MAR 13 2014

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

A

Permit Number
HS000874

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 5257 SW 180th St (or rural route) City Denton NE Zip 68339

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

PID 02-07-400-000-000

B. Owner

Name Miranda Jody Kapp Signature [signature]

Address 7316 Woodshire Rd City State Zip Lincoln NE 68516

Home Phone 402-432-1883 Work Phone 402-416-5320

C. Certified Installer

Name Lloyd Schmidt Excavating Inc. Signature Ken L Johnson for Lloyd

Address 12144 Rd 70A 31 City State Zip Bennet NE 68317

Work Phone 402-782-4824

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 24.42
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. 92-30

1. Health Department
Site visits
Comments
Date rec'd
Date fwd
ACTION ☐ Approved ☐ Disapproved
Signature

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 3/13/14 Amount Paid 365.00
Received By SB Check No. 8329

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

B OCT 25 2010

Permit Number: HS0004424

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 5355 SW 12th (no rural route) City Lincoln Denton NE, Zip 68339

Owner M. & Kapp Address

Soil Type (SCS): Pawnee Percolation Rate: 40 min./inch

Date of Tests 10-1 to 10-2 Weather: Precipitation Dry Temperature 80

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	10-1	5 pm	10-2	3 pm	10-2	3 pm	18	10-2	:30	30	1 1/4	24
2							:02	21		:32		1"	30
3							:04	16		:34		3/4	40
4							:06	17		:36		7/8	38
5							:08	15		:38		1"	30
6							:10	21 1/2		:40		1 1/4"	24

Person Conducting Percolation Tests

Name: Bob Brass
Phone: 416-9260
Address 3394 Manderson
Lincoln NE

Sum of Percolation Rates: 186
Average of Rates: 31
Rate Used for Calculation: 40

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

C

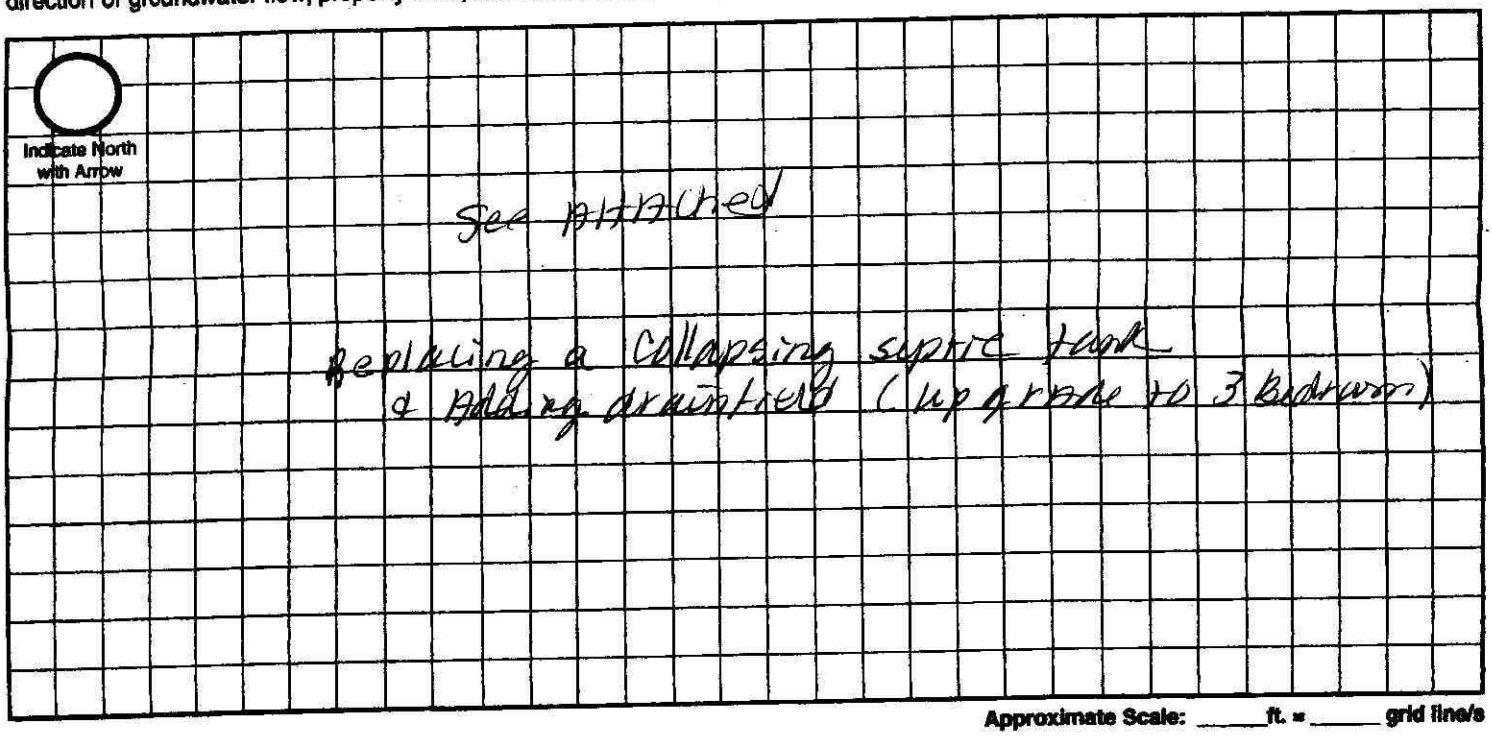
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

