JUN 10 2014

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

A

Permit Number
HS000913

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 _____ City _____, NE Zip _____
(no rural route)

Legal Description Fox Run 2nd 1 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 22-27-204-001-000 SB

B. Owner

Name Aaron Babcock Signature _____

Address 11401 Vandorn City/State/Zip Walton NE 68461

Home Phone _____ Work Phone _____

C. Certified Installer

Name: Brad Southwick Signature _____

Address _____ City/State/Zip _____

Work Phone _____

D. Engineer

☐ **Check and complete if engineer designed system** P.E. License Number: _____

Designer Name Brad Southwick Firm _____ Work Phone 430 7606

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 2 Whirlpool Bathtub? ☑ Yes ☐ No (tub only) Total Acres 3

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 6/10/14 Amount Paid 345.00
Received By SB Cash/Check No. 22452

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

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. HS000913

System Type: Standard

Situs: FOX RUN 2ND ADDITION, BLK 1, LOT 1, RURAL, NE

Issued: 6/19/2014

Expires: 6/19/2015

Description: FOX RUN 2ND ADDITION, BLOCK 1, Lot 1

Owner: BABCOCK, AARON & JENNIFER
PO BOX 22490
LINCOLN, NE 68542

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

PRIDE HOMES INC
11401 VAN DORN ST
WALTON, NE 68461

SCANNED JUN 10 2014

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

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PLEASE PRINT OR TYPE

A. Onsite System Location

Address 15850 Fox Run (no rural route) City Bennet, NE Zip 68317

Legal Description 27, 9, 8 Fox Run 2nd 1 1

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

PID 22-27-204-001-000 SB

B. Owner

Name Aaron Babcock Signature

Address 11401 Vandorn City/State/Zip Walton NE 68461

Home Phone Work Phone

C. Certified Installer

Name: Brad Southwick Signature

Address 105 Locust City/State/Zip Hickman NE 68372

Work Phone 440-7606

D. Engineer

☐ Check and complete if engineer designed system P.E. License Number:

Designer Name Brad Southwick Firm Work Phone 430 7606

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 2 Whirlpool Bathtub? ☑ Yes ☐ No (tub only) Total Acres 3

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

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1. Health Department
Site visits
Comments
Date rec'd 6/19/14
Date frwd 6/19/14
ACTION ☑ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 6-16-14
Date frwd 6-16-14
ACTION ☑ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 6-16-14
Date frwd 6-16-14
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploeger

Installation Final Written Approval
By Doug Thuss
Date 11/3/14

Business Office Use Only
Date Received 6/10/14 Amount Paid 365.00
Received By SB Cash/Check No. 22452

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

Form A Updated: 1/13

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS000913 Certified Installer: Blaine Johnson

Address: 15850 Fox Run

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 I 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)

