Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1413
Phone 402-441-8021

A

Permit Number
HS 000885

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C
Submit correct fee
with this Application

3 forms or more required for: ☐ Septic System ☒ Lagoon ☐ Other (refer to Form C)

The undersigned hereby requests the issuance of a permit to construct a Wastewater Treatment System in accordance with applicable rules and regulations

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 5665 N 11th
(or rural route)

Legal Description Parkland Estates 2 2
1/4 1/4 Section Township Range Subdivision Addition Block

PID 04-05-202-002-000

B. Owner

Name Timothy Stehlik

Address

Home Phone

Signature

C. Certified Installer

Name Colonial Well Drilling Inc.

Address 270 W. Main St P.O. box H

Work Phone 402-261-2256

D. Engineer

☐ Check and complete if engineer designed system

Designer Name Firm

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 4 Wastewater Flow (GPD) 3.01

Garbage Disposal? ☒ Yes ☐ No

☐ Commercial Establishment Type of Facility Design Flow (GPD)

Type of Wastewater ☒ Domestic ☐ Other

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ Variance Requested

1. Health Department
Site visits Date
Date by
Comments

ACTION ☐ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments Date
Date faxed

ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments Date
Date fax

ACTION ☐ Approved
Signature

Installation Final Written Approval
By
Date

Receipt Number 4/10/14 SB
365.00
10 90

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

B

Permit Number: HS000885

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 5665 [illegible] 115th (no rural route) City [illegible] NE Zip [illegible]

Owner Timothy Stahlman Address [illegible]

Date of Tests [illegible] to [illegible] Weather Precipitation [illegible] Temperature [illegible]

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 Level (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
								6					
								6					
								6					
								6					
								6					
								6					
								6					
								6					

Slowest Percolation Rates [illegible]

Average of Rates [illegible]

Rate Used for Calculation [illegible]

Person Conducting Percolation Test

Name: [illegible]

Phone: [illegible]

Address [illegible]

Soil type (NRCS Maps/Other) [illegible]

Groundwater Depth [illegible]

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.) [illegible]

