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

A

Permit Number H5000730

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 4700 Mill Rd City Davey, NE Zip 68336
(no rural route)

Legal Description W½ SE¼ 5 T-11-N R-7-E
1/4 1/4 Section Township Range Subdivison Addition Block Lot

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

B. Owner

Name Randy Giebenrath Signature _____
Address 4700 Mill Rd City/State/Zip Davey Ne 68336
Home Phone 402-817-9765 Work Phone 402-344-0176

C. Certified Installer

Name: Harry L. Muhlbach # C1624 Signature Harry L. Muhlbach
Address 5701 Vine Str City/State/Zip Lincoln, Ne 68505
Work Phone 402-430-7304

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+

☐ Commercial Establishment/Other Facility Specify _____ Design flow in gallons per day 400

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 5/9/13
Date frwd 5/9/13
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 5/9/13

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

+ Exhibit Home

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 4700 Mill Rd (no rural route) City Davey NE, Zip 68336

Owner Randy Giebenrath Address 4700 Mill Rd, Davey, Ne 68336

Date of Tests 10-2-12 to 10-3-12 Weather: Precipitation Normal 0 Temperature 70's

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	30"	10-2	8:00	10-2	6:10	10-3	8:00	6	10-3	12:00	30 Min	.25	40
2	30"	10-2	8:05	10-2	6:15	10-3	8:05	6	10-3	12:05	"	.80	37.5
3	30"	10-2	8:10	10-2	6:20	10-3	8:10	6	10-3	12:10	"	.75	40
4	30"	10-2	8:15	10-2	6:25	10-3	8:15	6	10-3	12:15	"	.85	35.3
5	30"	10-2	8:20	10-2	6:30	10-3	8:20	6	10-3	12:20	"	.85	35.3
6	30"	10-2	8:25	10-2	6:35	10-3	8:25	6	10-3	12:25	"	.90	33.3
								6					
								6					

Person Conducting Percolation Test

Name: Harry Muhlbach
Phone: 402-430-7304
Address 5101 Vine St, Lincoln, Ne 68505

Sum of Percolation Rates: 221.4
Average of Rates: 36.9
Rate Used for Calculation: 36.9 (30-40)

Soil type (NRCS Maps/Other) Judson silt Loam
Groundwater Depth Deep 100'+

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

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

North Bluff.

Date 2-15-13 Legal Description SW of SE (1/4 1/4) 5-T-11-N-R-7-E (Section Township Range)

Onsite System Location

Address (no rural route) 4700 Mill Rd City Lincoln NE, Zip 68514

Owner Randy Giebenrath Address 4700 Mill Rd

A. Sewer Pipe

1. Material: Schedule 40
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 72 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 100 ft.
   stream — ft.
   pressure line — ft.
   property line 200 ft.

B. Septic Tank

☑ Label with Manufacturer, address and gallon capacity

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 Level 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 115 ft.
   Stream — ft.
   Pressure line — ft.
   Property line — ft.

C. ☐ Distribution Box ☐ Drop Boxes

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

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

D. Drainfield Absorption

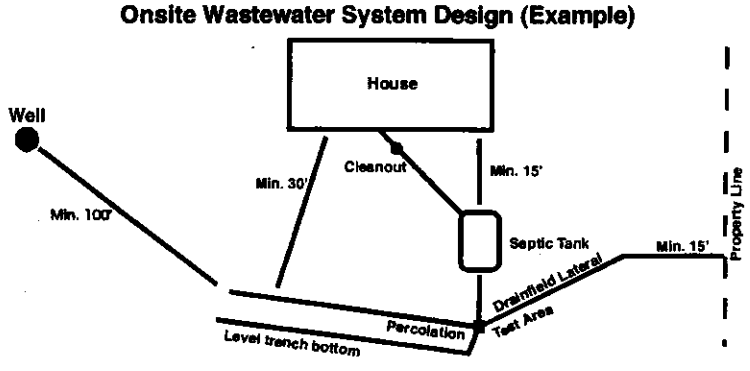
☐ Trench ☐ Bed ☑ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed 2
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 3
   Length of each line: 63 ft. 69.3 ft.
   69.3 ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width 4 ft.
   Distribution Pipe Slope 4 in/100 ft.
   Average depth 24 in
4. Filter material: gravel + soil
   Depth of material 12 in.
5. Distances to: Well or suction line 165 ft.
   Pressure line — ft.
   Property line 50 ft.
   House or building 20 ft.
   Lake or Stream — ft.