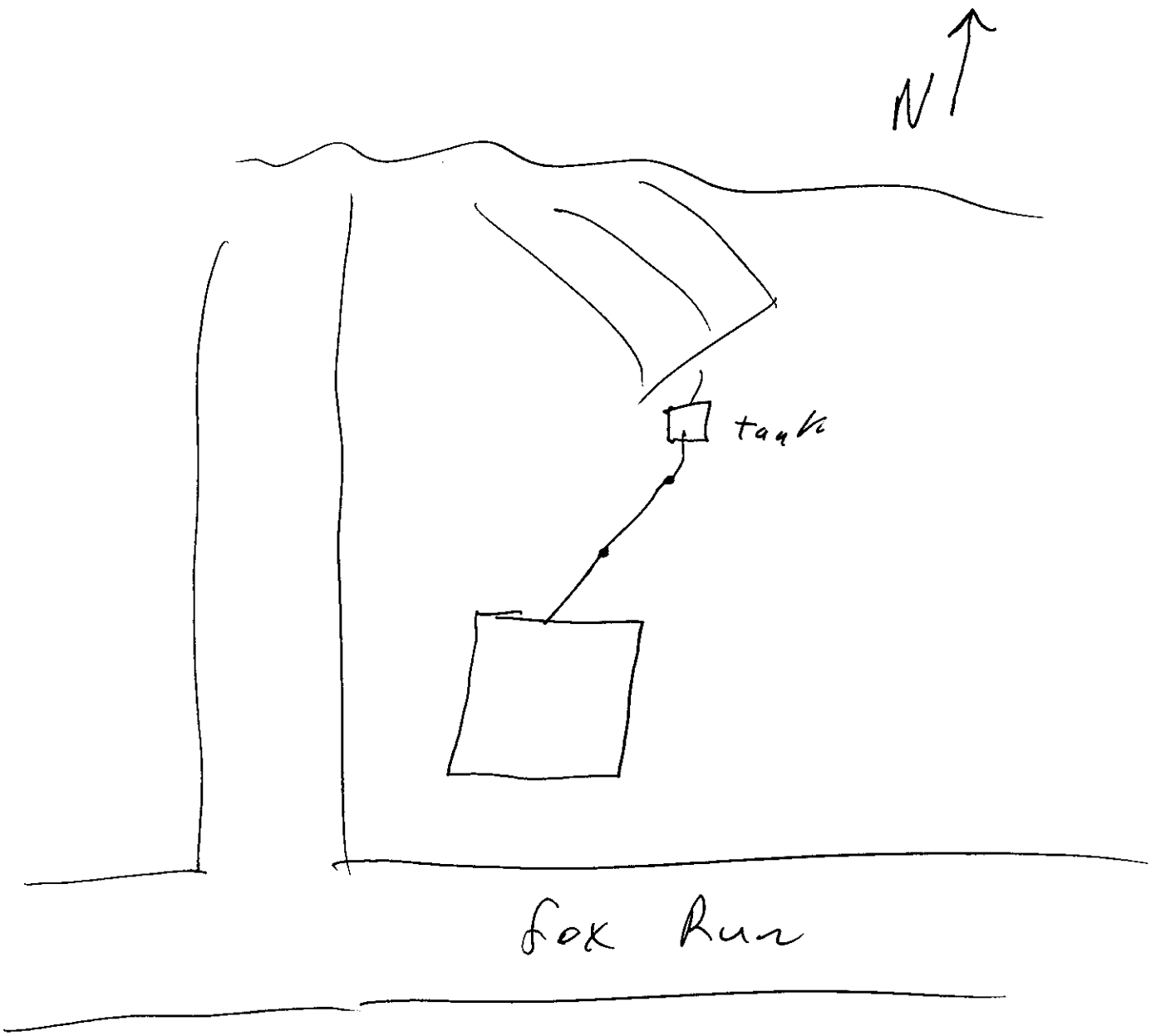
COMMENTS

Blaine Johnson given permission to cover W/O inspection. No one available - NEHA Conference

Septic Tank Size:

Lateral Sq. Footage:

Reviewed by ~~Inspected By:~~ Doug Ahrens Date: 11/3/14


N
tank
Fox Run

SCANNED

JUN 10 2014

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

A

Permit Number
HS000913

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

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(1/4 1/4 Section Township Range Subdivison Addition Block Lot)

PID 22-27-204-001-000 SB

B. Owner

Name Aaron Babcock Signature

Address 11401 Vandorn City/State/Zip Walton NE 68461

Home Phone Work Phone

C. Certified Installer

Name: Brad Southwick Signature

Address 105 Locust City/State/Zip Hickman NE 68372

Work Phone 430-7606

D. Engineer

☐ **Check and complete if engineer designed system** P.E. License Number:

Designer Name Brad Southwick Firm Work Phone 430 7606

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 2 Whirlpool Bathtub? ☑ Yes ☐ No (tub only) Total Acres 3

Garbage Grinder? ☐ Yes ☐ No

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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 6/19/14
Date frwd 6/19/14
ACTION ☑ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 6-16-14
Date frwd 6-16-14
ACTION ☑ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 6-16-14
Date frwd 6-16-14
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploszek

Installation Final Written Approval
By Doug Thurber
Date 11/3/14

Business Office Use Only
Date Received 6/10/14 Amount Paid 365.00
Received By SB Cash/Check No. 22452

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:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

PID 22-27-204-001-000

System Location (Indicate correct number and street)

Address Fox Run 2nd Addition, Blk 1 Lot 1 (no rural route) City Bennet NE, Zip 68317

Owner Karen Fletcher Trust Addresss

Soil Type (SCS): 7681 Wymore Percolation Rate: 45 min./inch

Date of Tests 4/30/14 to 4/30/14 Weather: Precipitation .5 rain Temperature 65

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	30	4/30	9:00	4/30	1:30	4/30	2:00	7 1/2	4/30	2:30	30	3/4	40
2	30	4/30	9:00	4/30	1:30	4/30	2:00	6 5/8	4/30	2:30	30	5/8	48
3	30	4/30	9:00	4/30	1:30	4/30	2:00	7 7/8	4/30	2:30	30	5/8	48
4	30	4/30	9:00	4/30	1:30	4/30	2:00	5 1/2	4/30	2:30	30	5/8	48
5	30	4/30	9:00	4/30	1:30	4/30	2:00	8 1/2	4/30	2:30	30	5/8	48
6	30	4/30	9:00	4/30	1:30	4/30	2:00	9	4/30	2:30	30	7/8	34