Signature of Reviewing Official [illegible] Date

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1819
Phone: 402-441-8022

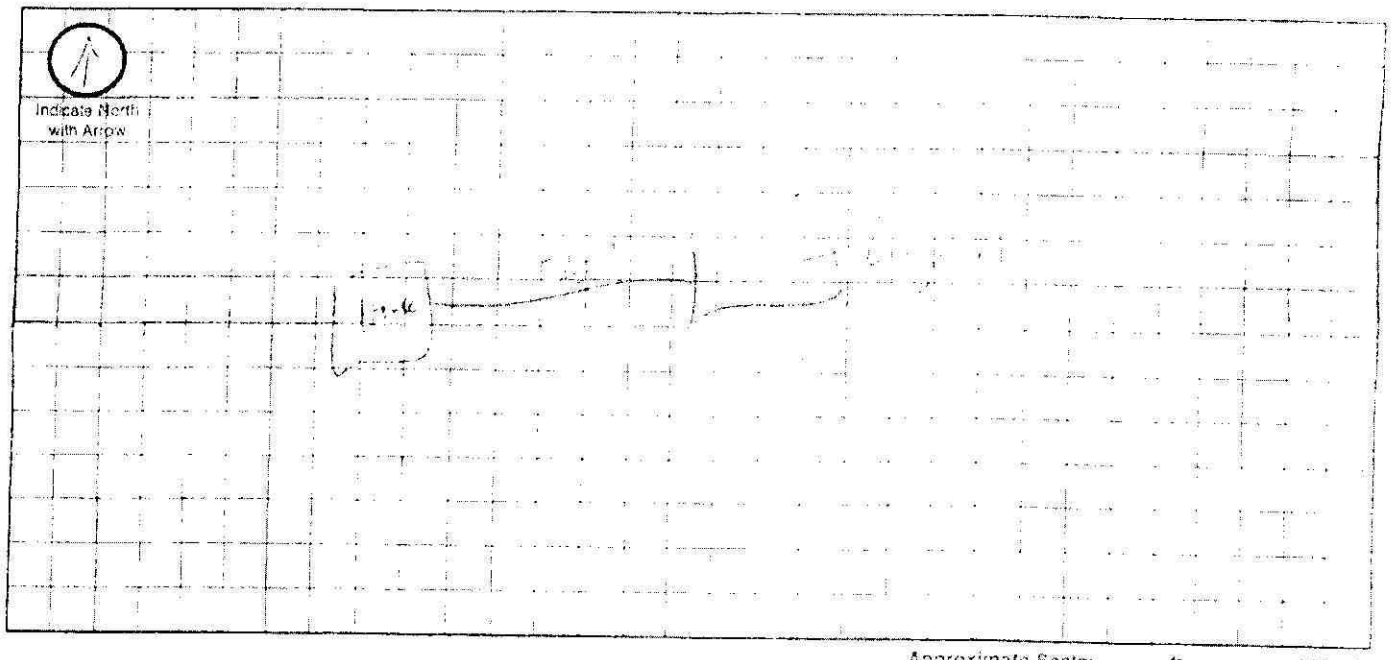
C

Permit Number
HS000885

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, proc 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) 5645 Lavista [illegible] NE Zip

B. Proposed Septic Tank/s

Septic Tank Cap. gals Tank Material: ☐ Concrete ☐ Plastic ☐ Other ☐ Lagoon Max. sewage lbs. per

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 NDEC approved) Total Square feet of drainfield

Total length of laterals Type of distribution: ☐ Perforated Pipe ☐ Half Round ☐ Chamber ☐ Other

No. of absorption trenches Width No. of laterals per trench

No. of absorption beds Width No. of Distribution lines per bed

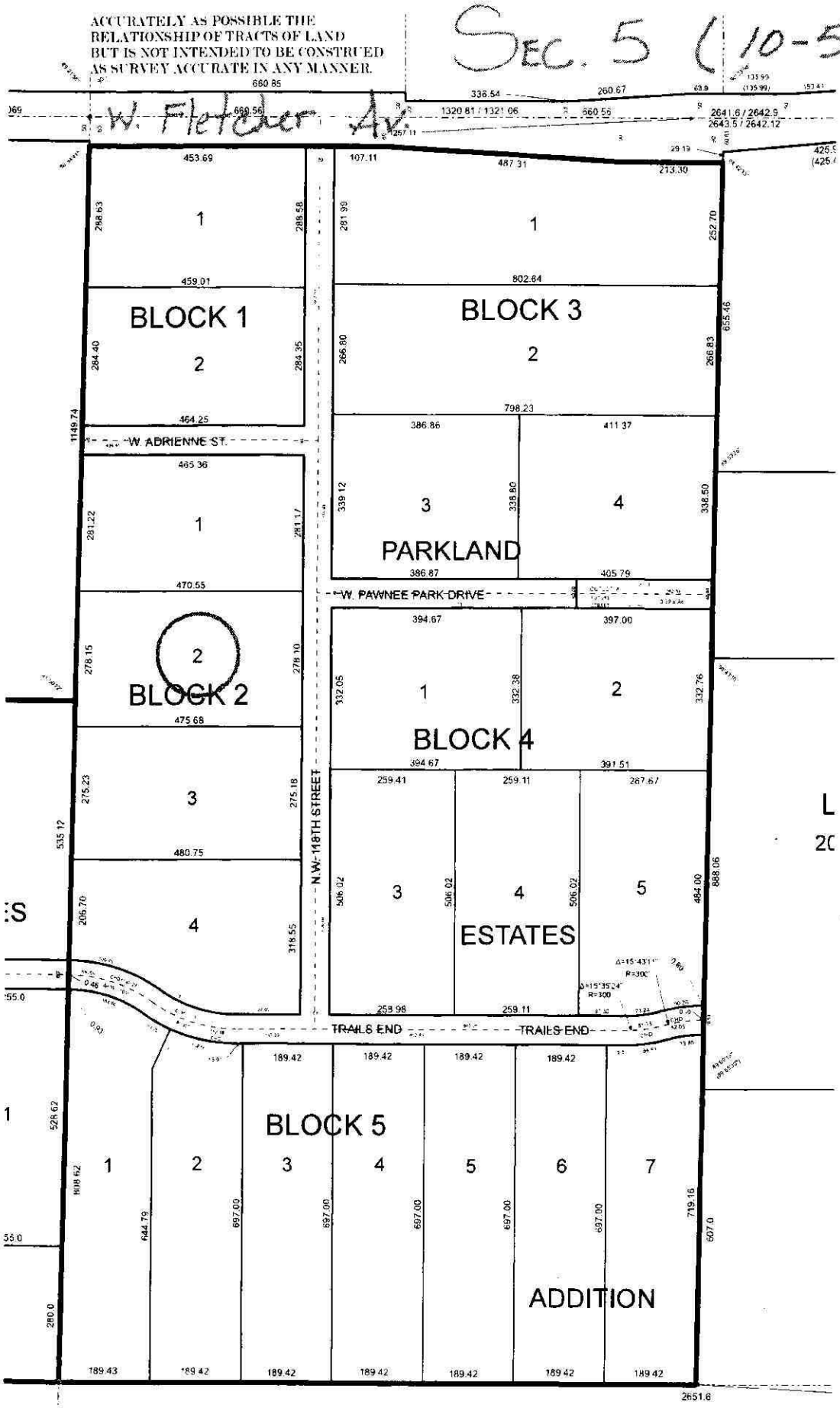
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