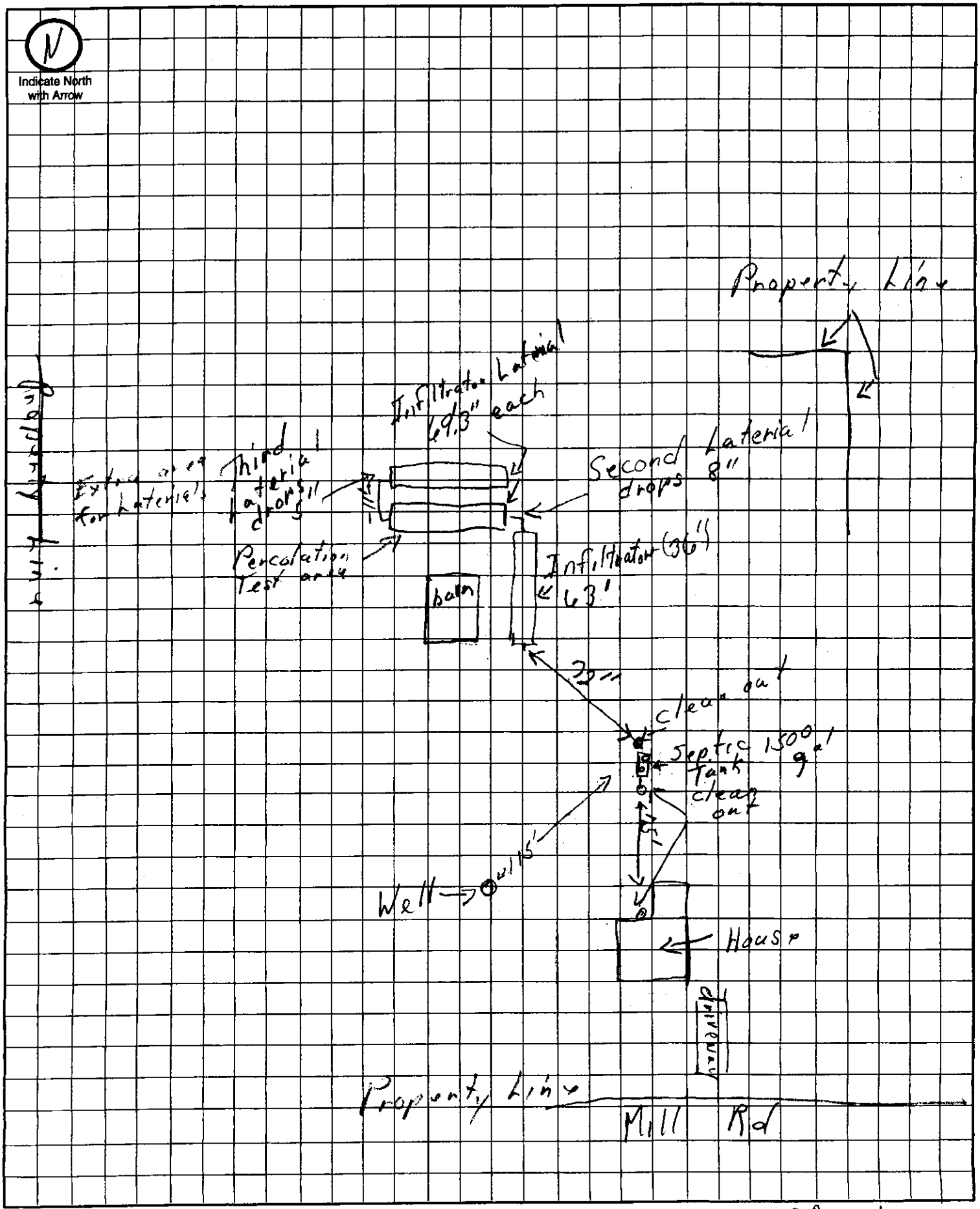
Complete As-Built drawing on the back fo this form.

