FEB 2 1 2014

A

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1614
Phone: 402-441-8643

Permit Number
HS0008669

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 5823 SW 126th St City Walton NE Zip 68461
(or rural route)

Legal Description SE 1/4 - 7 1/4 - 9N Section - 5E Township - Range - Subdivision - Addition - Block - 3 Lot

PID

B. Owner

Name Michael Rapp Signature Michael Rapp

Address 7510 Lincolnshire Rd City State Zip Lincoln NE 68506

Home Phone 402-487-1335 Work Phone 402-484-5500

C. Certified Installer

Name Lloyd Johnson Plumbing & Heating Signature Kevin Johnson for Lloyd

Address 1300 W Van Dorn St City State Zip Lincoln NE 68522

Work Phone 402-435-8 Email

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 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 80?

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 — ACTION ☐ Approved ☐ Disapproved
Site visits Date rec'd Signature
Date appr'd
Comments

2. Supt. Bldg. Insp. or Village Clerk — ACTION ☐ Approved ☐ Disapproved
Comments Date rec'd Signature
Date appr'd

3. City or County Engineer — ACTION ☐ Approved ☐ Disapproved
Comments Date rec'd Signature
Date appr'd

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 2/21/14 Amount Paid $365.00
Received By SB Cash/Check No. 8318
Zone Building # Sanitarian

Form Updated: 8-13

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

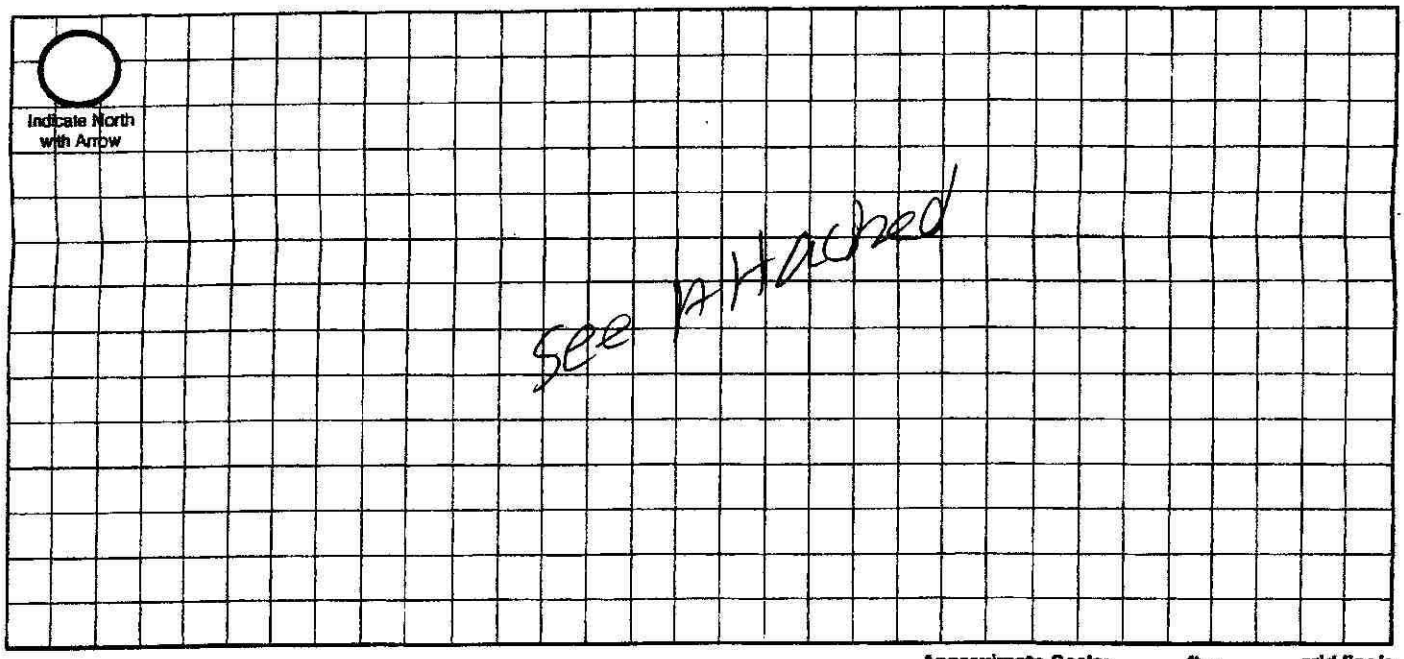
C

Permit Number: HS000869

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) 5332 S. 140th St City Venton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