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 ☐	N/A ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	20 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor Date

Installer [signature] [illegible] Date


ACCURATELY AS POSSIBLE THE
RELATIONSHIP OF TRACTS OF LAND
BUT IS NOT INTENDED TO BE CONSTRUED
AS SURVEY ACCURATE IN ANY MANNER.
SEC. 5 (10-5)
W. Fletcher Av
BLOCK 1
BLOCK 2
BLOCK 3
PARKLAND
BLOCK 4
ESTATES
BLOCK 5
ADDITION
W. ABRIENNE ST.
W. PAWNEE PARK DRIVE
N.W. 118TH STREET
TRAILS END
TRAILS END

Nate C. Hartman

From: Todd A. Stutzman
Sent: Wednesday, April 09, 2014 2:12 PM
To: Nate C. Hartman
Subject: 5665 NW 118TH

Nate,

Parkland Estates Block 2 Lot 2 is a buildable lot.

Nate C. Hartman

From: Ken D. Schroeder
Sent: Wednesday, April 09, 2014 11:05 AM
To: Nate C. Hartman
Subject: sewage disposal system
Attachments: part of sec 5-10-5.pdf

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for lot 2, Block 2, "Parkland Estates Addition" located in the NE 1/4 of Section 5, T10N, R5E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec 5-10-5)*
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

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. HS000885

System Type: Lagoon

Situs: 5665 NW 118TH ST., RURAL

Issued: 4/10/2014

Expires: 4/10/2015

Description: PARKLAND ESTATES ADDITION, BLOCK 2, Lot 2

Owner: STOHLMAN, TIMOTHY &
LINEWEBER, CRYSTAL
6136 NW 11 ST
LINCOLN, NE 68521

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

GERLACH CARPENTRY INC
13060 LIZZIE LANE
LINCOLN, NE 68527

LINCOLN-LANCASTER COUNTY
HEALTH DEPARTMENT
3140 "N" Street
Lincoln, NE 68510-1514

RETURN SERVICE REQUESTED

CITY OF LINCOLN NEBRASKA

PRESORTED
FIRST CLASS

$00.460
04/11/2014
Mailed From 68510
US POSTAGE

APR 16 2014

GERLACH CARPENTRY INC
13060 LIZZIE LANE
LINCOLN, NE 68527

681 NFE 13001141 0004/15/14
RETURN TO SENDER
GERLACH
PO BOX 29774
LINCOLN NE 68529-0774

RETURN TO SENDER


UNITED STATES POSTAGE
PITNEY BOWES
02 1R
$ 00.00⁰
0006558076 APR 14 2014
MAILED FROM ZIP CODE 68117

SCANNED

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln, NE 68510
Phone 402-441-8000

A

Permit Number
HS 000885

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C
Submit correct fee
with this Application

3 copies of more required for ☐ Septic System ☒ Lagoon ☐ Other
The undersigned hereby requests site clearance and permit for the construction of the following Wastewater Treatment System in accordance with applicable Regulations

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 5665 N 11th (Nearest road)

Legal Description 5 10N 5 Parkland Estates
1/4 1/4 Section Township Range Acres Block

PID 04-05-202-002-000

B. Owner

Name Timothy Stevens

Address

Home Phone

C. Certified Installer

Name Gerdes Well Drilling Inc.

