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

APR 18 2014

A

Permit Number
HS000892

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 20707 NW 84th St (no rural route) City Valparaiso, NE Zip 68065

Legal Description NE 15 12N 5E 19
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 06-15-200-002-000

B. Owner

Name Adolf Bores Life Estate Signature Elaine M. Olson PR

Address 318 CO Rd 29 City/State/Zip Valparaiso, NE 68065

Home Phone 402-784-3816 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Signature Kim L. Johnson for Lloyd

Address 13700 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-6006

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 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 154
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 Date rec'd **ACTION** ☐ Approved ☐ Disapproved
Date frwd Signature
Comments

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 4-18-14 Amount Paid 8354
Received By SB Cash/Check No. 345.00

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

APR 1 8 2014

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

B

Permit Number: HS000892

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 20707 NW 84th St (no rural route) City Valparaiso NE, Zip 68065

Owner Don + Elaine Olson Address 318 Co Rd 29 Valparaiso, NE 68065

Date of Tests 4/16/14 to 4/17/14 Weather: Precipitation 0 Temperature 56°

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		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)
1	24	4/16	1:30p	4/16	5:30p	4/17	4:00p	6	4/17	4:30p	30	2 1/8	14
2	32	"	"	"	"	"	"	6	"	"	"	1 1/2	20
3	20	"	"	"	"	"	"	6	"	"	"	13/16	37
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri Jakoubek
Phone: 402-890-3870
Address 13800 NW 70th St
Raymond, NE 68428

Sum of Percolation Rates: 71
Average of Rates: 24
Rate Used for Calculation: 37 (2 min minimum)

Soil type (NRCS Maps/Other) SCL
Groundwater Depth > 6.7'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

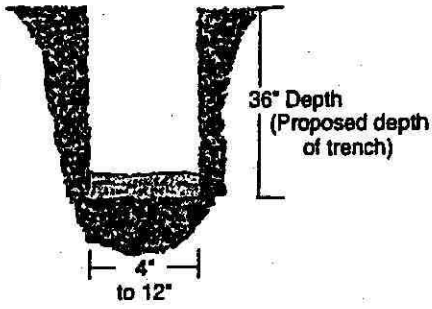
Signature of Reviewing Official _____ Date _____

READ THOROUGHLY

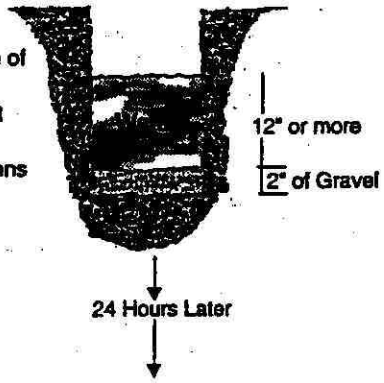
DIAGRAM OF PERCOLATION TEST PROCEDURE

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.

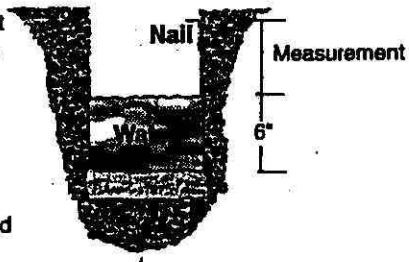


II. Saturation of Soil (Pre-soak)
   - A. Fill hole with 12" or more of water.
   - B. MAINTAIN THIS WATER LEVEL FOR 4 HOURS.
   - C. Record on Form B columns a thru f.



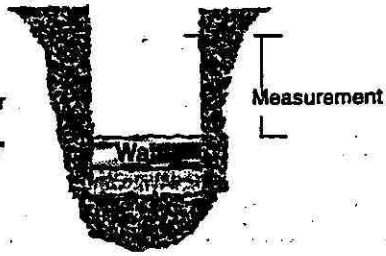
24 Hours Later

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.



½ hour later
(30 minutes)

   - 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.

