2-Lot 5
Owner:	

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

Issued:	10/31/2012
Expires:	10/31/2013

Judith A Halstead

Judith A. Halstead, MS, Health Director

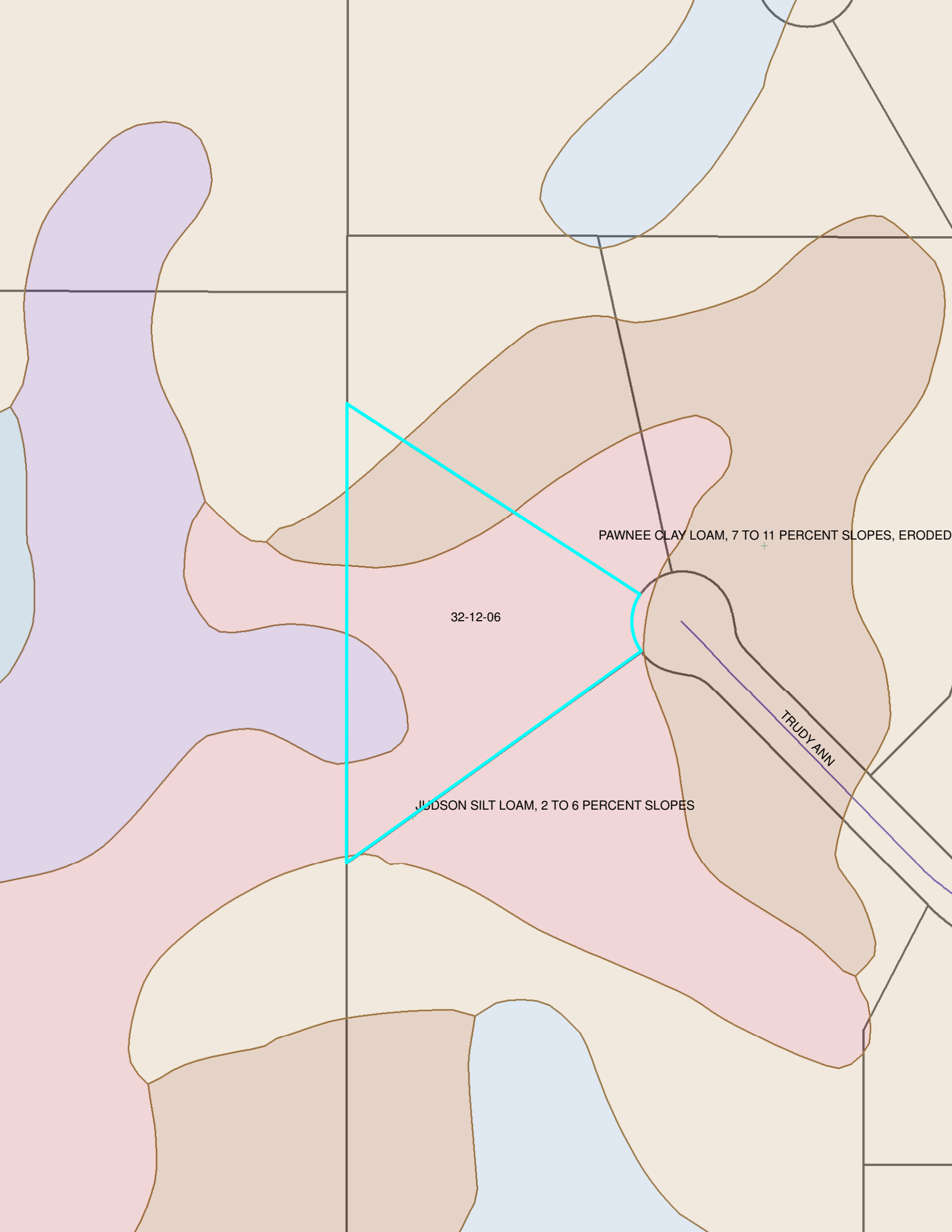
On-site Waste System Permit Holder:

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

GREG HAYES
1847 TIMBER RIDGE RD
LINCOLN NE 68522


PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
32-12-06
TRUDY ANN
JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES

DEC 24 2012

D

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

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 12-21-12

System Location (Indicate correct number and street)

Address 3355 Trudy Ann Cir (no rural route) City Raymond NE, Zip 68428

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: - in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 47 ft.
4. Number of clean-outs: 1
5. Distances to: well or suction line >100 ft.
   stream >50 ft.
   pressure line >25 ft.
   property line >25 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
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 4 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 24 in.
8. Distances to: Well or suction line >100 ft.
   Stream >50 ft.
   Pressure line >25 ft.
   Property line >25 ft.

