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. HS000863

System Type: Standard

Situs: No Site Address Specified

Issued: 1/16/2014

Expires: 1/16/2015

Description: S12, T10, R5, 6th Principal Meridian, LOT 35 NE

Owner: HARN, STANTON D
1631 BRENT BLVD
LINCOLN, NE 68506

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

WELLMANN PLUMBING
3130 S 6TH ST., #100
LINCOLN, NE 68502

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

A

Permit Number HS000863

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 5950 W Adams. (no rural route) City Lincoln, NE Zip

Legal Description 12 10 5 6th meridian 35NE

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

PID 04-12-200-007-000

B. Owner

Name Stanton O Harn Signature

Address 1631 Brent Blvd. City/State/Zip Lincoln, Ne. 68506

Home Phone Work Phone

C. Certified Installer

Name: Kelly Wolinski Signature

Address 3130 S 6th. #100 City/State/Zip Lincoln, Ne. 68502

Work Phone 402-610-0561

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 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 118.6/160

Garbage Grinder? ☐ 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. 02-30

1. Health Department
Site visits
Comments
Date rec'd 1/14/14
Date frwd 1/16/14
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 1/15/13 Amount Paid 365.00
Received By SB Cash/Check No. 51912

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

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

B

Permit Number: HS000863

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 5950 W Adams (no rural route) City Lincoln NE, Zip _____

Owner Stanton Havn Addresss 1631 Brent Blvd. Lincoln, Ne. 68506

Soil Type (SCS): Judson Silt Loam Percolation Rate: 27.5 min./inch

Date of Tests 1-14-14 to 1-15-14 Weather: Precipitation _____ Temperature _____

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					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)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	36"	1-10-14				1-10-14					60	2	30
2	(	(									60	3	20
3											60	3	20
4											60	3	20
5											60	4	15
6	)	)									60	1	60

Person Conducting Percolation Tests

Name: Kelly Wolinski

Phone: 402-610-0561

Address 3130 S 6th. #102 Lincoln, Ne.

Sum of Percolation Rates: ~~165~~

Average of Rates: 27.5

Rate Used for Calculation: _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Must size for 60 min - Contacted on 1/14/14 GWH

Signature of Reviewing Official _____ Date 1/14/14

FORM 23-101 10-96

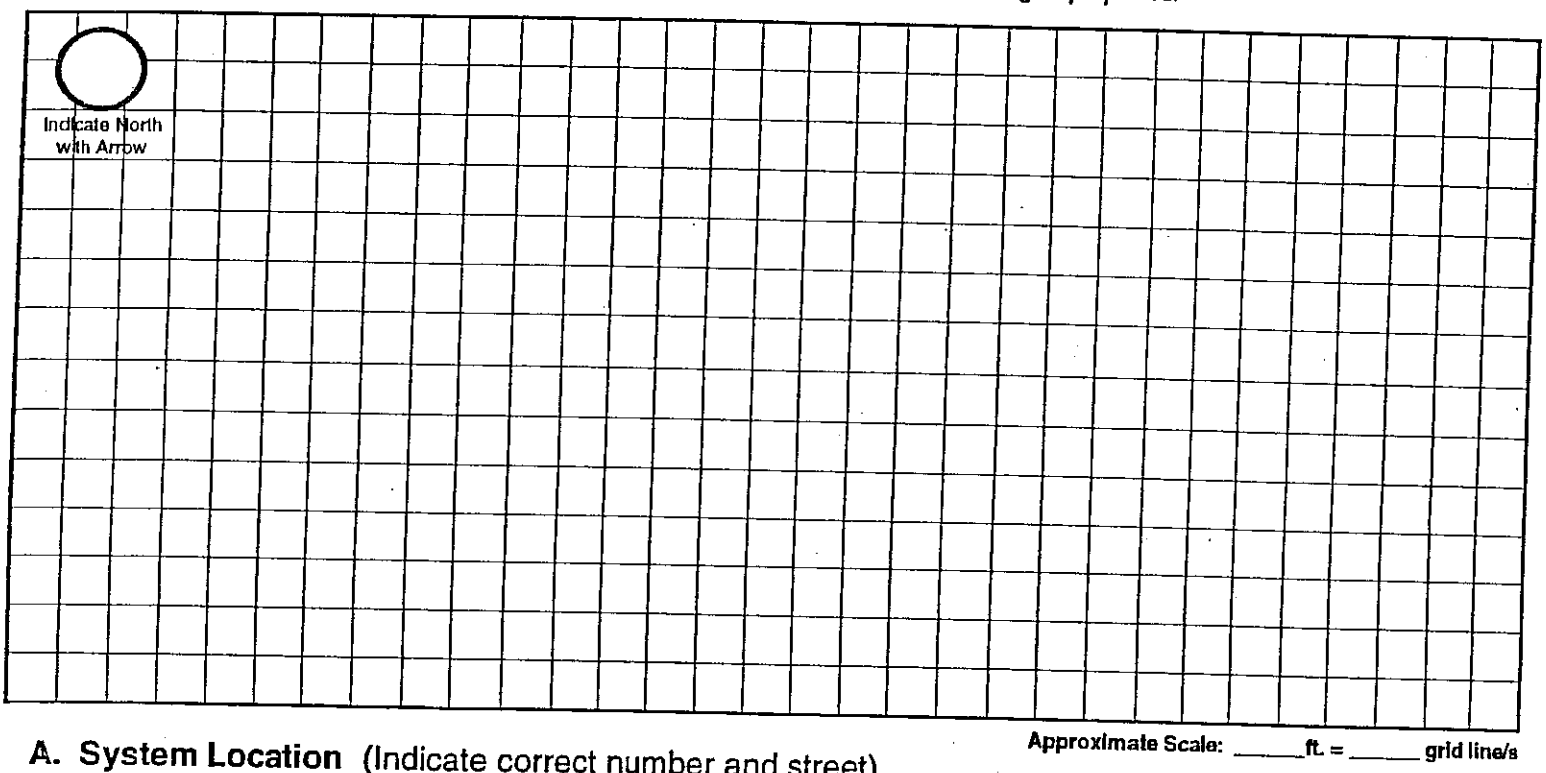
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: HS 000863