APR 1 8 2014

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

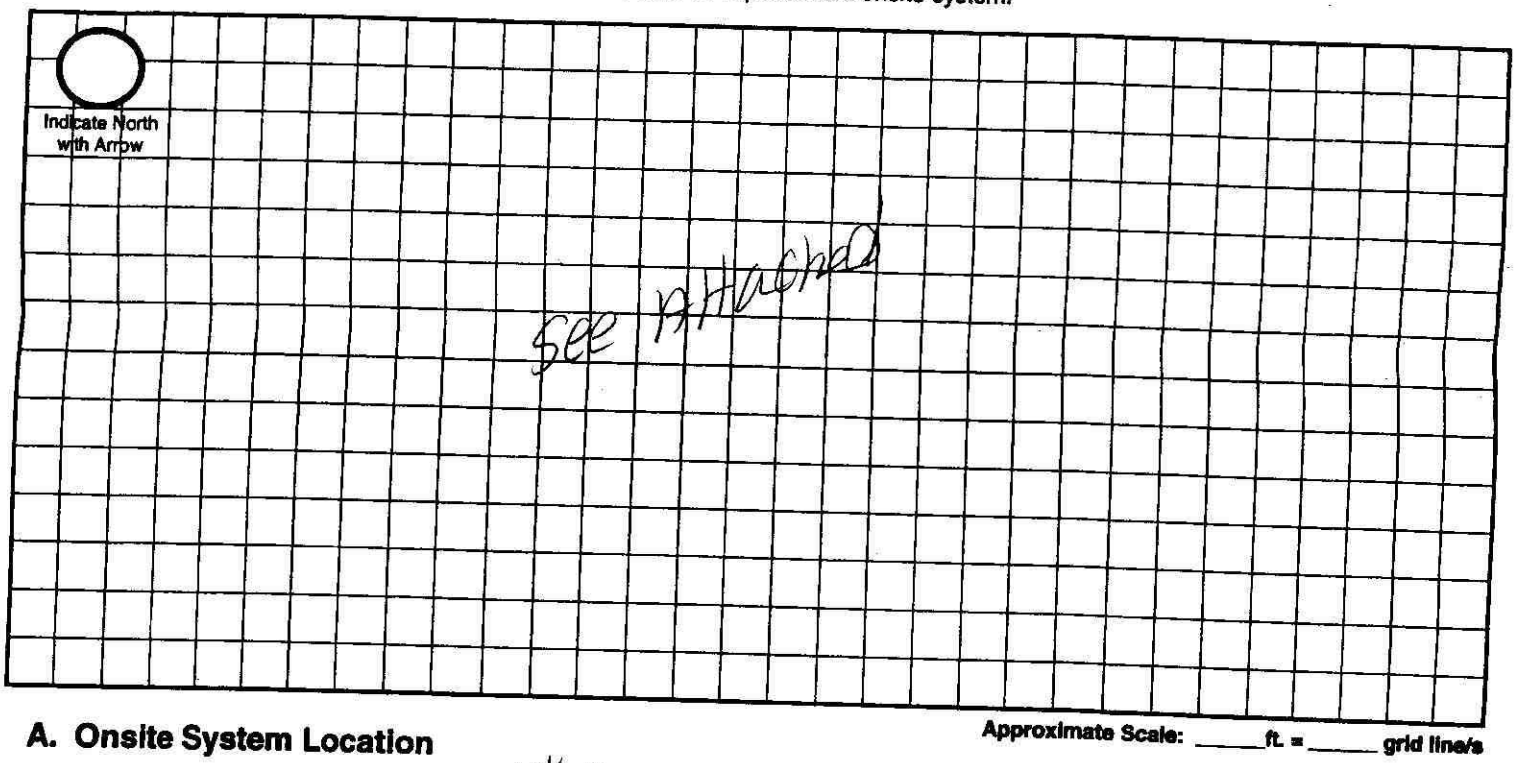
C

Permit Number: HS000892

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) 20707 NW 84th St City Valparaiso NE, Zip 68065

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 (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 37 (min/inch = mpi) No. of Bedrooms 5 Soil Type SC2 Land Slope 2-6 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,375 sq.ft.

Total length of laterals 345 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 4 Width 40" No. of drop boxes 4 Distrubtion Box _____

No. of absorption beds _____ Width _____ No of Distribution lines per bed _____ end caps

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 Date 4-18-14

Installer [signature] Date 4-18-14



N
W E
S

Lancaster County/City of Lincoln GIS Map

Ahsarben SCL

Don & Elaine Olson 402-784-3816 20707 NW 84th St., Valparaiso, NE

Printed: Apr 16, 2014

DISCLAIMER: The information is presented on a best-effort 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@lincolnne.gov and you will be directed to the appropriate department.