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) 5355 SW Idlewild St City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 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 40 (min/inch = mpi) No. of Bedrooms 3 Soil Type_____ Land Slope_____%

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

Total length of laterals 175' new 90'old Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 2 new 2'old Width 40" No. of drop boxes_____ 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 Existing Home Date_____

Installer [signature] Date 3/11/2014

SCANNED

MAR 13 2014

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

A

Permit Number
HS000 874

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 5353 SW 126th St (no rural route) City Denton NE Zip 68339

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

PID 03-07-400-006-000

B. Owner

Name Michael + Jody Rapp Signature Jody Rapp

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

Home Phone 402-475-1328 Work Phone 402-484-5500

C. Certified Installer

Name Lloyd Jahnke Raymond Contracting Signature Kevin L Johnson for Lloyd

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

Work Phone 402-783-4409

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 79.45
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 3/17/14
Date fwd 3/17/14
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 3-14-14
Date fwd 3-14-14
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 3-14-14
Date fwd 3-14-14
ACTION ☒ Approved ☐ Disapproved
Signature Jim Plouzek

Installation Final Written Approval
By
Date 4/10/14

Business Office Use Only
Date Received 3/13/14 Amount Paid 365.00
Received By SB Cash/Check No. 8329

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

Form A Updated 1-12

APR 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:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 4/8/2014 Legal Description SE (1/4) SE (1/4) 7-9N-5E (Section Township Range)

Onsite System Location

Address (no rural route) 5355 SW 126th St City Denton NE, Zip 68339

Owner Michael + Jodey Rapp Address 7510 Lincolnshire Rd, Lincoln NE 68506

A. Sewer Pipe

1. Material: old Line SDR 26
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 30' ft.
4. Number of clean-outs: Double Sweep-1
5. Distances to: well or suction line 80'+ ft.
   stream 100 ft.
   pressure line 100 ft.
   property line 100 ft.

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: New concrete
   Number of compartments: one ~~1500~~
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 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: 36 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: Switching Box / End Caps
   Number available outlets: plastic - 2 per end
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 34' ft.

D. Drainfield Absorption

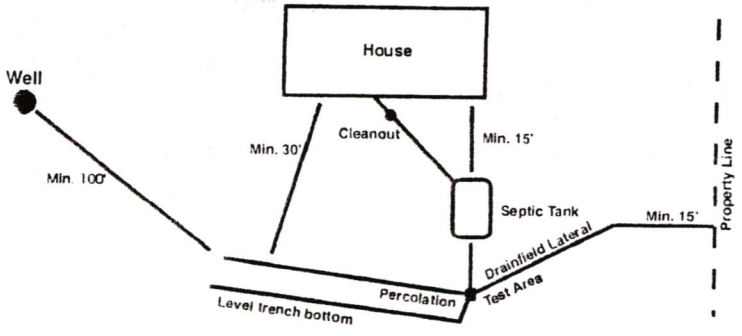
☑ Trench ☐ Bed ☐ Level Bottom

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 2
   Length of each line: one old 45' ft. New 125 ft.
   New 50 ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width 40" ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 24-32 in
4. Filter material: 24-32 Soil
   Depth of material 24-32 in.
5. Distances to: Well or suction line 100 ft.
   Pressure line 100 ft.
   Property line 50 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)



4/8/2014

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. A5000874 Certified Installer: E Lloyd Jekowski

Address: 5355 SW 126th

Circle compliance status for each item. **IN = in compliance OUT = not in compliance NA = not applicable NO = not observed**