Onsite Wastewater System Design (Example)

Indicate North with Arrow



As Built Drawing



Approximate Scale: 20 ft. = 1 grid line/s

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

A

Permit Number
#5000730

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.

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(no rural route)

Legal Description W½ SE¼ 5 T-11-N R-7-E
1/4 1/4 Section Township Range Subdivison Addition Block Lot

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

B. Owner

Name Randy Giebenrath Signature
Address 4700 Mill Rd City/State/Zip Davey Ne 68336
Home Phone 402-817-9765 Work Phone 402-344-0176

C. Certified Installer

Name: Harry L. Muhlbach # C1624 Signature Harry L. Muhlbach
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Work Phone 402-430-7304

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+

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 400

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 3/19/13
Date frwd 3/19/13
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 5/17/13

Business Office Use Only
Date Received 3-20-13 Amount Paid 355.-
Received By BH Cash/Check No. 10395

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

Form A Updated: 5/10

Exhibit Home

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 4700 Mill Rd (no rural route) City Davey NE, Zip 68336

Owner Randy Giebenrath Address 4700 Mill Rd, Davey, Ne 68336

Date of Tests 10-2-12 to 10-3-12 Weather: Precipitation Normal 0 Temperature 70's

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)
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2	30"	10-2	8:05	10-2	6:15	10-3	8:05	6	10-3	12:05	"	.80	37.5
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6	30"	10-2	8:25	10-2	6:35	10-3	8:25	6	10-3	12:25	"	.90	33.3
								6					
								6					

Person Conducting Percolation Test

Name: Harry Muhlbach
Phone: 402-430-7304
Address 5101 Vine St, Lincoln, Ne 68505

Sum of Percolation Rates: 221.4
Average of Rates: 36.9
Rate Used for Calculation: 36.9 (30-40)

Soil type (NRCS Maps/Other) Judson silt Loam
Groundwater Depth Deep 100'+

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official _____ Date _____

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

North Bluff.

Date 2-15-13 Legal Description SW of SE (1/4 1/4) 5-T-11-N-R-7-E (Section Township Range)

Onsite System Location

Address (no rural route) 4700 Mill Rd City Lincoln NE, Zip 68514

Owner Randy Giebenrath Address 4700 Mill Rd

A. Sewer Pipe

1. Material: Schedule 40
   Diameter: 4 in.
2. Distance above basement floor: ____ in.
   or distance below basement floor: 24 in.
3. Distance between dwelling and septic tank: 72 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 100 ft.
   stream — ft.
   pressure line — ft.
   property line 200 ft.

B. Septic Tank

☑ Label with Manufacturer, address and gallon capacity

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 Level 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 115 ft.
   Stream — ft.
   Pressure line — ft.
   Property line — ft.

C. ☐ Distribution Box ☐ Drop Boxes

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

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

D. Drainfield Absorption

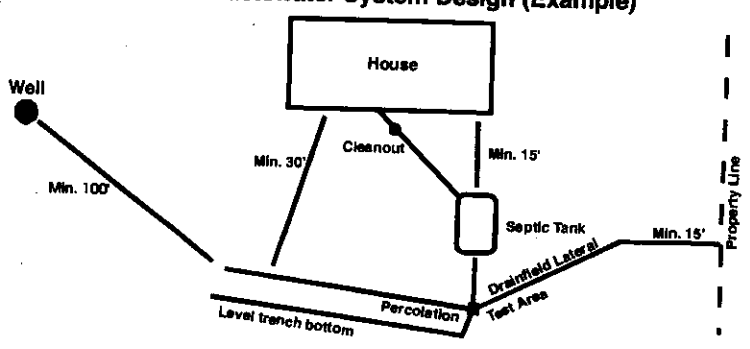
☐ Trench ☐ Bed ☑ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☒ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed 2
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other ____
2. Drainfield Laterals: Number 3
   Length of each line: 63 ft. 69.3 ft.
   69.3 ft. ____ ft., ____ ft.
3. Drainfield dimensions: Width 4 ft.
   Distribution Pipe Slope 4 in/100 ft.
   Average depth 24 in
4. Filter material: gravel + soil
   Depth of material 12 in.
5. Distances to: Well or suction line 165 ft.
   Pressure line — ft.
   Property line 50 ft.
   House or building 20 ft.
   Barn
   Lake or Stream — ft.