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

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

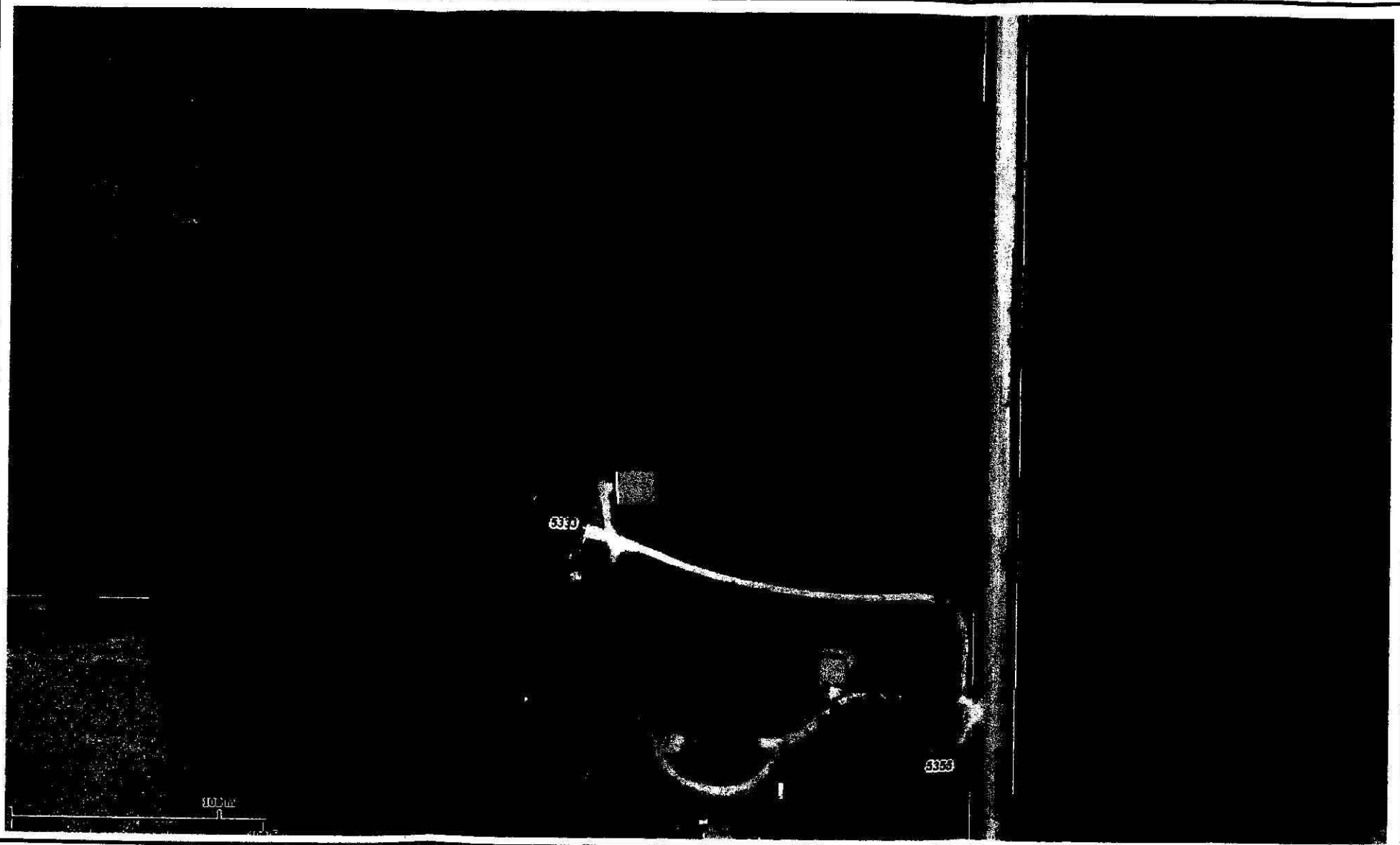
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

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 2/14/14

Installer _____ Date 2/13/14



N
W E
S

Lancaster County/City of Lincoln GIS Map

Printed: Feb 21, 2014

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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. HS000869

System Type: Lagoon

Situs: 5333 SW 126 ST, RURAL, NE

Issued: 2/24/2014

Expires: 2/24/2015

Description: S7, T9, R5, 6th Principal Meridian, LOT 8 SE

Owner: RAPP, MICHAEL F & JODY K
7510 LINCOLNSHIRE RD
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

