JUL 05 2013

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

A

Permit Number
H30000781

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 5W 58th St (no rural route) City Denton, NE Zip 68339

Legal Description NE 13 9N 5E Fox Trail Estates 2 2
1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

Geographical Location (if known): Lat/Long: _____ PID 03-13-202-002-000

B. Owner

Name James Manthey [redacted] [signature]

Address 5924 Branford Pl City/State/Zip Lincoln, NE 68512

Home Phone 314-7258 Work Phone _____

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature _____

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

Work Phone 402-890-1009

D. Engineer

☐ **Check and complete if engineer designed system** P.E. License Number: _____

Designer Name _____ Firm _____ Work Phone _____

E. This system will serve a

[redacted]? yes

☒ Residential Dwelling [redacted] 4 [redacted]tub? ☒ Yes ☐ No Total Acres 3

☐ 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 7/8/13
Date frwd 7/8/13
ACTION ☐ Approved ☐ Disapproved
Signature _____

2. Supt. Bldg. Insp. or Village Clerk
Comments _____
Date rec'd 7-8-13
Date frwd 7-8-13
ACTION ☒ Approved ☐ Disapproved
Signature _____

3. City or County Engineer
Comments _____
Date rec'd 7-8-2013
Date frwd 7-8-2013
ACTION ☐ Approved ☐ Disapproved
Signature _____

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
Date Received 7-11-13 Amount Paid 355.-
Received By _____ Cash/Check No. 8143