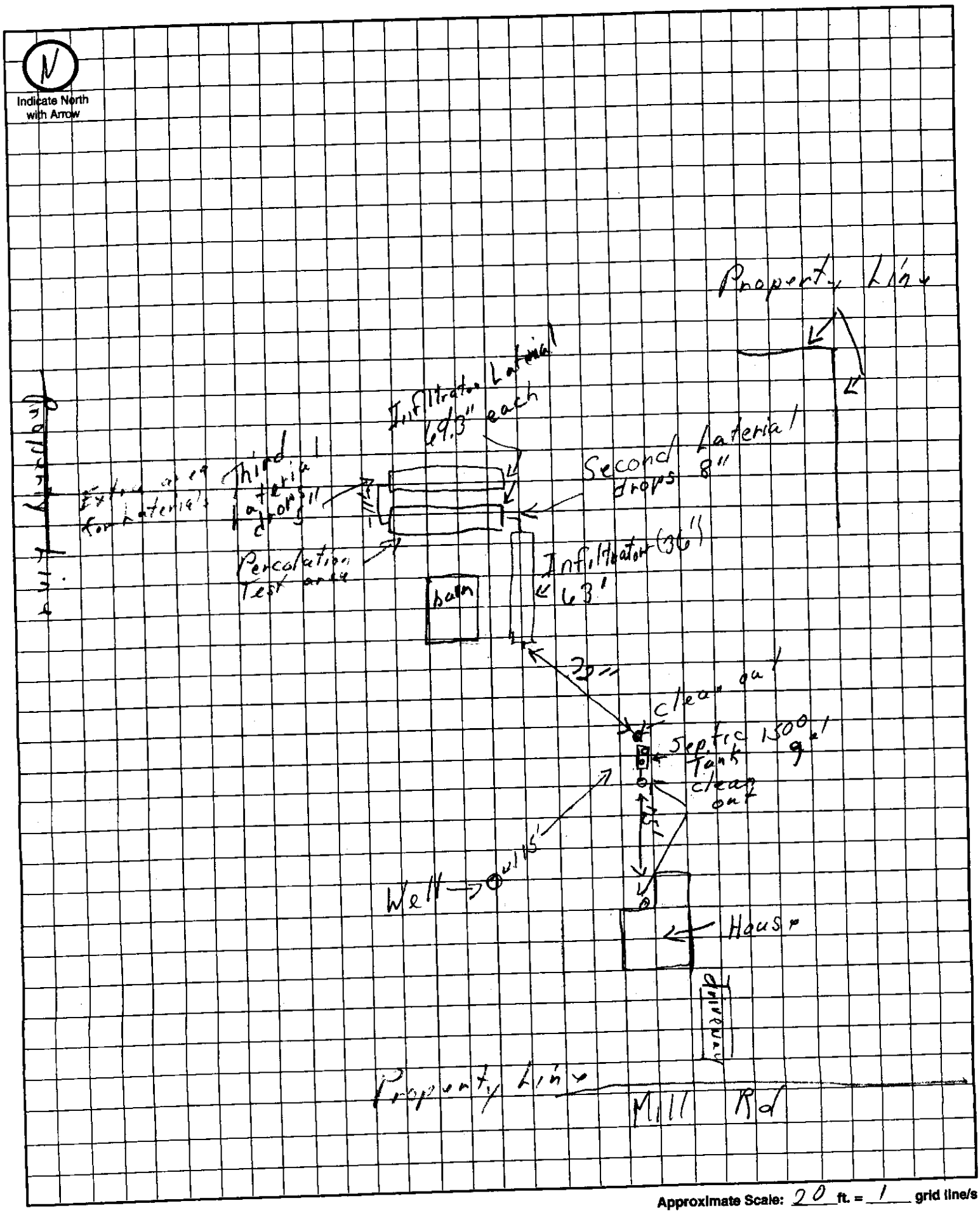
Complete As-Built drawing on the back fo this form.