RAYMOND CONTRACTING
13800 NW 70TH ST
RAYMOND, NE 68428

NOV 14 2014

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

D

Permit Number: H50008869

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date November 10, 2014 Legal Description SE 1/4 SE 1/4 7-9N-5E Section Township Range Lot 8

Onsite System Location

Address (no rural route) 5333 SW 126th St City Denton NE, Zip 68339

Owner Michael + Jodey Rapp Address 7510 Lincolnshire Rd Lincoln, NE 68526

A. Sewer Pipe

1. Material: SDR 26
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 660 ft.
4. Number of clean-outs: 9
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: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ 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: _____ in.
8. Distances to: Well or suction line _____ 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

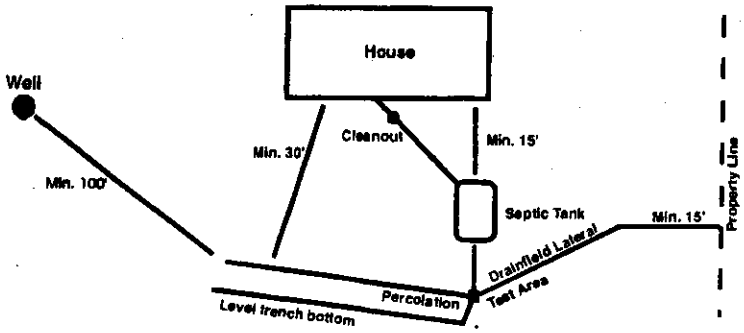
☐ Trench ☐ Bed ☐ Level Bottom

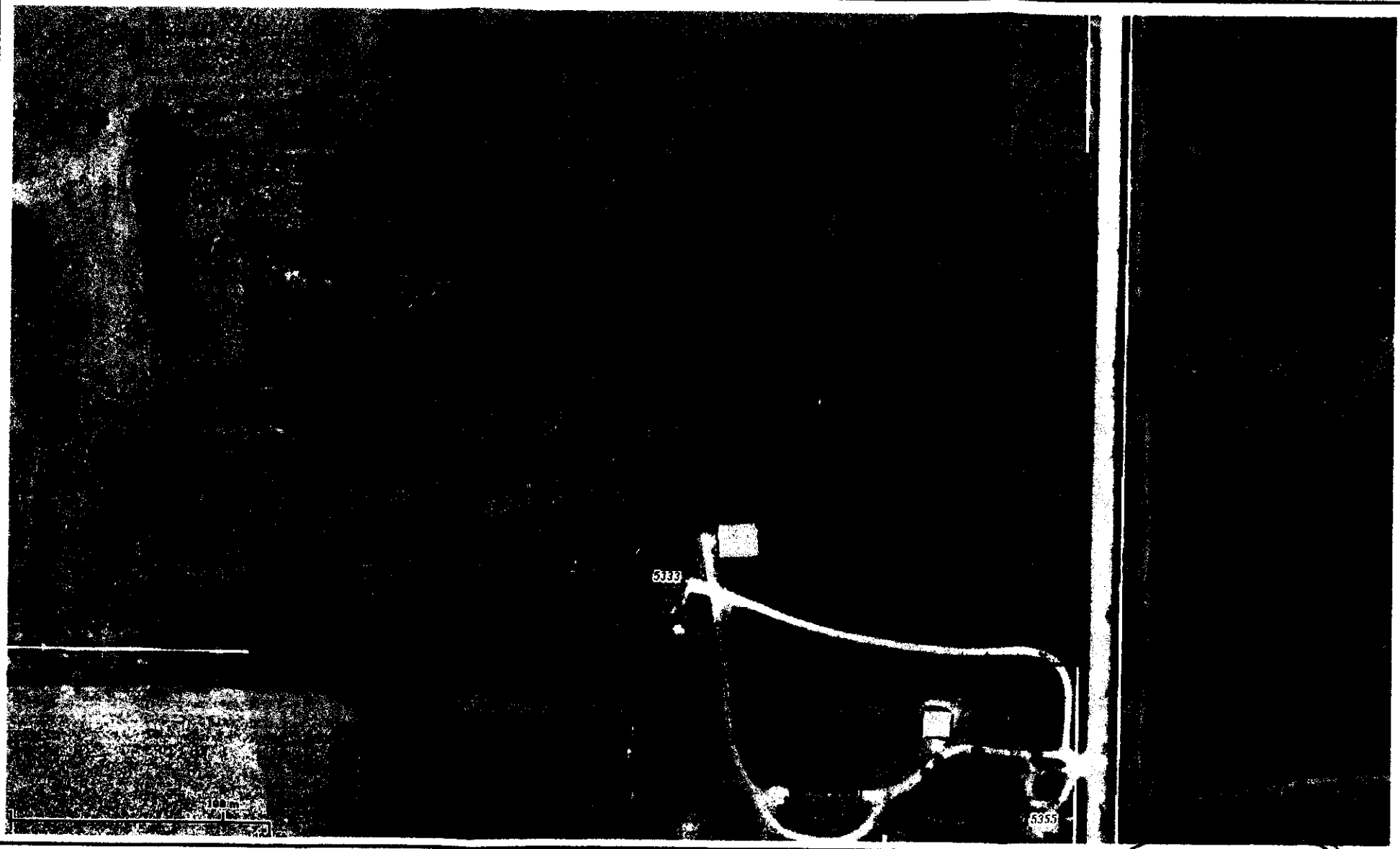
1. Type: ☐ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width: _____
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.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