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) 5950 w Adams City Lincoln NE, Zip _____

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

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

Percolation Rate 27.5 (min. per inch) Soil Type: Judson Land Slope: 2-6 %

Type of Absorption System: ☐ Trench ☐ Bed ☒ Other infiltrator - Graveless

Total Square Feet of Field Required: 1000 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: infiltrator - Graveless

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 263 ft. Number of Trenches _____ Trench Width 3'

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

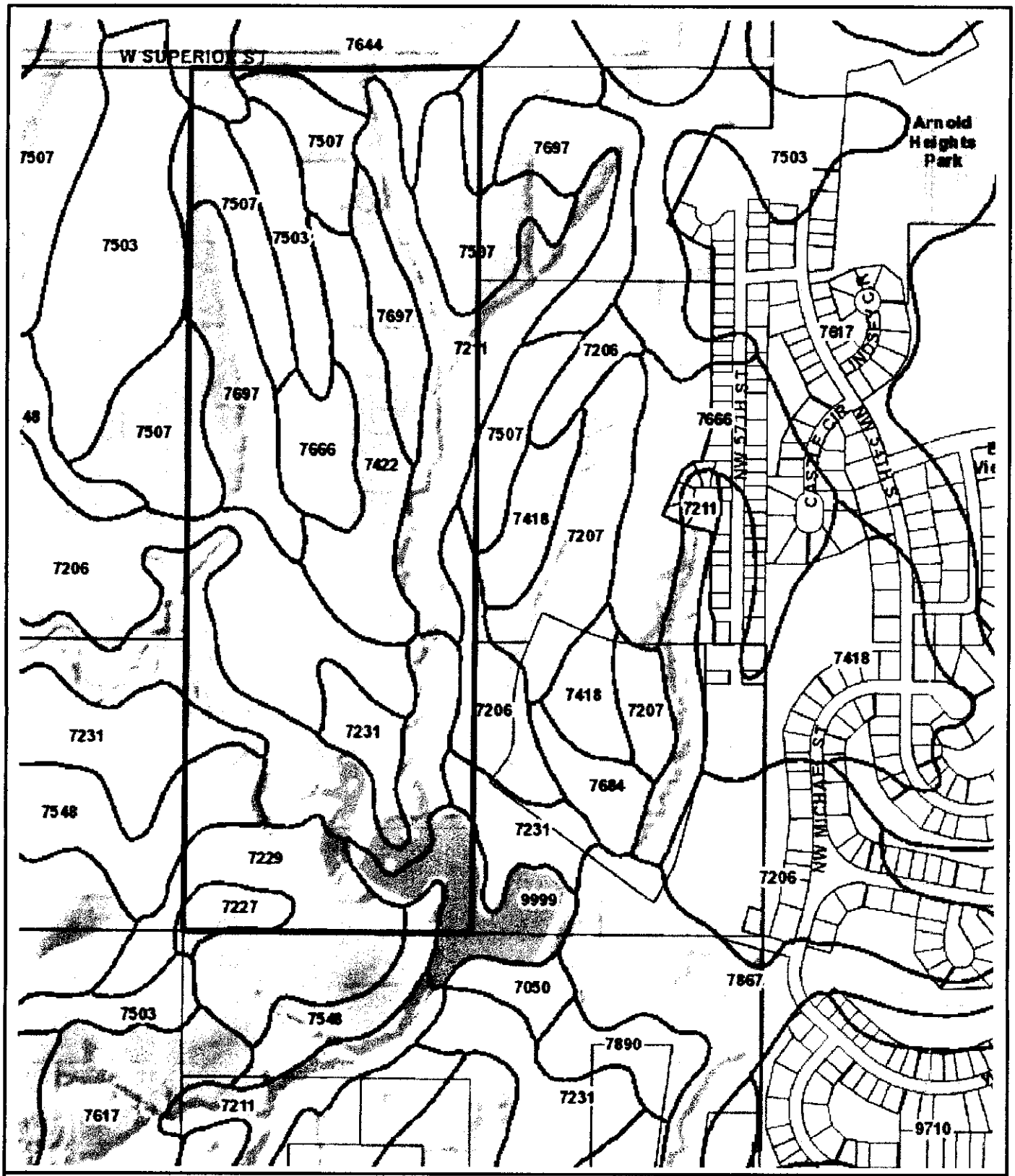
Home Building Contractor _____ Date _____

Installer Kelly Wolter Date 1-13-14

RM 23-102 10-96



feet 1000



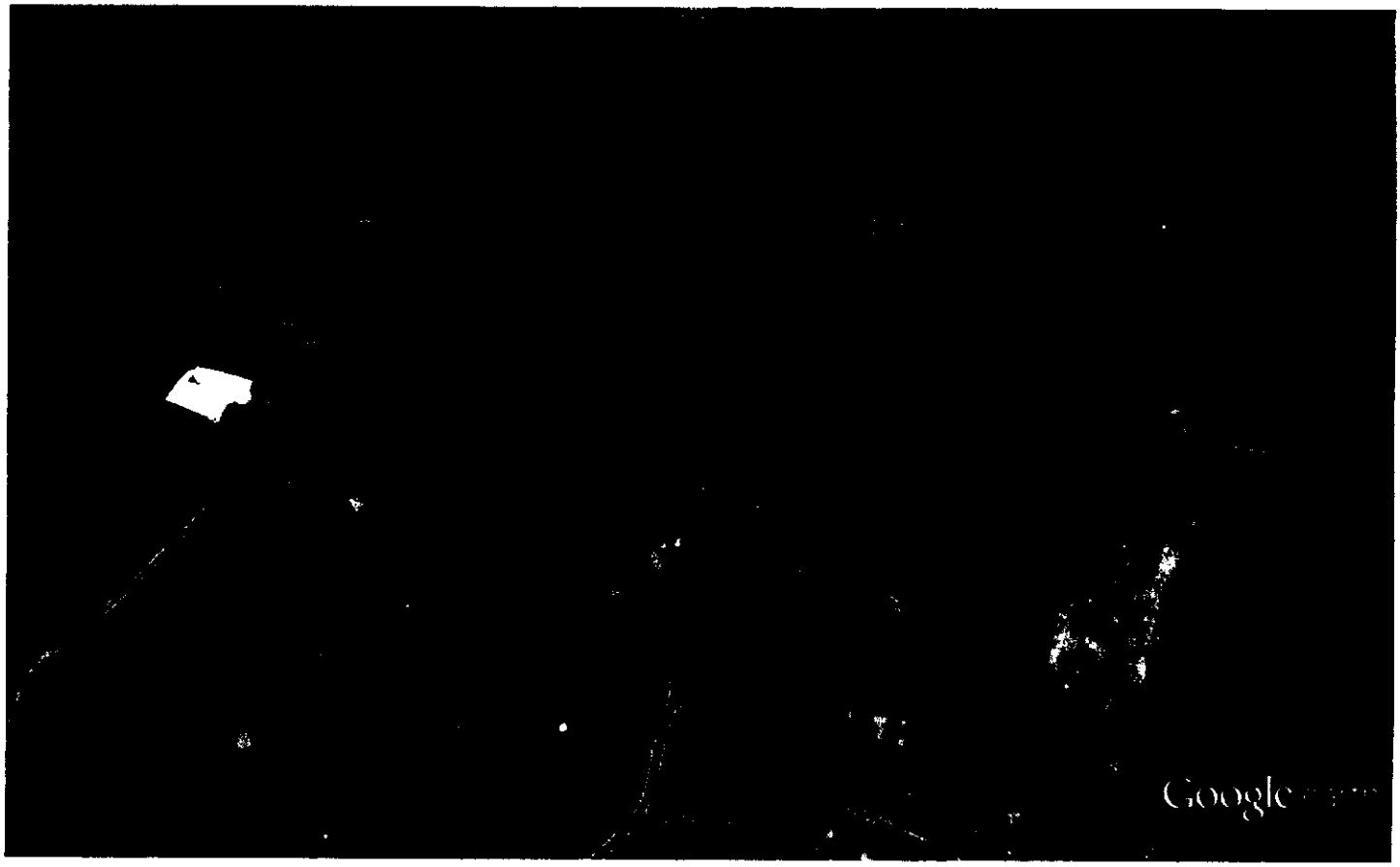
Lancaster County/City of Lincoln GIS Map