LAGOON SETBACKS

				Item	MIN. SETBACK DISTANCE – FT. (METERS)
IN	OUT	NA	NO	Surface Wtr. Distance from Wtr. Mark	50 ft. (15.2 m)
IN	OUT	NA	NO	Private Drinking Water Wells	100 ft. (30.5 m)
IN	OUT	NA	NO	Public Drinking Water Supply Wells:	
IN	OUT	NA	NO	Non-Community	100 ft. (30.5 m)
IN	OUT	NA	NO	Community	Evaluated by a professional engineer for potential impact on the well and submitted to the Dept. for approval l if less than 1000 ft. (304.8 m)
IN	OUT	NA	NO	All Other Water Wells	100 ft. (152.4 m)
IN	OUT	NA	NO	Water Lines:	
IN	OUT	NA	NO	Pressure Main	25 ft. (7.6 m)
IN	OUT	NA	NO	Pressure-Service Connection	25 ft. (7.6 m)
IN	OUT	NA	NO	Suction Line	100 ft. (30.5 m)
IN	OUT	NA	NO	Property Lines	50 ft. (15.2 m)
IN	OUT	NA	NO	Trees and Brush	50 ft. (15.2 m)
IN	OUT	NA	NO	Foundations: (see definition above)	
IN	OUT	NA	NO	Except Neighbor's Foundation:	
IN	OUT	NA	NO	Class 1	100 ft. (30.5 m)
IN	OUT	NA	NO	Class 2	100 ft. (30.5 m)
IN	OUT	NA	NO	Class 3	50 ft. (15.2 m)
IN	OUT	NA	NO	Neighbor's Foundation:	
IN	OUT	NA	NO	Class 1	200 ft. (61.0 m)
IN	OUT	NA	NO	Class 2	200 ft. (61.0 m)
IN	OUT	NA	NO	Class 3	100 ft. (30.5 m)

COMMENTS

Lagoon Dimensions:

TANK AND SOIL ABSORPTION SYSTEM SETBACKS

				Item	MIN. SETBACK DISTANCE – FT. (METERS) Tanks	Absorption, Infiltrative & Evaporative Systems
IN	OUT	NA	NO	Surface Water	50 ft. (15.2 m)	50 ft. (15.2 m)
IN	OUT	NA	NO	Private Drinking Water Wells	50 ft. (15.2 m)	100 ft. (30.5 m)
IN	OUT	NA	NO	Public Drinking Water Supply Wells:		
IN	OUT	NA	NO	Non-Community System	50 ft. (15.2 m)	100 ft. (30.5 m)
IN	OUT	NA	NO	Community System	500 ft. (152.4 m)	500 ft. (152. 4 m)
IN	OUT	NA	NO	Community System when a septic system or soil absorption system of > 1000 gpd is proposed	500 ft. (152.4 m)	Evaluated by professional engineer for potential impact on the well and submitted to the Depart. for approval if less than 1000 ft.
IN	OUT	NA	NO	All Other Water Wells	50 ft. (15.2 m)	100 ft. (30.5 m)
IN	OUT	NA	NO	Water Lines:		
IN	OUT	NA	NO	Pressure-Main	10 ft. (3.1 m)	25 ft. (7.6 m)
IN	OUT	NA	NO	Pressure-Service – Connection	10 ft. (3.1 m)	25 ft. (7.6 m)
IN	OUT	NA	NO	Suction Lines	50 ft. (15.2 m)	100 ft. (30.5 m)
IN	OUT	NA	NO	Property Lines	5 ft. (1.5 m)	5 ft. (1.5 m)
IN	OUT	NA	NO	Parking area, driveway, sidewalk or other impermeable surface or cover	5 ft. (1.5 m)	5 ft. (1.5 m)
IN	OUT	NA	NO	Foundations: (see definitions above)		
IN	OUT	NA	NO	Except Neighbor's Foundation:		
IN	OUT	NA	NO	Class 1	15 ft. (4.6 m)	30 ft. (9.1 m)
IN	OUT	NA	NO	Class 2	10 ft. (3.1 m)	20 ft. (6.1 m)
IN	OUT	NA	NO	Class 3	7 ft. (2.1 m)	10 ft. (3.1 m)
IN	OUT	NA	NO	Neighbor's Foundation:		
IN	OUT	NA	NO	Class 1	25 ft. (7.6 m)	40 ft. (12.2 m)
IN	OUT	NA	NO	Class 2	20 ft. (6.1 m)	30 ft. (9.1 m)
IN	OUT	NA	NO	Class 3	15 ft. (4.6 m)	20 ft. (6.1 m)

COMMENTS

7/100ft

3 bedroom

Septic Tank Size: 1500

Lateral Sq. Footage:

Inspected By: _____ **Date:** 4/10/14

* Only a 2 bedroom house - adding for future expansion