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

Onsite Wastewater System Design (Example)

Indicate North with Arrow





N
W E
S

Lancaster County/City of Lincoln GIS Map

660' TOTAL.

Michael & Jody Rapp 5333 SW 126th St, Denton, NE

Printed: Nov 11, 2014

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SCANNED

FEB 2 1 2014

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: (402) 441-8040

A

Permit Number
HS000869

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 5833 NW 126th St (for rural route) City Waverly NE Zip 68462

Legal Description SE 1/4 7 Section 9N Township 5E Range Subdivision Addition Block Lot

PID

B. Owner

Name Michael Rapp Signature Michael E Rapp

Address 7510 Lincolnshire Rd City State Zip Lincoln NE 68506

Home Phone 402-487-1335 Work Phone 402-484-5500

C. Certified Installer

Name Lloyd Tatenhorst Keystone Construction Signature Kevin L. Gillespie for Lloyd

Address 13200 Yankee Hill Rd City State Zip Lincoln NE 68527

Work Phone 402-525-3 Cell

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 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 80?

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. 12-30

1. Health Department
Site Visits: Date received 2/24/14 Date rev'd 2/24/14
ACTION ☑ Approved ☐ Disapproved
Signature
Comments: Site + Lagoon - 11/14

2. Supt. Bldg. Insp. or Village Clerk
Comments: Date received Date rev'd
ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments: Date received Date rev'd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date 12/19/14

Business Office Use Only
Date Received 2/21/14 Amount Paid $365.00
Received By SB Cash/Check No. 8318

* Exists Hz Property —

SCANNED

FEB 2 1 2014

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

A

Permit Number
HS000869

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 5333 SW 126th St (no rural route) City Walton NE Zip 68332

Legal Description SE 7 9N 5E 5
1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

PID

B. Owner

Name Michael Rapp Signature Michael F. Rapp

Address 7510 Lincolnshire Rd. City/State/Zip Lincoln, NE 68506

Home Phone 402-489-1338 Work Phone 402-484-5500

C. Certified Installer

Name Lloyd Jakoubek, Raymond Contracting Signature Lloyd Jakoubek for Lloyd

Address 13811 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-3600

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 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 80?
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
*Cke + Lagoon - 11/14
Comments
Date rec'd 2/24/14
Date frwd 2/24/14
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 12/17/14

Business Office Use Only
Date Received 2/21/14 Amount Paid $365.00
Received By SB Cash/Check No. 8318