Address 234 E Wenzel PO Box H

Work Phone 402-261-2255

D. Engineer ☐ Check and complete if engineer designed system

Designer Name Firm

E. This system will serve a

☒ Residential Dwelling Number of bedrooms 4 Within ½ mile of sewer? ☐ Yes ☒ No Est. Flow 301
Garbage disposal? ☒ Yes ☐ No

☐ Commercial Establishment (Describe activity)
Type of Establishment ☐ Restaurant ☐ Other

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Mail approval to Applicant Copy to Contractor

1. Health Department
Site visits 7/24/14 Date 4/10/14
Comments Date 4/10/14 ACTION ✓ ☐ Rejected ☐ Approved

2. Supt. Bldg. Insp. or Village Clerk
Comments Date
Date ACTION X ☐ Rejected ☐ Approved

3. City or County Engineer
Comments Date
Date ACTION ✓ See attached ☐ Rejected ☐ Approved

Installation Final Written Approval
By Doug Unger
Date 7/29/14

Date Paid 4/10/14 SB
Amount Paid 365.00
Receipt # 1090

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS000885 Certified Installer: Justin Peterson

Address: 5665 NW 118th

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)	COMMENTS
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)	Lagoon Dimensions:
IN	OUT	NA	NO	Class 2	200 ft. (61.0 m)	
IN	OUT	NA	NO	Class 3	100 ft. (30.5 m)	

TANK AND SOIL ABSORPTION SYSTEM SETBACKS

				Item	MIN. SETBACK DISTANCE – FT. (METERS) Tanks	Absorption, Infiltrative & Evaporative Systems	COMMENTS
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)	Septic Tank Size: 1750
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)	Lateral Sq. Footage:
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)	~ 1,490

Inspected By: Doug Mau Date: 7/24/14

SCANNED

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

A

Permit Number HS 000885

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 5665 NW 118th (no rural route) City Lincoln NE Zip 68524

Legal Description 5 10N 5 Parkland Estates 2 2

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

PID 04-05-202-002-000

B. Owner

Name Timothy Stohlman Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Corwest Well Drilling Inc. Signature

Address 2796 W. Milford Rd P.O. Box H City/State/Zip Milford, NE 68405

Work Phone 402-761-2781

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 3.01

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 7/24/14 Date rec'd 4/10/14 Date frwd 4/10/14
ACTION ☒ Approved ☐ Disapproved Signature
Comments

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 Doug Unger
Date 7/29/14

Business Office Use Only
Date Received 4/10/14 Amount Paid 365.00
Received By SB Cash/Check No. 1090

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

Form A Updated 1/13

SCANNED

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

B

Permit Number: ITS000885

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 5665 NW 118th (no rural route) City Lincoln NE, Zip _____

Owner Timothy Stohlman Address _____

Appling for Lagoon for now will perk later

Date of Tests _____ to _____ Weather: Precipitation _____ Temperature _____

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				Water Level Drop G. H. I. J. K. Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start		Initial	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 Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
								6					
								6					
								6					
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Dustyn Peterson

Phone: 402-641-6174

Address _____

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: _____

Soil type (NRCS Maps/Other) _____

Groundwater Depth _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official _____ Date _____

SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section _____
Township _____ Range _____
1/4 Section _____

Owner: Greg Gerlach
Address: 5665 NW 118th

Property Dimensions: _____ acres

Soil Type: Silty Clay _____ Silty Clay Loam _____ Sandy Loam _____ Silty Loam _____ Clay Loam X Sandy Clay _____