White - Health Department 7684 7503 Yellow - Engineer Pink - Building & Safety

Form A Updated: 5/10

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

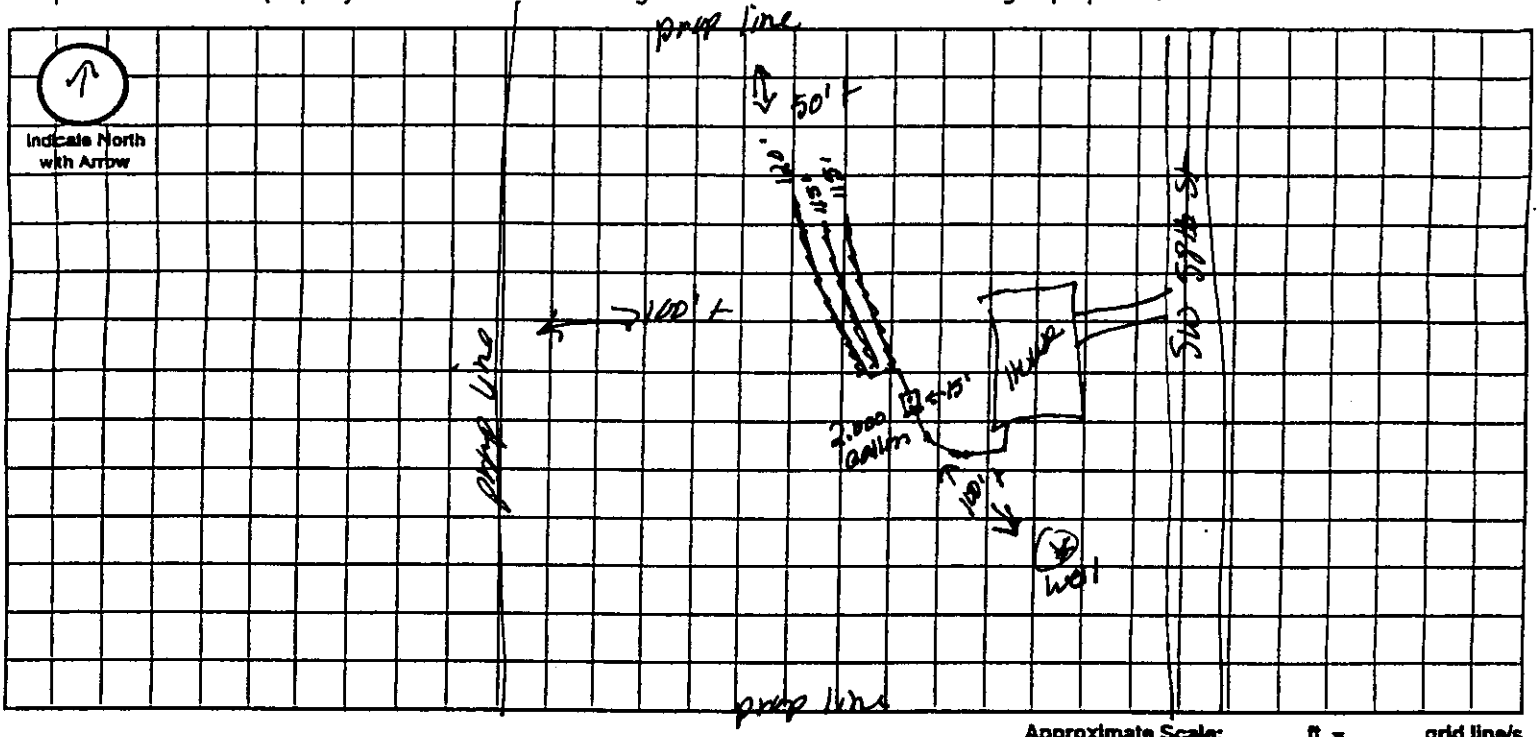
C

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) SW 58th St 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 51 (min. per inch) Soil Type: SCL Land Slope: _____ %

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

Total Square Feet of Field Required: 1,400 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: N05 Gravelless chambers

Capacity of Septic Tank 2,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 350 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

[redacted] Jim Rusty 7-2-13

Installer Kevin Schroeder Date 7/2/13

FORM 23-102 10-96

HOLLY
CONTRACTING COMPANY

Gary L. Holly
71860 567th Ave. Fairbury, Ne. 68352
402-587-0120

ON-SITE WASTEWATER TREATMENT SYSTEM | **SOIL ABSORPTION DATA REPORT** | **PROPERTY ADDRESS**

SOIL TEST PROPERTY

OWNER ADDRESS: DARIN Huss

6901 SW 44th ST.

LINCOLN, NE. 68523

PHONE NO.: 402-570-9541 402-797-2349

PROPERTY ACRES: Approx 3

SOIL TYPE: 72.06 AKSARBEN, SILTY CLAY LOAM

PROPERTY LOCATION: Approx 300' N. of Pine Knot Dr. on SW 58TH W.S.R.

LEGAL DESCRIPTION:

GPS N40° 44' 56.3" W096° 48' 04.7"

TEST DATES: Oct 16 + 17, 2008

WEATHER: FOLLOWING RAIN DAYS CLEAR TO PARTLY CLOUDY

PERCOLATION TEST DATA

DATE PRE-SATURATION PERIOD START 101608 END 101708

DATE Oct 24 2008

PERCOLATION READINGS

HOLE NO.	HOLE DEPTH	HOLE DIA.	START TIME	END TIME	GAL. USED	DROP IN INCHES (TIMES (HOLES FILLED TO 6" LEVEL EACH READING) 0945	1015	1045	1115	1145	1215	1245	1315	1345	PERC-END RESULT MIN/INCH
1	36"	8"	1330	0930		.7	.625	.625	.6	.6	.6	.6	.6	.6	50
2						.75	.75	.75	.7	.7	.75	.7	.7	.7	43
3						.6	.6	.6	.6	.6	.6	.6	.6	.6	50
4						.625	.625	.7	.6	.6	.6	.6	.6	.6	50
5						.6	.6	.6	.5	.6	.6	.5	.5	.5	60
6	↓	↓	↓	↓		.7	.7	.7	.7	.6	.6	.6	.6	.6	50
7															
8															
9															
10															
11															
12															
13															
14															
15															

TEST CONDUCTED BY: Gary L. Holly

NDEQ LICENSE NO: C1650

SUM OF RATES: 303

AVERAGE OF RATES: 50.5 min/in

ABSORPTION FIELD DRAWING:

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. HS000781

System Type: Standard

Situs: NO SITE ADDRESS

Issued: 7/15/2013

Expires: 7/15/2014

Description: FOX TRAIL ESTATES ADDITION, BLOCK 2, Lot 2FOX TRAIL ESTATES ADDITION, BLOCK 2, Lot 2

Owner: MANTHEY, JAMES & SUZAN
6231 S 53 ST APT 6
LINCOLN, NE 68516

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

RAYMOND CONTRACTING
13800 NW 70TH
RAYMOND, NE 68428

JUL 05 2013

SCANNED

A

Permit Number H50000781

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

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 SW 58th St (no rural route) City Denton, NE Zip 68339

Legal Description NE (1/4) 13 (1/4) 9N (Section) 5E (Township) Fox Trail Estates (Range) 2 (Subdivison) 2 (Addition) (Block) (Lot)