Onsite Wastewater System Design (Example)

Indicate North with Arrow



As Built Drawing



Approximate Scale: 20 ft. = 1 grid line/s

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS000730

System Type: Standard

Situs: 4800 MILL RD, RURAL, NE

Issued: 2/24/2014

Expires: 2/24/2015

Description: S5, T11, R7, 6th Principal Meridian, LOT 32 SE

Owner: GIEBENRATH, RANDY D
11306 GOLD ST
OMAHA, NE 68144

Judith A Halstead
Judith A. Halstead, MS, Health Director

Dear Applicant:

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

MUHLBACH CONSTRUCTION
5701 VINE ST
LINCOLN, NE 68505-2845

Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

SEWAGE INSTALLATION
LAGOON

Establishment

HAROLD GIEBENRATH
T11N R7E SEC 5 QTR SE
W 1/2
5200 MILL ROAD

Permittee

HAROLD GIEBENRATH
5200 MILL RD
LINCOLN NE 68514

Permit # 02380246201

Issued 05/03/02
Expires 11/03/02
Revenue Code 3157

FEES: $200.00

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

002130

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

A

Permit Number: 023802462

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 5200 MILL ROAD (no rural route) City LINCOLN NE, Zip 68504

Legal Description W SE¼ 5 11N 7E SEE ATTACHED
(1/2) 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name HAROLD EISENBARTH Signature Harold Eisenbarth

Address 5200 MILL Rd City/State/Zip Lincoln NEBR 68514

☐ Check if owner designed system Home Phone 785-1695 Work Phone _____

C. Contractor

Name Bob MUHLBACH Company Name B & M EXCAVATing INC.

Address 14645 N 56th City/State/Zip Lincoln NE 68514

☑ Check if contractor designed system Work Phone 402-610-1749

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 2 Is there a Whirlpool Bathtub YES (NO)

☐ Commercial Establishment/Other Facility Specify _____

Design flow in gallons per day _____ Type of Wastewater: ☐ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department**	Date rec'd 5/3/02 Date frwd 5/3/02	**ACTION** ☒ Approved ☐ Disapproved Signature Gerald C. Hood	
2. **Supt. Bldg. Insp. or Village Clerk**	Date rec'd _____ Date frwd _____	**ACTION** ☐ Approved ☐ Disapproved Signature _____	
3. **City or County Engineer**	Date rec'd _____ Date frwd _____	**ACTION** ☐ Approved ☐ Disapproved Signature _____	