Dates of Tests: 5-24-14 to 5-25-14 Weather: Precip: .25 Temp: 90s

a	b	c	d	e	f	g	h	i	j	k	l	m
		Pre-Saturation Period				Percolation Readings						Results
		Start		End		Start		End				
	Hole	Date	Time	Date	Time	Date	Time	Water	Time	Water	Elapsed	
Hole No.	Depth (in.)	(Mo. Day)	(Hr. Min.)	(Mo. Day)	(Hr. Min.)	(Mo. Day)	(Hr. Min.)	Level (in.)	(Hr. Min.)	Level (in.)	Time (Min.)	
1	36	5-24	1:30pm	5-24	5:30pm	5/25	1:10pm	6	1:40pm	5½	30	½
2	36	5-24	1:30pm	5-24	5:30pm	5/25	1:10pm	6	1:40pm	5½	30	½
3	36	5-24	1:30pm	5-24	5:30pm	5/25	1:10pm	6	1:40pm	5¼	30	¾
4	36	5-24	1:30pm	5-24	5:30pm	5/25	1:15pm	6	1:45pm	5¼	30	¾
5	36	5-24	1:30pm	5-24	5:30pm	5/25	1:15pm	6	1:45pm	5½	30	½
6	36	5-24	1:30pm	5-24	5:30pm	5/25	1:15pm	6	1:45pm	5¼	30	¾

Sum of Water Level Drops (in.) (Column m): 3.75
Average of Water Level Drops (in.) (Column m): 0.625
~~Inches per Minute~~

48 MPI

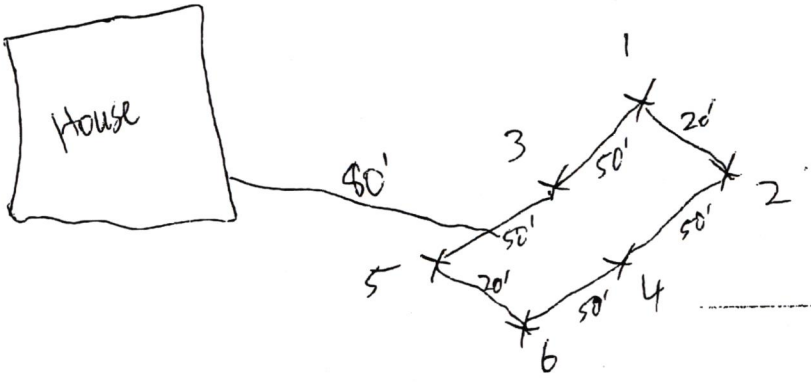
PERSON CONDUCTING TEST:
Name: Justyn Peterson
Address: 322-238th Rd
Milford NE 68405
Phone: 402-641-6174
Signature: Justyn Peterson

Square Feet of Lateral per Bedroom: 330

SKETCH SHOWING HOLE LOCATION:

N

4 bedroom yes whirlpool
yes garbage disp.
1320 sq. ft. needed



Official's Signature

SCANNED

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

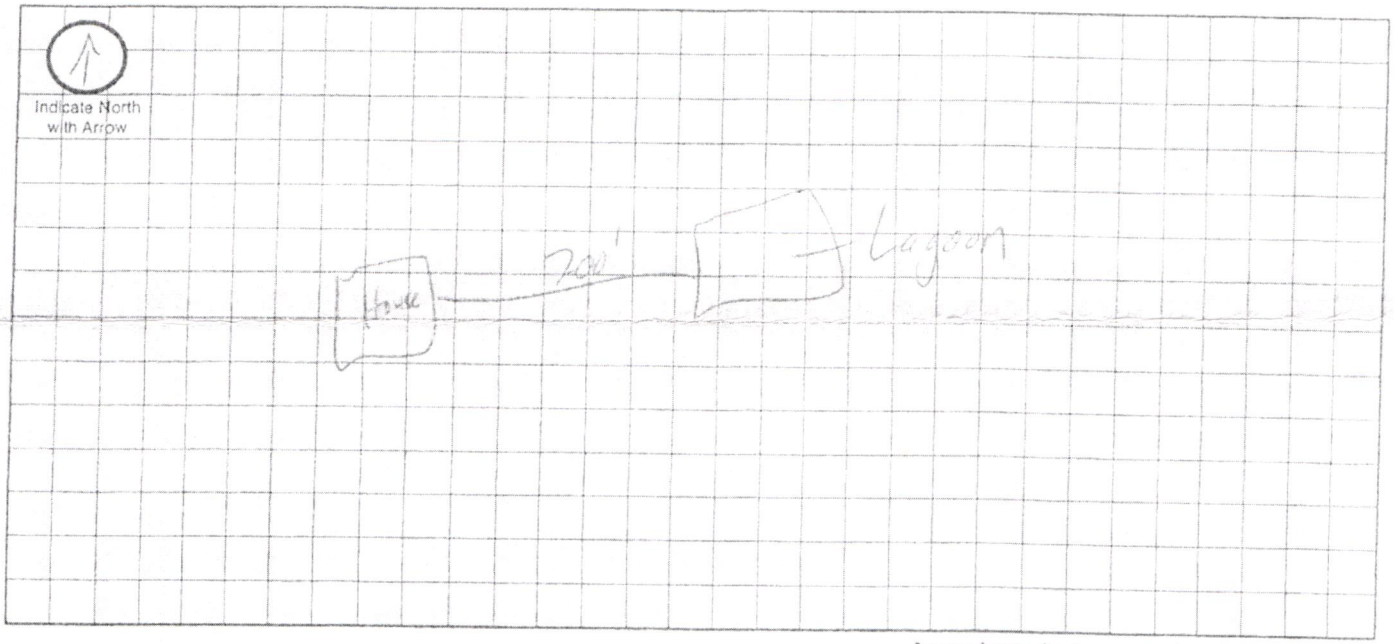
C

Permit Number: HS000885

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) 5665 NW 118th City Lincoln NE, Zip _____

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 _____

Installer [signature] 3/24/14 Date

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 7/24/14 Legal Description _____ 1/4 1/4 Section Township Range

Onsite System Location

Address (no rural route) 5665 NW 118th City _____ NE, Zip _____

Owner Timothy Stohlman Address _____

A. Sewer Pipe

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 80 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line 100 ft.
   stream NA ft.
   pressure line 20 ft.
   property line 50 ft.

Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Concrete (Precast)
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 1 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: 24 in.
8. Distances to: Well or suction line 70 ft.
   Stream NA ft.
   Pressure line 30 ft.
   Property line 50 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.

Did not use

D. Drainfield Absorption

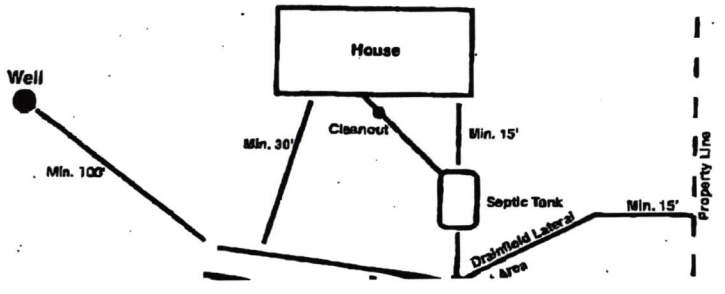
☒ Trench ☐ Bed ☐ Level Bottom

1. Type: ☒ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed 1
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 3
   Length of each line: 132 ft. 144 ft.
   112 ft. _____ ft., _____ ft.
3. Drainfield dimensions: Width 3 ft.
   Distribution Pipe Slope 0 in/100 ft.
   Average depth 38 in
4. Filter material: Native Clay
   Depth of material 38 in.
5. Distances to: Well or suction line 105 ft.
   Pressure line 40 ft.
   Property line 40 ft.
   House or building 50 ft.
   Lake or Stream NA ft.

