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

SEP 03 2013

A

Permit Number H5000809

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 9200 Holdrege (no rural route) City Lincoln, NE Zip

Legal Description

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

PID

B. Owner

Name Shane Zutavern Signature

Address 9200 Holdrege, Lincoln NE City/State/Zip

Home Phone 402.770.1220 Work Phone

C. Certified Installer

Name: Blain Johnson Signature

Address 8533 E Hwy 41 City/State/Zip Adams NE 68301

Work Phone 402.440.2270

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 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 37

Garbage Grinder? ☐ Yes ☐ No

☒ Commercial Establishment/Other Facility Specify Shop Design flow in gallons per day 50

Type of Wastewater ☒ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☑ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department

Site visits

Comments

Date rec'd 7/5/13

Date frwd 7/5/13

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

Business Office Use Only

Date Received 9-5-13 Amount Paid 355.-

Received By B. Hall Cash/Check No. 6559

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

Form A Updated: 1/13

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 9200 Holdredge St. (no rural route) City Lincoln NE, Zip NE

Owner Shane Zutavern Address 9200 Holdredge

Date of Tests 8/22 to 8/23 Weather: Precipitation ϕ Temperature 90

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	20	8/22	4p	8/23	3p	8/23	~~8p~~ 9:10	6	8/23	7p	30	2 1/2	12
2	20							6				1 3/4	17.15
3	20							6				1 1/2	20
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Blain Johnson
Phone: 402.610.2270
Address 8533 E Hwy 41
Adams NE 68301

Soil type (NRCS Maps/Other)

Groundwater Depth 5ft.

Sum of Percolation Rates: 49.15
Average of Rates: 16.39
Rate Used for Calculation: 16.39

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

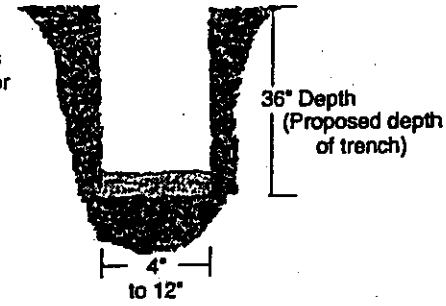
Signature of Reviewing Official Date

READ THOROUGHLY

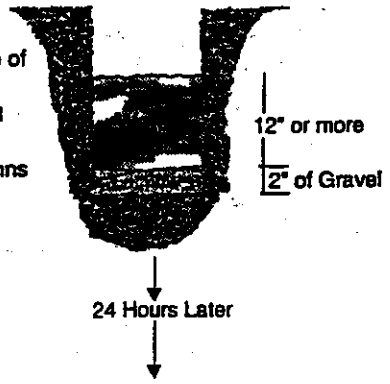
DIAGRAM OF PERCOLATION TEST PROCEDURE

Finished Grade or Natural Ground Level

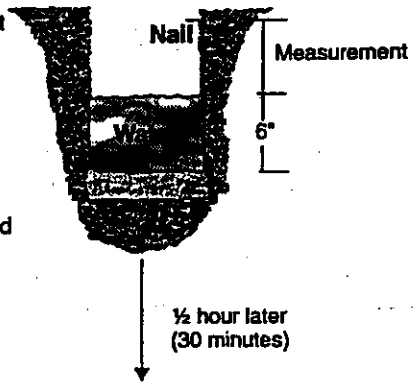
I. Size, Number, and Location or Test Holes
   - A. Dig six or more holes spaced uniformly over proposed lateral field site.
   - B. Scratch smeared spots on sides of hole.
   - C. Remove loose material from hole.
   - D. Add 2" of gravel to hole.



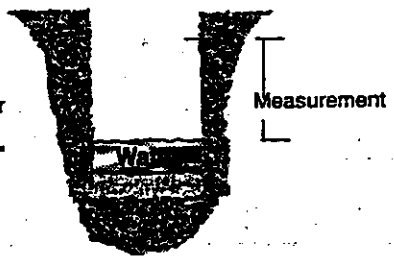
II. Saturation of Soil (Pre-soak)
   - A. Fill hole with 12" or more of water.
   - B. MAINTAIN THIS WATER LEVEL FOR 4 HOURS.
   - C. Record on Form B columns a thru f.



III. Percolation-rate Measurement **(refer to instructions 5a, 5b, or 5c.)**
   - A. Add 6" of water.
   - B. Measure from fixed reference point (nail) to water.
   - C. Record measurement and time on front of Form B.



   - D. 30 minutes later remeasure and record time.
   - E. If water will be too low for another reading 30 minutes later, adjust to 6" of water and remeasure and record time.



   - F. Continue for 3½ hours taking readings every 30 minutes.
   - G. Last 30 minute reading is used in filling out Form B. Record date, time, intervals and water level drops in column g thru m.