Yellow - Engineer

Form A Updated: 1/13

* Existing property

SCANNED

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

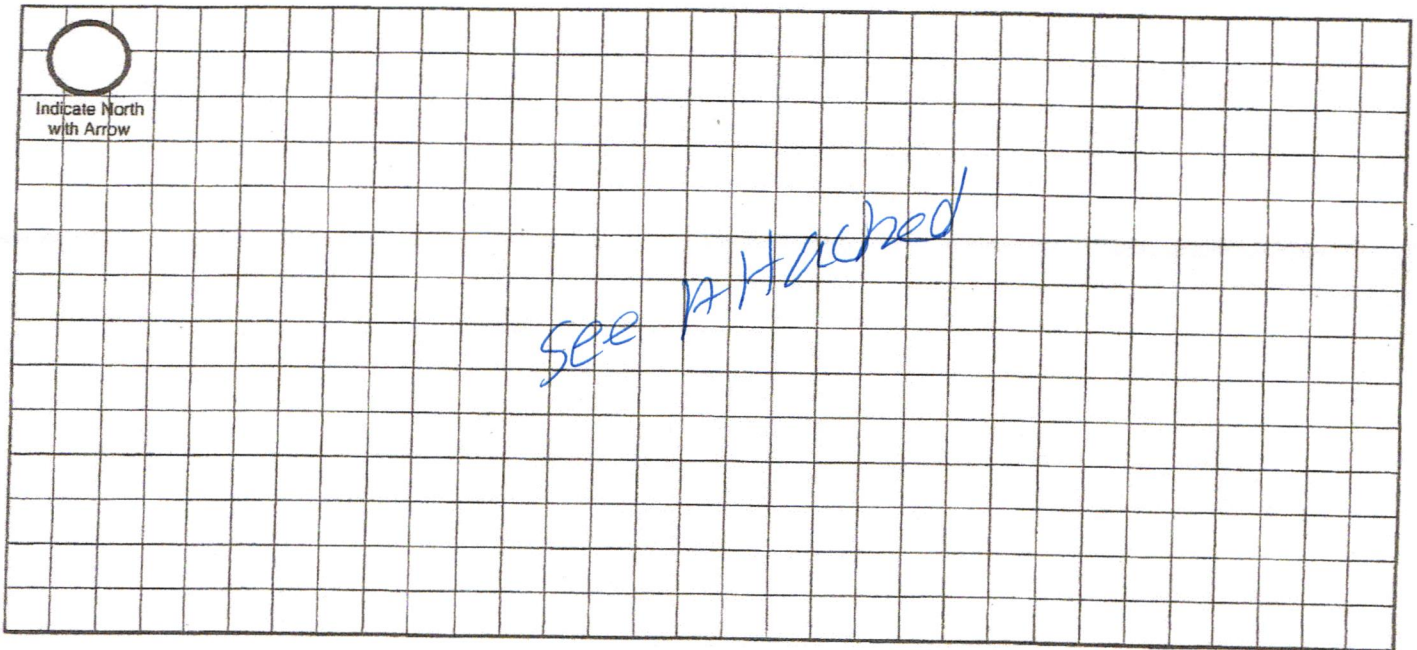
C

Permit Number: HS000869

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) 5333 SW 12lath St City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

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

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ 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 2/14/14

Installer _____ Date 2/13/14



Lancaster County/City of Lincoln GIS Map

N
W E
S

Printed: Feb 21, 2014

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SCANNED

9-5-7

SCANNED

NOV 14 2014

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

D

Permit Number: HS0008869

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date November 10, 2014 Legal Description SE 1/4 SE 1/4 7-9N-5E Section Township Range Lot 8

Onsite System Location

Address (no rural route) 5333 SW 126th St City Denton NE, Zip 68339

Owner Michael + Jodey Rapp Address 7510 Lincolnshire Rd Lincoln, NE 68526

A. Sewer Pipe

1. Material: SDR 26
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 660 ft.
4. Number of clean-outs: 9
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: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ 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: _____ in.
8. Distances to: Well or suction line _____ 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

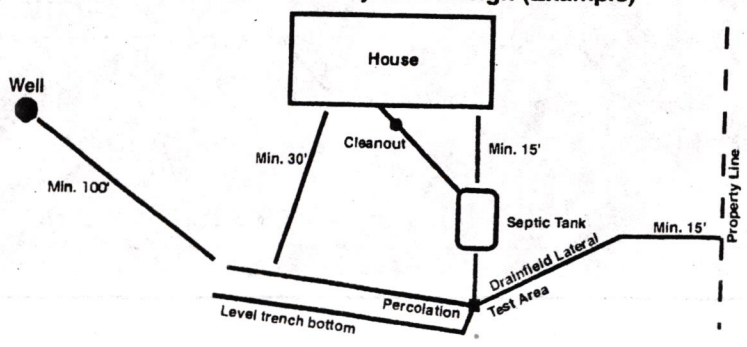
☐ Trench ☐ Bed ☐ Level Bottom

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

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

Onsite Wastewater System Design (Example)

Indicate North with Arrow





N
W E
S

Lancaster County/City of Lincoln GIS Map

660` TOTAL.

Michael & Jody Rapp 5333 SW 126th St, Denton, NE

Printed: Nov 11, 2014

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