harn

N
W E
S

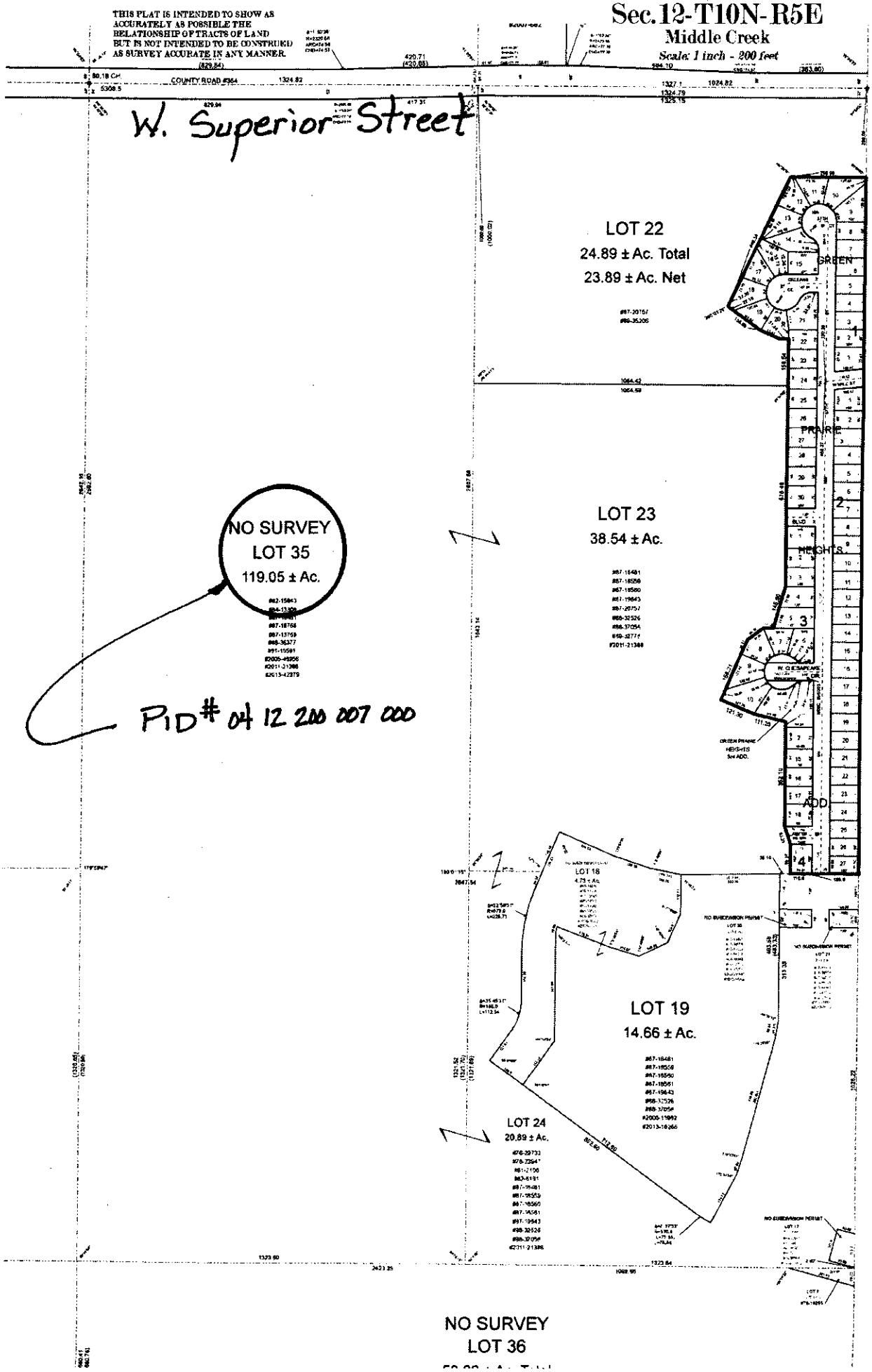
Printed: Jan 13, 2014

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.



Google earth

feet 300
meters 100


THIS PLAT IS INTENDED TO SHOW AS ACCURATELY AS POSSIBLE THE RELATIONSHIP OF TRACTS OF LAND BUT IS NOT INTENDED TO BE CONSTRUED AS SURVEY ACCURATE IN ANY MANNER.
Sec. 12-T10N-R5E
Middle Creek
Scale: 1 inch - 200 feet
COUNTY ROAD #964
W. Superior Street
LOT 22
24.89 ± Ac. Total
23.89 ± Ac. Net
LOT 23
38.54 ± Ac.
NO SURVEY
LOT 35
119.05 ± Ac.
PID# 04 12 200 007 000
LOT 18
4.75 ± Ac.
LOT 19
14.66 ± Ac.
LOT 24
20.89 ± Ac.
NO SURVEY
LOT 36
GREEN
PRAIRIE
HEIGHTS
ADD
NO SUBDIVISION PERMIT

Nate C. Hartman

From: Ken D. Schroeder
Sent: Thursday, January 16, 2014 9:18 AM
To: Nate C. Hartman
Subject: sewage disposal system for PID 04 12 200 007 000
Attachments: part of sec 12-10-5.pdf

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for Lot 35 irregular tracts located in the NE 1/4 of Section 12, T10N, R5E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec.12-10-5)*
As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.
Ken

Kenneth D. Schroeder, RLS
Lancaster County Surveyor
444 Cherrycreek Road, Bldg. "C"
Lincoln, Nebraska 68528
kschroeder@lancaster.ne.gov
Phone (402) 441-7681
Fax (402) 441-8692

SCANNED

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

A

Permit Number HS000863

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 5950 W Adams. City Lincoln, NE Zip
(no rural route)

Legal Description 12 10 5 6th meridian 35NE
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 04-12-200-007-000

B. Owner

Name Stanton D Harn Signature
Address 1631 Brent Blvd. City/State/Zip Lincoln, Ne. 68506
Home Phone Work Phone

C. Certified Installer

Name: Kelly Wolinski Signature
Address 3130 S 6th. #100 City/State/Zip Lincoln, Ne. 68502
Work Phone 402-610-0561

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 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 118.6/160
Garbage Grinder? ☐ 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. 02-30

1. Health Department
Site visits
Comments
Date rec'd 1/14/14
Date frwd 1/16/14
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 7/9/14

Business Office Use Only
Date Received 1/15/13 Amount Paid 365.00
Received By SB Cash/Check No. 51912

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

Form A Updated: 1/13

SCANNED



Google earth

feet 300
meters 100