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 402-475-2462
Address 105 Locust St
Hickman NE 68372

Sum of Percolation Rates: 266
Average of Rates: 45
Rate Used for Calculation: 49

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

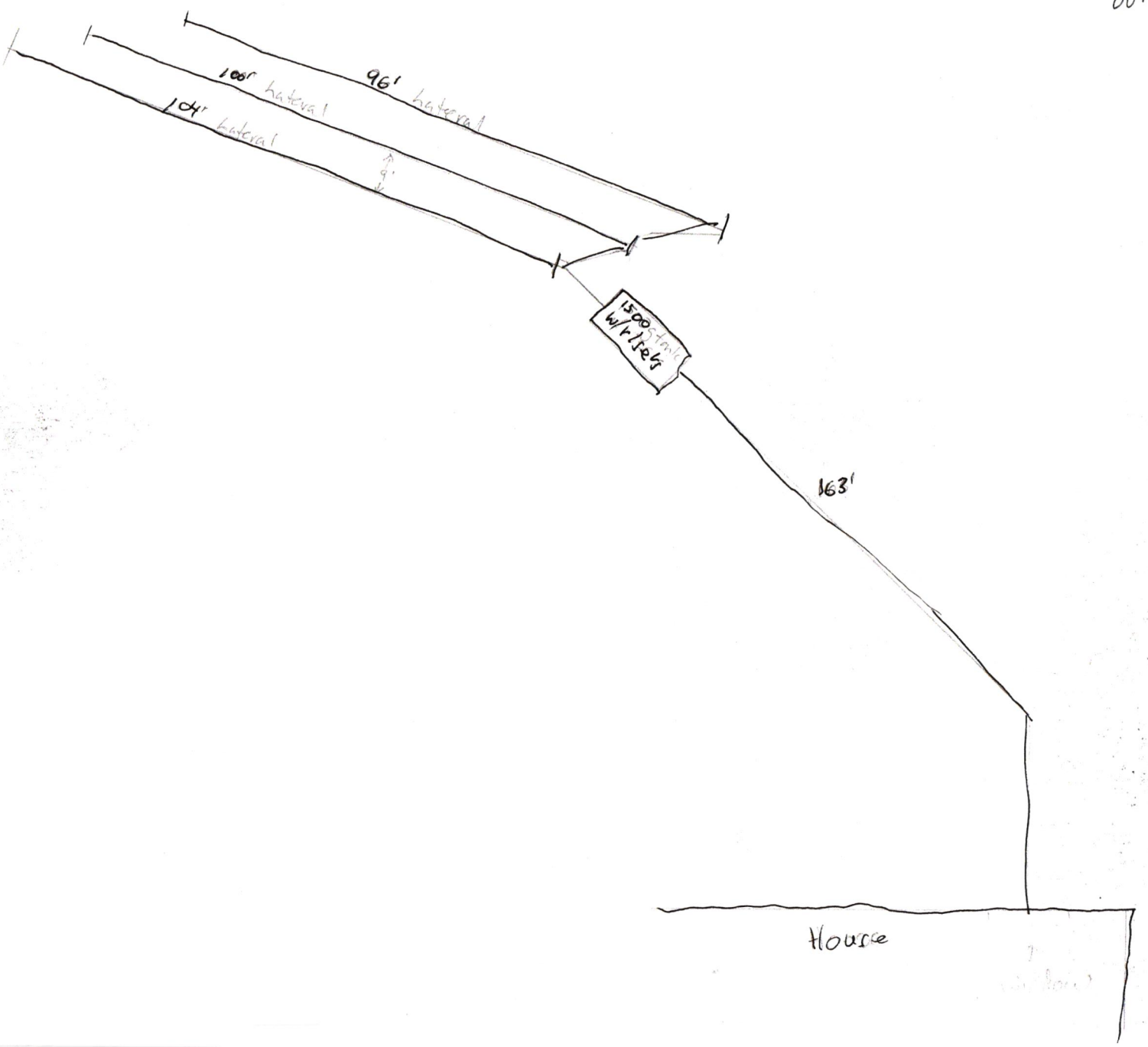
FORM 23-101 10-96

HS000913
9-8-27

158th & Fox Run
Pride Homes

N

15850 Fox Run
PID 2227204
001000



SCANNED

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS000913 Certified Installer: Blaine Johnson