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

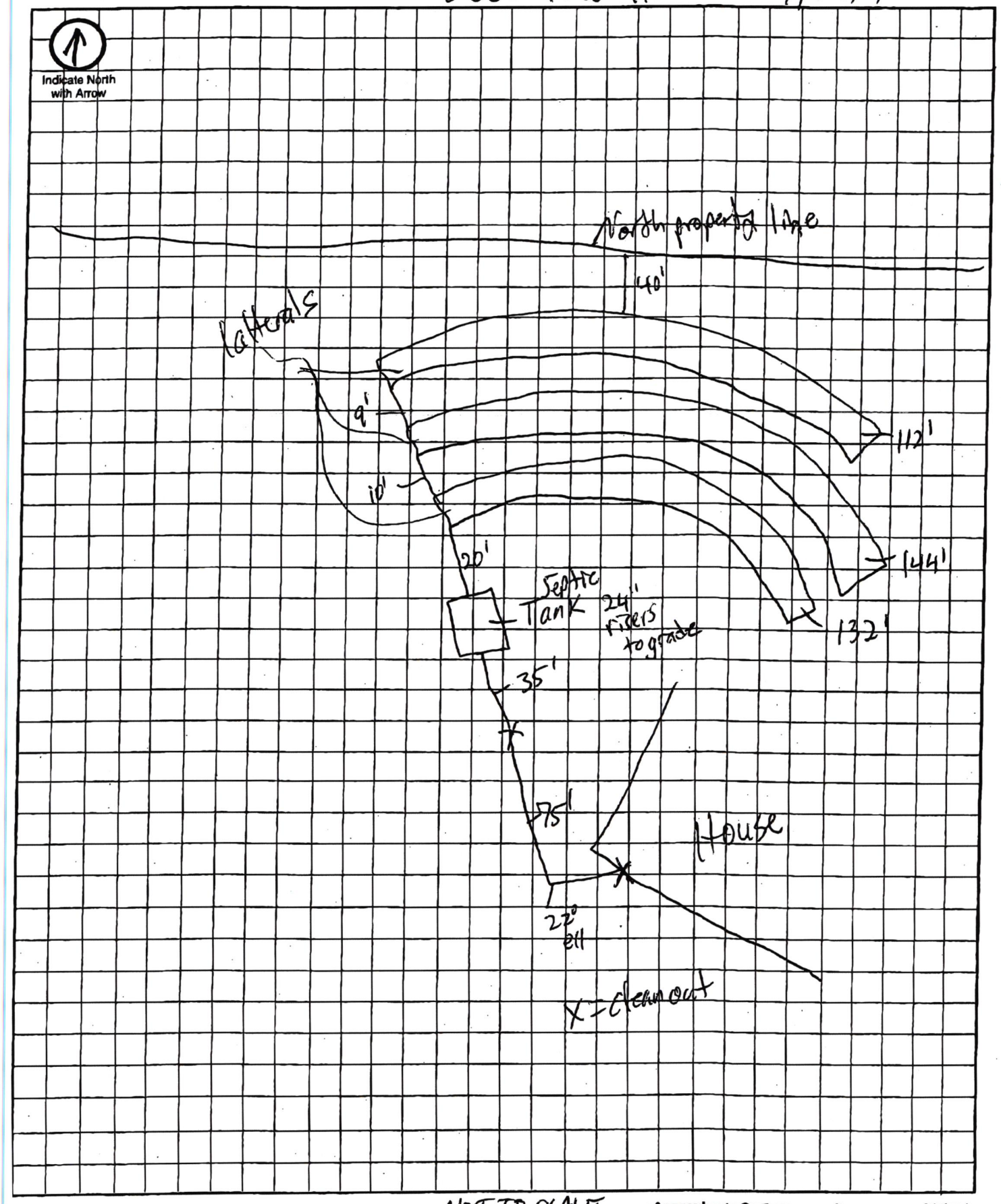
Onsite Wastewater System Design (Example)

te North
Arrow



As Built Drawing

5665 NW 118th 7/24/14



NOT TO SCALE Approximate Scale: ____ ft. = ____ grid line/s

SCANNED

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS000885 Certified Installer: Justin Peterson

Address: 5665 NW 118th

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)	COMMENTS
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)	**Lagoon Dimensions:**
IN	OUT	NA	NO	Class 2	200 ft. (61.0 m)	
IN	OUT	NA	NO	Class 3	100 ft. (30.5 m)	

TANK AND SOIL ABSORPTION SYSTEM SETBACKS

				Item	MIN. SETBACK DISTANCE – FT. (METERS) Tanks	Absorption, Infiltrative & Evaporative Systems	COMMENTS
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)	**Septic Tank Size:** 1750
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)	**Lateral Sq. Footage:**
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)	~ 1,490

Inspected By: Doug Amen **Date:** 7/24/14

SCANNED

ACCURATELY AS POSSIBLE THE RELATIONSHIP OF TRACTS OF LAND BUT IS NOT INTENDED TO BE CONSTRUED AS SURVEY ACCURATE IN ANY MANNER.

SEC. 5 (10-5)