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. HS000892

System Type: Standard

Situs: 20707 NW 84 ST, RURAL, NE

Issued: 4/25/2014

Expires: 4/25/2015

Description: S15, T12, R5, 6th Principal Meridian, LOT 19 NE

Owner: BENES, ADOLPH C & JOSEPHINE
LIFE ESTATE
20707 NW 84 ST
VALPARAISO, NE 68065

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

SCANNED

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

APR 18 2014

A

Permit Number
HS000892

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 20707 NW 84th St (no rural route) City Valparaiso, NE Zip 68065

Legal Description NE 15 12N 5E 19
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 016-15-200-002-000

B. Owner

Name Adolf Benes Life Estate Signature Elaine M. Olsson PR

Address 318 CO Rd 29 City/State/Zip Valparaiso, NE 68065

Home Phone 402-784-3816 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Signature Kim L. Johnson for Lloyd

Address 13700 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-6005

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 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 154
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 4/24/14
Date frwd 4/25/14
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 5/7/14

Business Office Use Only
Date Received 4-18-14 Amount Paid 8354
Received By SB Cash/Check No. 345.00

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

Form A Updated: 1/13

HEALTH DEPARTMENT

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. 892 Certified Installer: Lloyd Jelinek

Address: 20707 NW 84th

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

LAGOON SETBACKS

COMMENTS

				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 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

COMMENTS

				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)	3 wells - all good
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: 1500
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: 1400
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)	1250 Reg'd

Inspected By: _____ Date: _____

SCANNED

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

APR 18 2014

A

Permit Number
HS000892

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 20707 NW 84th St (no rural route) City Valparaiso, NE Zip 68065

Legal Description NE 15 12N 5E 19
1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

PID 06-15-200-002-000

B. Owner

Name Adolf Bones Life Estate Signature Elaine M. Olson PR

Address 318 CO Rd 29 City/State/Zip Valparaiso, NE 68065

Home Phone 402-784-3816 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Signature Kim L. Johnson for Lloyd

Address 13700 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-890-6609

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 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 154
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 4/24/14
Date frwd 4/28/14
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 5/7/14

Business Office Use Only
Date Received 4-18-14 Amount Paid 8354
Received By SB Cash/Check No. 345.00

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

Form A Updated: 1/13

SCANNED

APR 18 2014

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

B

Permit Number: HS000892

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 20707 NW 84th St (no rural route) City Valparaiso NE, Zip 68065

Owner Dan + Elaine Olson Address 318 Co Rd 29 Valparaiso, NE 68065

Date of Tests 4/16/14 to 4/17/14 Weather: Precipitation 0 Temperature 56°

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		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)
1	26	4/16	1:30p	4/16	5:30p	4/17	4:00p	6	4/17	4:30p	30	2 1/8	14
2	32	"	"	"	"	"	"	6	"	"	"	1 1/2	20
3	20	"	"	"	"	"	"	6	"	"	"	13/16	37
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri Jakoubek
Phone: 402-890-3870
Address 13800 NW 70th St
Raymond, NE 68428

Soil type (NRCS Maps/Other) SCL
Groundwater Depth > 6.7'

Sum of Percolation Rates: 71
Average of Rates: 24
Rate Used for Calculation: 37 (20 mpi Minimum)