C. Distribution Box

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

D. Absorption Field

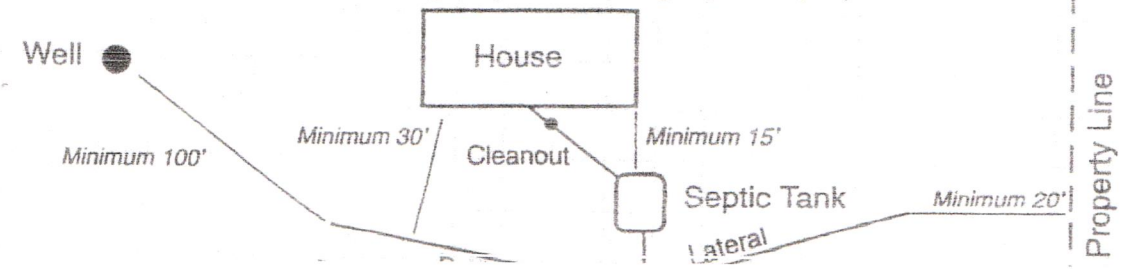
(Provide as-built drawings on back of this form)

1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 36"
   or perforated pipe:
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other
2. Lateral lines: Number 3
   Length of each line: 80 ft. 84 ft.
   84 ft. ft., ft.
3. Trench dimensions: Width 3 ft.
   Slope 0 in/100 ft.
   Average depth 36 in
4. Filter material: NA
   Depth of material NA in.
5. Distances to: Well or suction line >100 ft.
   Stream >50 ft.
   Pressure line >25 ft.
   Property line >25 ft.

Indicate North with Arrow

Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)

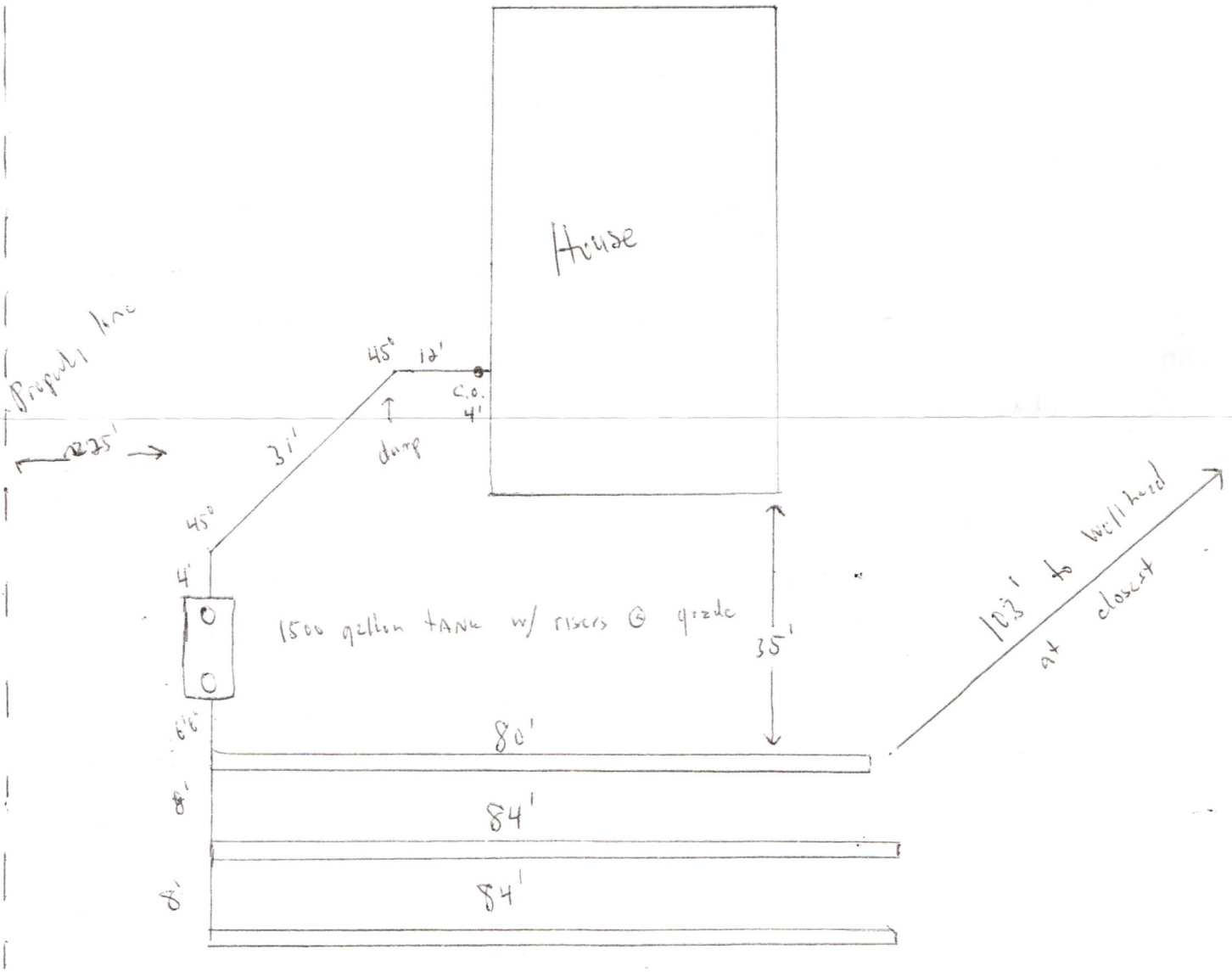


Grey Hayes
3355 Trudy Ann Cir
Raymond, Ne 68528

Septic Info
Completed 12-13-12

N

= 10'



248' lateral ~ 3' deep
w/ 2' soil cover

all setbacks met