5-02, Need Fence + Sod Berms
1-9-03 Repaired existing lagoon

Installation Final Written Approval

By Ron Marquart

Date 1-9-03

Business Office Use Only

Date Rec'd 05/03/02

Amt Paid 200.00

Rec'd By _____ ~~Cash~~/Check No. 6103

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

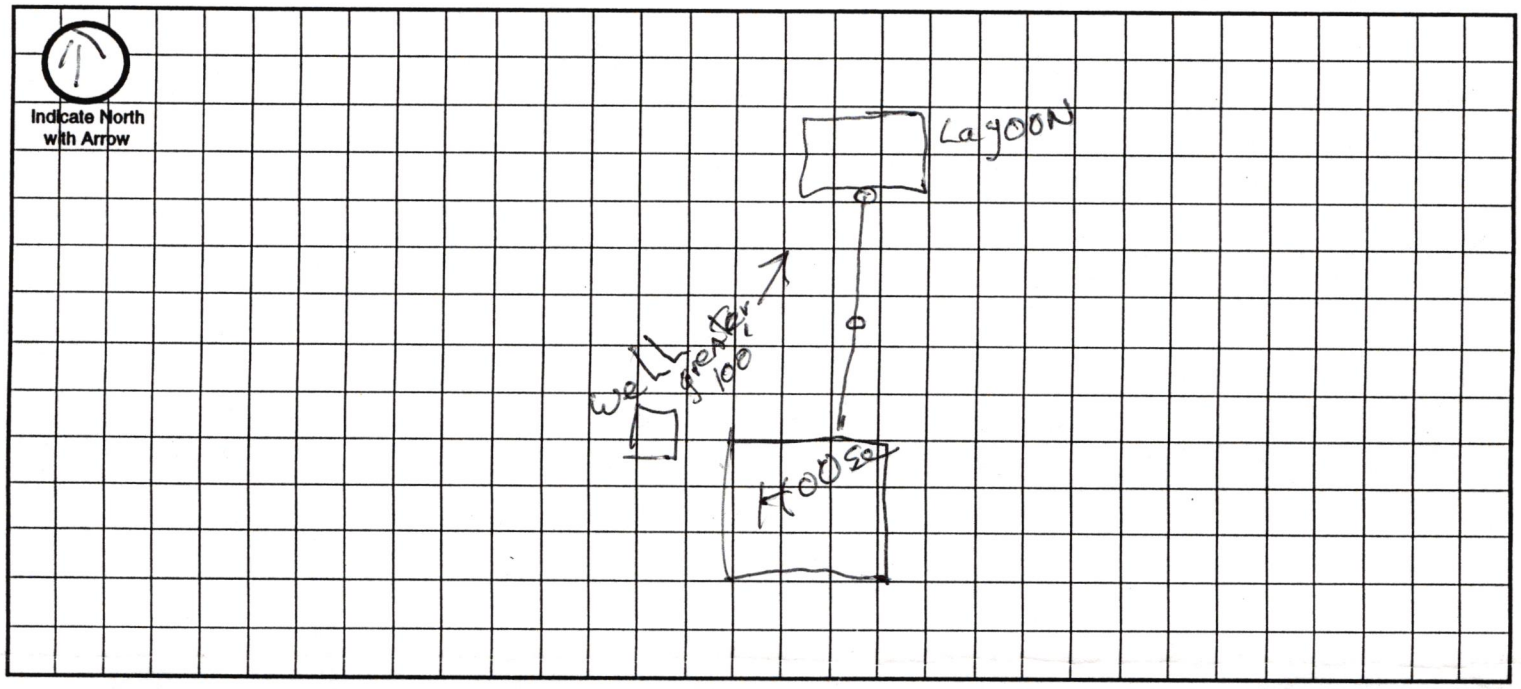
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 0238 02462

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) _____ City _____ NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

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

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

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

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

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

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

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

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 _____

Installer _____ Date _____

Allen Surveying
Services Inc.
12700 North 56th St.
Lincoln, NE 68514
PH. (402) 466-4366
Fax, (402) 466-4366

New Tract

A survey of a 2.479 acre tract of land located in the West one half of the Southeast Quarter of Section 5 Township 11 North Range 7 East of the Sixth Principal Meridian, Lancaster County, Nebraska. More particularly described by metes and bounds as follows.

Commencing at the South ¼ Corner of Section 5 Township 11 North Range 7 East of the Sixth Principal Meridian, Lancaster County, Nebraska; Thence South 89-04-26 East (an assumed bearing) on the South line of the Southeast Quarter, a distance of 163.60 feet to the POINT OF BEGINNING; Thence North 00-03-46 West, a distance of 417.00 feet; Thence South 89-04-26 East, and parallel to the South line of the Southeast Quarter a distance of 269.72 feet; Thence South 02-52-46 West, a distance of 417.18 feet to a point on the South line of the Southeast Quarter; Thence North 89-04-26 West, on the South line of the Southeast Quarter a distance of 248.03 feet to the POINT OF BEGINNING, and containing a calculated area of 107,992.64 Square feet or 2.479 acres more or less.