Geographical Location (if known): Lat/Long: PID 03-13-202-002-000

B. Owner

Name James Manthey Signature

Address 5924 Branford Pl City/State/Zip Lincoln, NE 68512

Home Phone 314-7258 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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

Work Phone 402-890-6009

D. Engineer

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

Designer Name Firm Work Phone

E. This system will serve a

Is there a Garbage Disposal? yes

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub? ☒ Yes ☐ No Total Acres 3

☐ 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 7/8/13
Date frwd 7/8/13
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 7-8-13
Date frwd 7-8-13
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 7-8-2013
Date frwd 7-8-2013
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date 10/23/17

Business Office Use Only
Date Received 7-11-13 Amount Paid 355.—
Received By Bstaus Cash/Check No. 8143

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

7684
7503

Form A Updated: 5/10

SCANNED

HOLLY
CONTRACTING COMPANY
Gary L. Holly
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LINCOLN, NE. 68523

PHONE NO.
402-570-9541 402-797-2349

PROPERTY ACRES
Approx 3

SOIL TYPE
7206 AKSARBEN, SILTY CLAY LOAM

PROPERTY LOCATION
Approx 300' N. of PINE KNOT DR. on SW 58TH WSR

LEGAL DESCRIPTION

GPS N40° 44' 56.3"
W096° 48' 04.7"

TEST DATES
Oct 16 + 17, 2008

WEATHER FOLLOWING RAIN DAYS
CLEAR TO PARTLY CLOUDY

PERCOLATION TEST DATA

DATE PRE-SATURATION PERIOD
START 10/6/08 END 10/7/08

PERCOLATION READINGS
DATE Oct 24 2008

HOLE NO.	HOLE DEPTH	HOLE DIA.	START TIME	END TIME	GAL. USED	DROP IN INCHES (TIMES HOLES FILLED TO 6" LEVEL, EACH READING) 0945	1015	1045	1115	1145	1215	1245	1315	1345	PERC-END RESULT MIN/INCH
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3						.6	.6	.6	.6	.6	.6	.6	.6	.6	50
4						.625	.625	.6	.6	.6	.6	.6	.6	.6	50
5						.6	.6	.6	.5	.6	.6	.5	.5	.5	60
6						.7	.7	.7	.7	.6	.6	.6	.6	.6	50
7															
8															
9															
10															
11															
12															
13															
14															
15															

TEST CONDUCTED BY: GARY L. HOLLY

NDEQ LICENSE NO: C1650

SUM OF RATES 303

AVERAGE OF RATES 50.5 MIN/IN

ABSORPTION FIELD DRAWING:

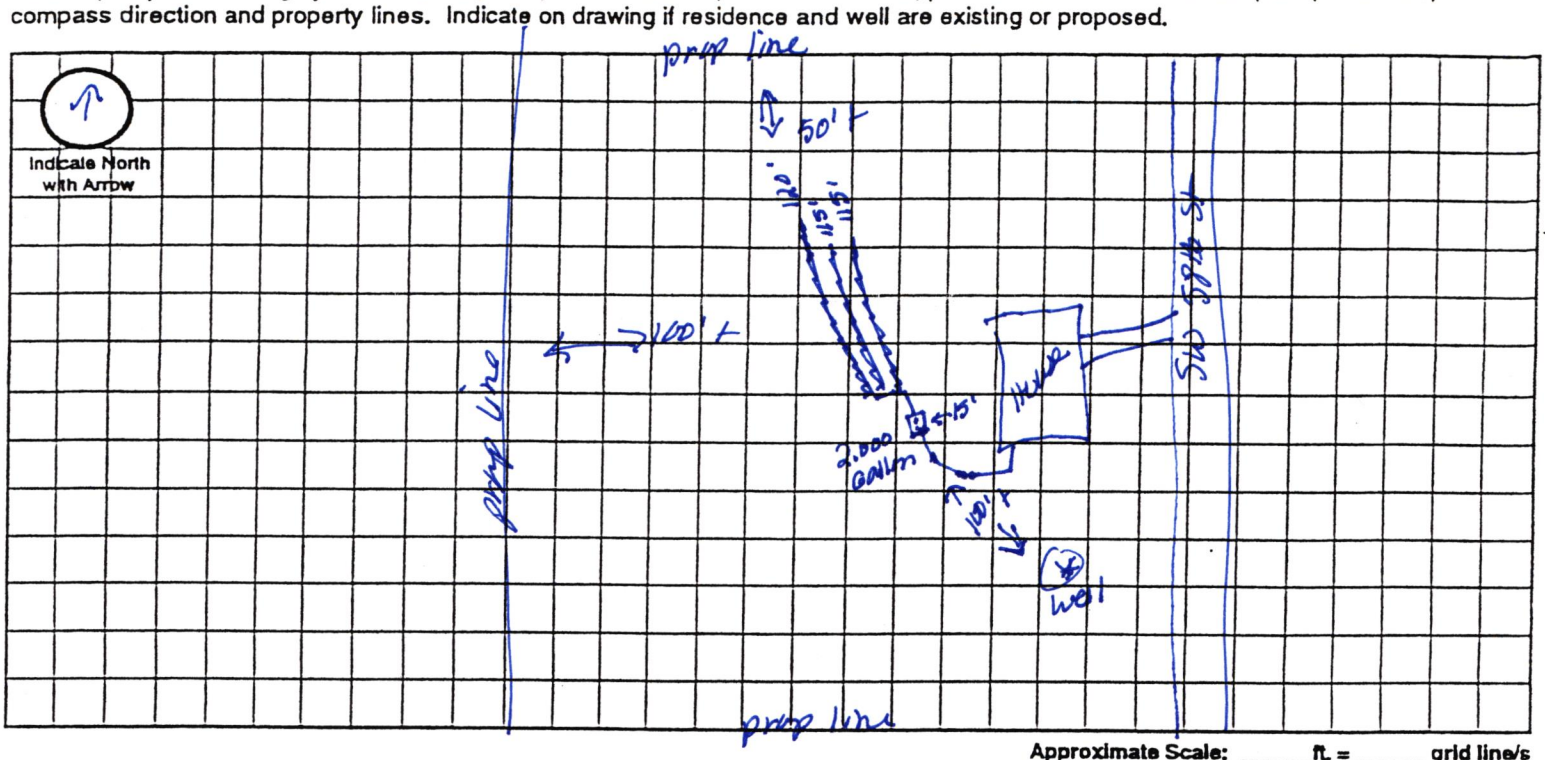
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

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) SW 58th St 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 51 (min. per inch) Soil Type: SCL Land Slope: _____ %

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

Total Square Feet of Field Required: 1,400 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: ADS Growelegs chambers

Capacity of Septic Tank 2,000 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 350 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 _____ Date 7-2-13

Installer _____ Date 7/2/13

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

OCT 25 2013

D

Permit Number: HS000781

Onsite Wastewater Treatment System

As Built Plans & Specifications

Fox Trail Est

Date 10/22/2013 Legal Description NE 1/4 NE 1/4 13-9N-5E Section Township Range Block 2 Lot 2

Onsite System Location

Address (no rural route) 6285 SW 58th St City Denton NE, Zip 68339

Owner Jim Manthey Address 6231 S. 53rd St Apt 6 Lincoln, NE 68516

A. Sewer Pipe

1. Material: SDR 26 PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 17 in.
3. Distance between dwelling and septic tank: 94 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100 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: 2000 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☐ above ☐ below grade AT 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 100 ft.
   Stream 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.

C. ☐ Distribution Box ☒ Drop Boxes

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

1. Material: Plastic ADS Coupling.
   Number available outlets: 2 per coupling.
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 7½+4+4'+4' Switch Box ft.