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

APR 1 8 2014

SCANNED

C

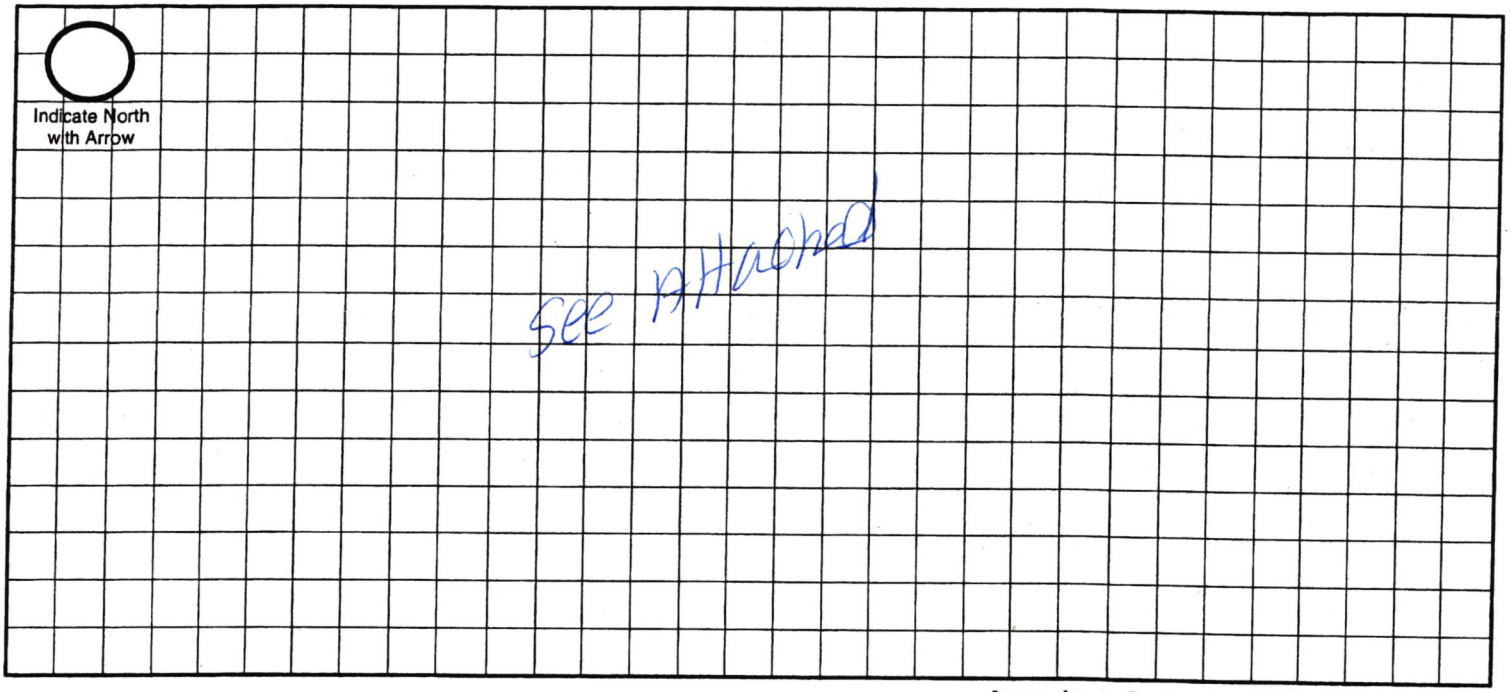
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number: HS000892

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) 20707 NW 84th St City Valparaiso NE, Zip 68065

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 37 (min/inch = mpi) No. of Bedrooms 5 Soil Type SCL Land Slope 2-6 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,375 sq.ft.

Total length of laterals 345 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 4 Width 40" No. of drop boxes 4 (end caps) 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 EXISTING Date 4-18-14

Installer [signature] Date 4-18-14



N
W E
S

Lancaster County/City of Lincoln GIS Map

Aksarben SCL

Don & Elaine Olson 402-784-3816 20707 NW 84th St., Valparaiso, NE

Printed: Apr 16, 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.

MAY 12 2014

D

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

Permit Number: HS060892

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 5/6/2014 Legal Description NE (1/4) 1/4 15 (Section) - 12N (Township) - 5E (Range) Lot 19

Onsite System Location

Address (no rural route) 20707 NW 84th St City Valparaiso NE, Zip 68065

Owner Adolph + Josephine Benes Life Estate Address 318 Co Rd 29, Valparaiso, NE 68065

A. Sewer Pipe

1. Material: old +, New SDR26
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 100+ ft.
4. Number of clean-outs: 2
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: Concrete
   Number of compartments: one
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 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: 18-12 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 4 End cap.
   Number available outlets: 2 per cap
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 7' + 9' + 9' + 9' ft.