Instructions

1. **Number and location of tests.** Percolation tests shall be made in 6 or more separate test holes which shall be spaced uniformly over the proposed lateral field site.
2. **Type of test hole.** Dig or bore a hole 3 feet deep with a diameter of 4 to 12 inches. (To save time, labor and the volume of water required per test, a 4-inch auger hole is recommended).
3. **Preparation of the test hole.** Scratch or roughen any smeared spots on the sides of the hole with a knife blade or sharp pointed instrument to provide a natural soil interface into which water may percolate. Remove all loose material from the hole. Add 2 inches of gravel to protect the bottom from scouring when water is poured into the hole.
4. **Saturation and swelling of the soil.** Fill the hole with clear water to a depth of 12 inches or more above the gravel and maintain this water level at least 4 hours and preferably overnight. The accuracy and true value of the percolation data depends on thorough saturation and swelling of the soil.
5. **Percolation-rate measurement.** Percolation-rate measurements shall be made 24 hours after starting the saturation and swelling procedure described above. Record results on the front of this form and complete all calculations.
   a. If water remains in the test hole after the overnight swelling period, adjust the depth to approximately 6 inches over the gravel. From a fixed reference point, measure the drop in water level over a 30 minute period to the nearest 1/8 of an inch. This drop is used to calculate the percolation rate.
   b. If no water remains in the test hole after the overnight swelling period, add clear water to bring the depth to approximately 6 inches over the gravel. From a fixed point, measure the drop in water level to the nearest 1/8 of an inch at 30-minute intervals for 4 hours. Refill to the 6 inch level over the gravel as often as necessary. The drop that occurs during the final 30 minutes is used to calculate the percolation rate.
   c. In sandy soils (or other soils in which the first 6 inches of water seeps away in less than 30 minutes after the overnight swelling period) the time interval between measurements shall be 10 minutes instead of 30 minutes and the test run for 1 hour instead of 4 hours. The drop that occurs during the final 10 minutes is used to calculate the percolation rate.
6. **Record the test results and complete all calculations on the front of this form.** The average of the percolation rates calculated for all holes in the last 30 (10) minutes will normally be the rate used for calculations to size the system. ***Exceptions are the use of the greatest percolation rate when rates vary more than 20 min/in between holes or when other soil analysis indicates potential percolation problems.***

LLCHD reserves the right to require additional testing based on knowledge of soil types, percolation tests results on nearby properties, or due to concerns with procedures followed. In some situations, LLCHD staff will require and perform on-site observation of percolation tests.

Lincoln-Lancaster County Health Department
Environmental Public Health Division
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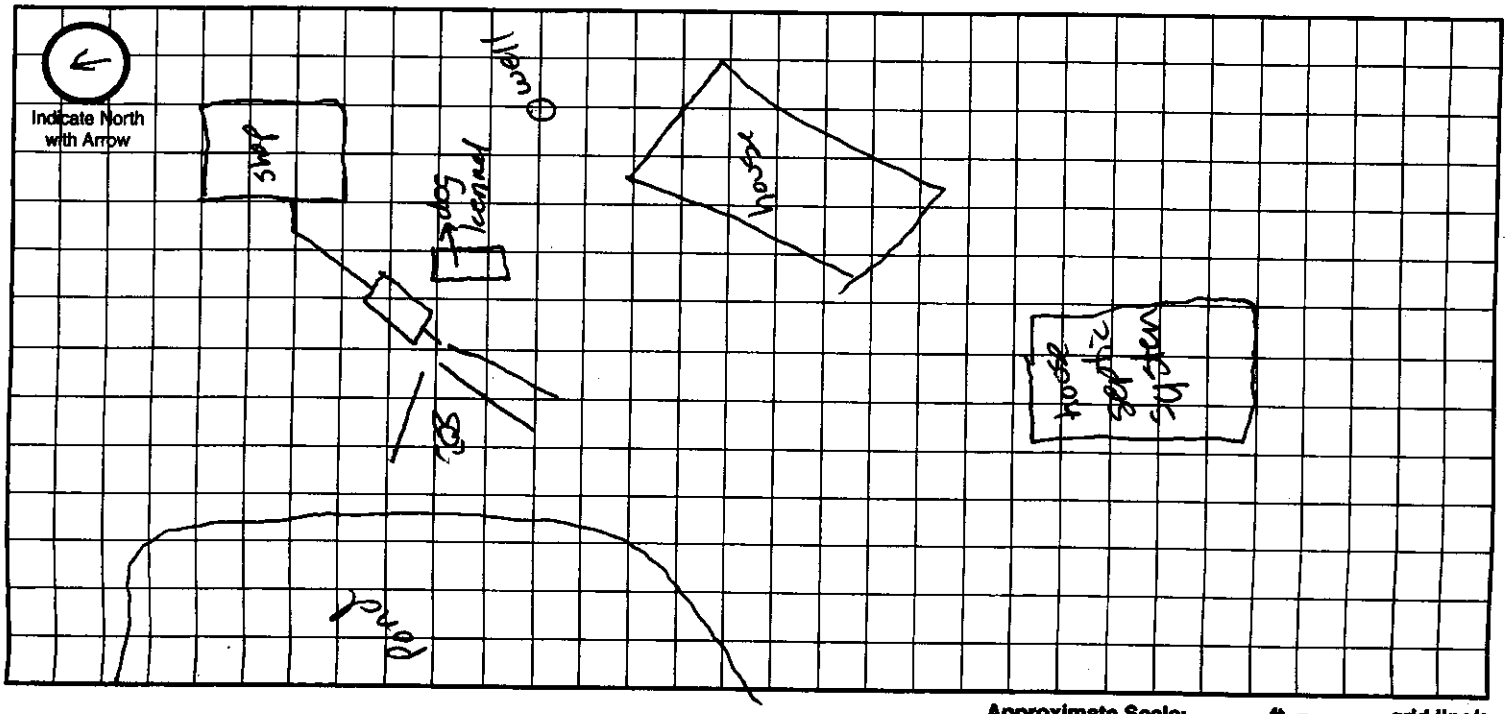
C