D. Drainfield Absorption

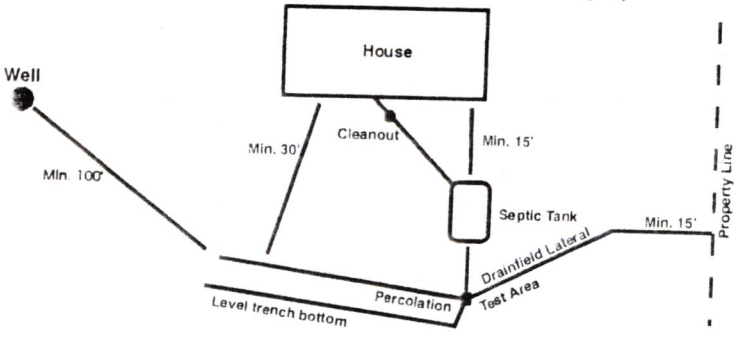
☑ Trench ☐ Bed ☐ Level Bottom

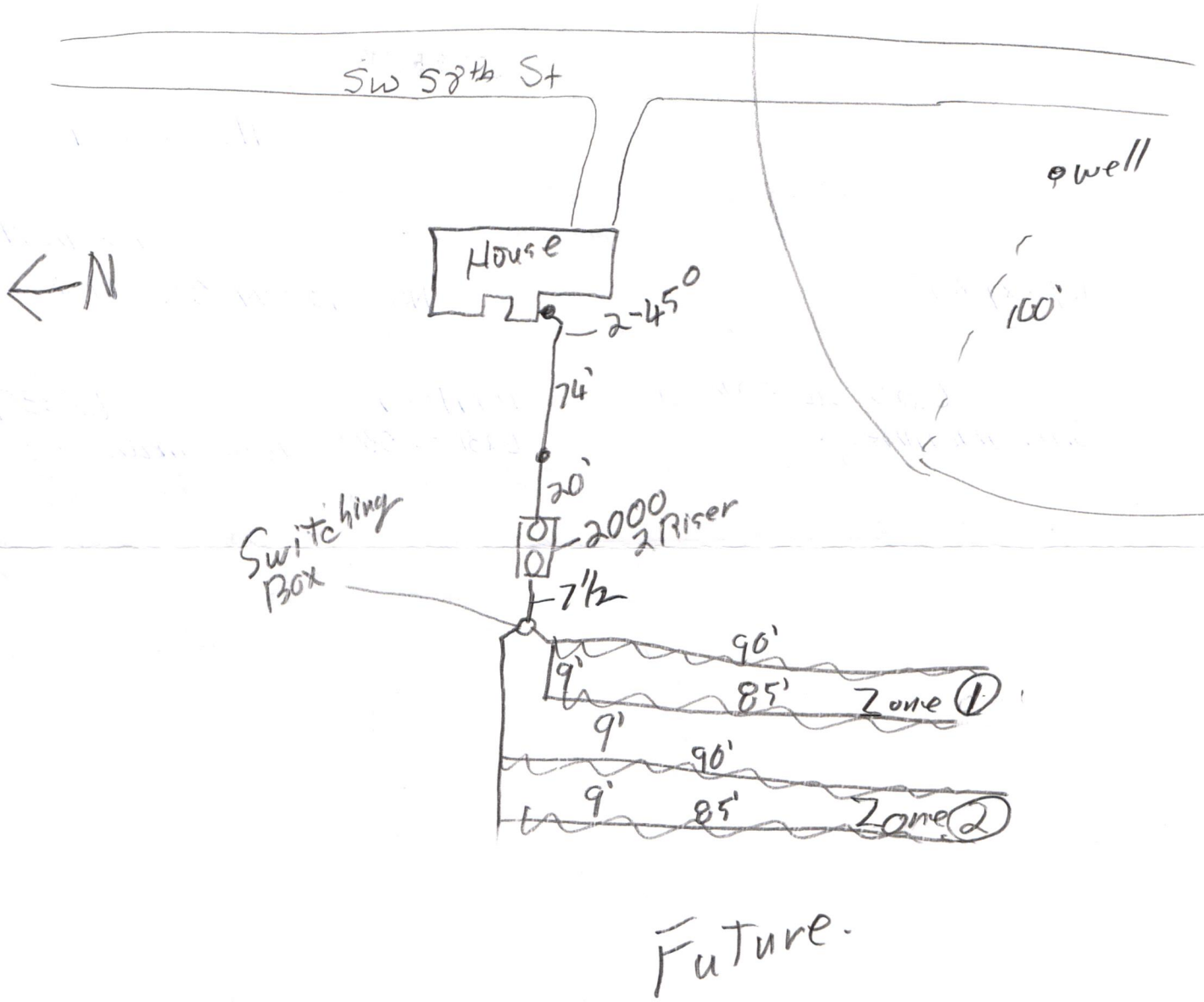
1. Type: ☒ Half rounds ☐ Perforated pipe _ ☐ Chambers
   Diameter or width: _____
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 4
   Length of each line: 90 ft. 85 ft.
   90 ft. 85 ft., _____ ft.
3. Drainfield dimensions: Width 40 ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 24-30 in
4. Filter material: Soil
   Depth of material 24-30 in.
5. Distances to: Well or suction line 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.
   House or building 100 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)





Future.

10/22/2012.

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663



Lancaster County/City of Lincoln GIS Map

HW000946

SCANNED

N
W E
S

Printed: Jul 30, 2013

DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email ags@lincoln.ne.gov and you will be directed to the appropriate department.