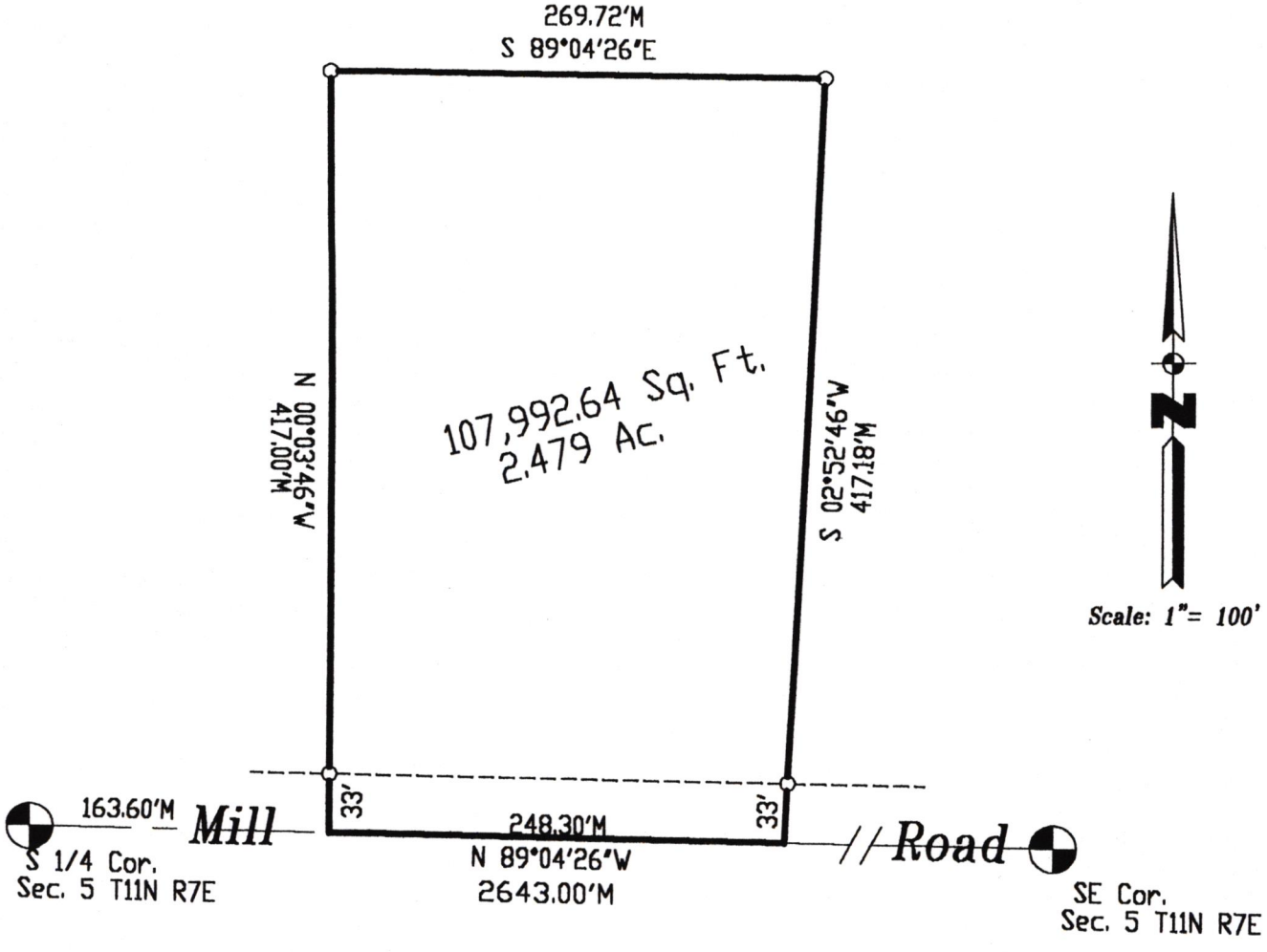
Parent Tract

All of the West one half of the Southeast Quarter of Section 5 Township 11 North Range 7 East of the Sixth Principal Meridian, Lancaster County, Nebraska.

Official Survey Record

A survey of a 2.479 acre tract of land located in the West one half of the Southeast Quarter of Section 5 Township 11 North Range 7 East of the Sixth Principal Meridian, Lancaster County, Nebraska.

Work Order # 02-0428 ***April 12, 2002***



Legend

M = Measured
P = Platted
R = Recorded
O = Set 3/4' x 24" Rebar
● = Found 5/8" Rebar

Surveyors Certificate