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) 9200 Holdredge City Lincoln NE, Zip NE

B. Proposed Septic Tank/s

Septic Tank Cap. 1000 gals Tank Material: ☐ Concrete ☒ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1/8" per day)

C. Reserve Area for Replacement Onsite System

☒ Drainfield Absorption Area (percoloation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 16.39 (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope 2 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____sq.ft.

Total length of laterals 90' Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 3 Width 36 No. of drop boxes 3 Distrubtion Box 1

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 _____

Nate

System 3 for a shop, 3 hole perctest

Thanks, Blair

CITY OF LINCOLN
NEBRASKA

Lincoln-Lancaster County
Health Department
Judith A. Halstead, MS, Health Director
3140 "N" Street
Lincoln, Nebraska 68510-1514

402-441-8000
TDD: 402-441-6284
fax: 402-441-6229
health@lincoln.ne.gov

LANCASTER
NEBRASKA

LINCOLN
The Community of Opportunity

MAYOR CHRIS BEUTLER

SUBJECT: PROCEDURES FOR OBTAINING AN INDIVIDUAL ONSITE WASTEWATER PERMIT WITHIN THE BOUNDARIES OF LANCASTER COUNTY

Enclosed are the necessary forms to be completed and returned to LLCHD as required by Lincoln Municipal Code (LMC) 24.38 or Lancaster County Resolution No. 02-0030.

The following steps must be followed in sequence for proper completion of the application for a permit to install or construct an individual Onsite Wastewater System:

1. Obtain site clearance. Fill out the "A" sheet completely. A certified Master or Journeyman Installer or Professional Engineer (P.E.) must sign the application on the lines provided. In the case that the proposed system is to be constructed within a village or city jurisdiction within Lancaster County, LLCHD will notify the village or city of the proposed construction. Upon their approval, indicated by signature from an Authorized representative of that community, LLCHD will proceed with the review process.

2. Submit the "B" sheet indicating the percolation rate of the proposed system (not necessary for lagoon systems.)

3. A drawing ("C" Sheet) of the proposed system should be submitted to Lincoln-Lancaster County Health Department (LLCHD). The "C" Sheet should also be signed by a registered Master Installer, Journeyman Installer in Lancaster County or P.E.

4. Submit to the LLCHD, Environmental Public Health Division, all of the forms referred to above. The correct application fee must be submitted with the application. Make checks payable to LLCHD.

5. When the application for a permit has been approved and the permit issued, construction of the onsite system may begin. The system must be constructed in accordance with the approved submitted plans and specifications and the appropriate ordinance or resolution. In the case where special circumstances exist and the above timeline cannot be followed, you must contact LLCHD prior to any work being completed.

6. Secure final approval of the installed system. The LLCHD must be notified when the installation is ready for final inspection; no part of the system may be covered until inspected and approved by the Environmental Health Specialist.

7. Within 30 days of final inspection, submit to LLCHD an as-built drawing (the "D" sheet) indicating how the final product was constructed.

If you have any questions concerning the forms or procedures for proper completion of the project, please call Nate Hartman, Environmental Health Specialist, at 441-8643.

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. HS000809

System Type: Standard

Situs: 9200 HOLDREGE ST, RURAL, NE

Issued: 9/10/2013

Expires: 9/10/2014

Description: S14, T10, R7, 6th Principal Meridian, LOT 38 SE

Owner: ZUTAVERN, SHAYNE T & PAIGE R
9200 HOLDREGE ST
LINCOLN, NE 68505

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

XL CONTRACTING
8533 E. HWY 41
ADAMS, NE 68301