D. Drainfield Absorption

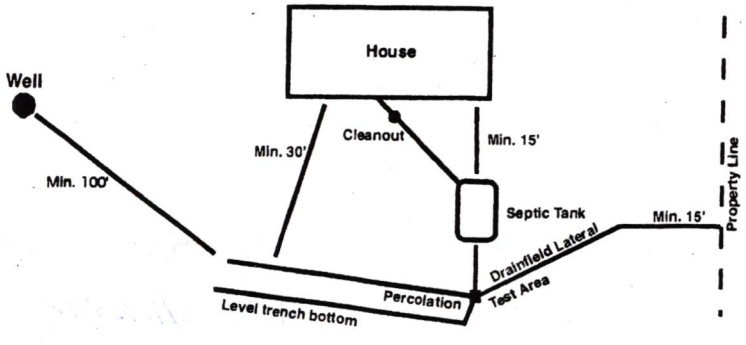
☑ Trench ☐ Bed ☐ Level Bottom

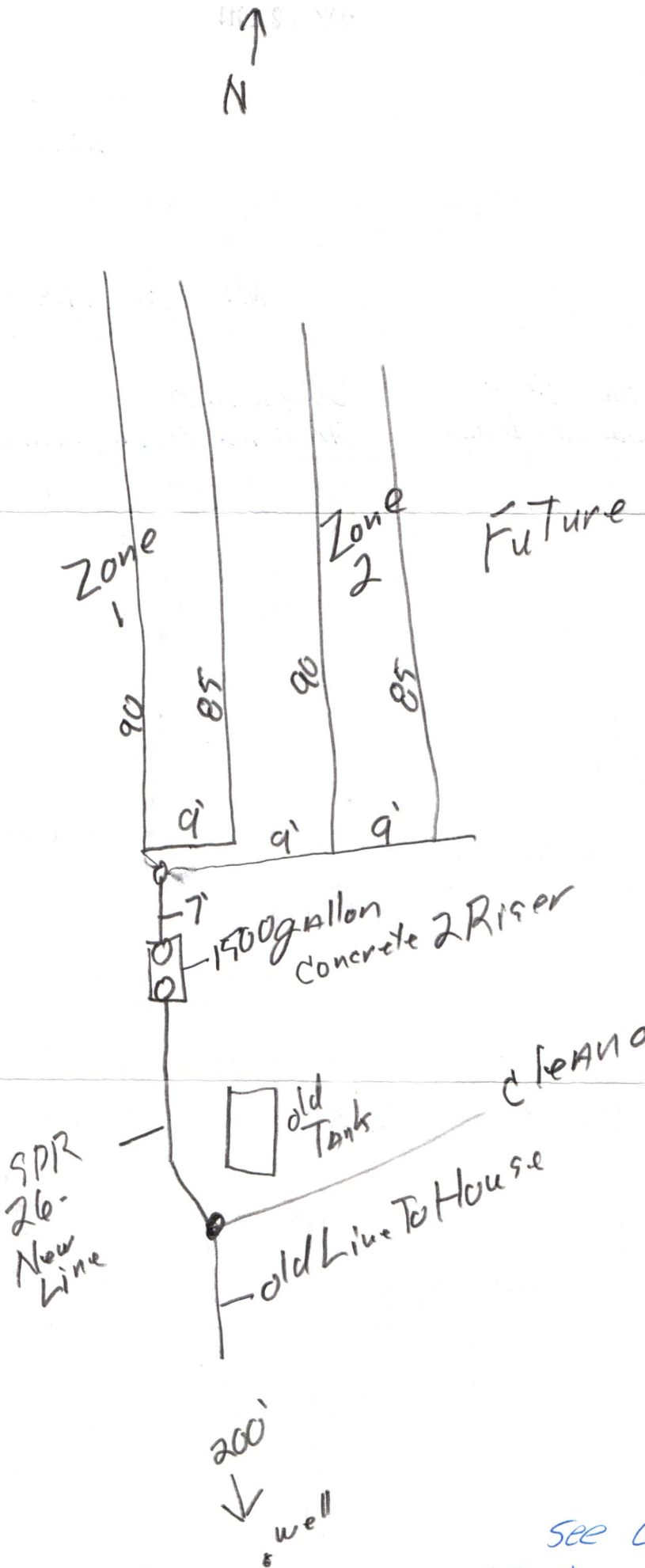
1. Type: ☐ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width: _____
   Number of distribution lines in bed _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number 4
   Length of each line: 90 ft. 85 ft.
   90 ft. 85 ft., _____ ft.
3. Drainfield dimensions: Width 40 ft.
   Distribution Pipe Slope Flat in/100 ft.
   Average depth 28 - 32 in
4. Filter material: Soil
   Depth of material 28-32 in.
5. Distances to: Well or suction line 100 ft.
   Pressure line 100 ft.
   Property line 100 ft.
   House or building 100 ft.
   Lake or Stream 100 ft.

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

Onsite Wastewater System Design (Example)

Indicate North with Arrow





See C sheet for aerial photo showing system in relation to house / bldgs

SCANNED

HEALTH DEPARTMENT

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. 892 Certified Installer: Lloyd Rickerbe

Address: 20707 NW 84th

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

LAGOON SETBACKS

COMMENTS

				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 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

COMMENTS

				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)	3 wells - all good
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: 1500
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: 1400
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)	~~1250~~ Req'd

Inspected By: _____ Date: _____