Address: 15850 Fox Run

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

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COMMENTS

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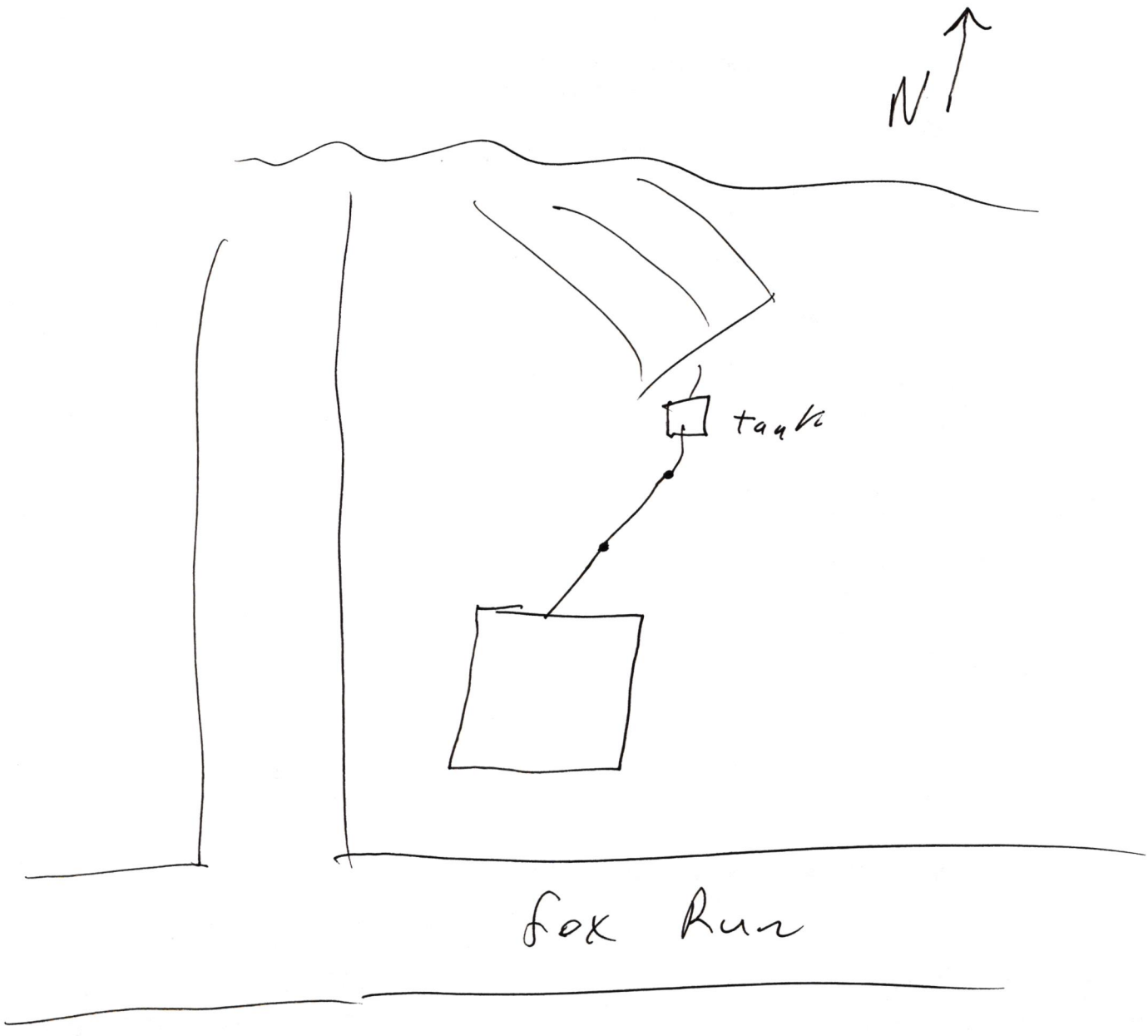
Septic Tank Size:

Lateral Sq. Footage:

Reviewed by Doug Ahrens

~~Inspected By:~~

Date: 11/3/14


N
tank
fox Run