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

JUN 25 2014

A

Permit Number
HS000921

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 5940 W. Pavey Rd (no rural route) City Raymond, NE Zip 68428

Legal Description 24 12 5 6th PM Lot 30 SE & Lot 31 NE

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

PID 06-24-400-004-000

B. Owner

Name Dave Colgan Signature

Address 5940 W. Pavey Rd City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Nathan Peterson / Infinity Ex Signature

Address 7701 Cornhusker Hwy #5 City/State/Zip Lincoln NE 68507

Work Phone 402-202-8130

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 6 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 43.16

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 6/25/14 Amount Paid 365.00
Received By SB Cash/Check No. 4185

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

Form A Updated: 1/13

Attachment C

550 - Drilling
365 gal
1925

Soil Absorption Test Data Report

Owner Information:

Owner Derek Colgan Phone /

Address: 5940 W Daisy Rd Raymond 68428
NAME

Location:

Township 12 Range 5-E Sec. 24 1/4 Sec. ____ 1/4 Sec. ____

County Name Lancaster Area: 80 Acres

Attach a sketch of the property showing the hole location.

Soil Type: (Check one)

Sand ____ Silt ____ Clay ____ Sandy Clay ____ Loamy Sand ____

Silty Clay ____ Silty Clay Loam ____ Sandy Loam ✓ Silt Loam ____

Dates of Test 5/30/17 to 6-1-17 Weather: Precipitation ____ Temp ____

Percolation Test Data

a	b	c	d	e	f	g	h	i	j	k	l	m	n
		Presaturation Period				Percolation Readings						Results	
		Start		End		Start			End		Elapsed	Water	
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Time (min.)	Level Drop (in.)	Percolation Rate (Min./inch)
1	70	5/30	2:PM	6/1	10:30	6/1	AM	15	10:30	14	30	1	30
2	24							10½		14	30	½	60
3	32							20		19	30	1	30
4	30							25½		25	30	½	60
5	32							22		21	30	1	30
6	32							14½		13½	30	1	30

Scott Jahde
Signature of Person Conducting Test

Address: 1612 C Rd
Mead NE 68041

Phone: 402-443-6549

Sum of Percolation Rates = 210

*Average of Rates in Minutes per Inch = 35

* If rates vary more than 20 minutes/inch, do not average but use the slowest rate for design purposes.

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. HS000921

System Type: Standard

Situs: 5940 W. DAVEY RD., RURAL, NE

Issued: 6/30/2014

Expires: 6/30/2015

Description: S24, T12, R5, 6th Principal Meridian, LOT 30 SE & LOT 31 NE

Owner: COLGAN, DAVID J
5940 W DAVEY RD
RAYMOND, NE 68428

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

INFINITY EXCAVATING LLC
7701 CORNHUSKER HWY., STE 5
LINCOLN, NE 68507

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

SCANNED
JUN 25 2014

A

Permit Number
HS000921

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 5940 W. Davey Rd (no rural route) City Raymond, NE Zip 68428

Legal Description 24 12 5 6th PM Lot 30 SE & Lot 31 NE

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

PID 06-24-400-004-000

B. Owner

Name Dave Colgan Signature

Address 5940 W. Davey Rd City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Nathan Peterson / Infinity Ex Signature

Address 7701 Cornhusker Hwy #5 City/State/Zip Lincoln NE 68507

Work Phone 402-202-8130

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 6 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 43.16
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 2,000 gallon
Site visits 3/19/15 Tank code .05
Comments
Date rec'd 6/30/14
Date frwd 6/30/14
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments System can't be in Floodplain
Date rec'd 6-27-14
Date frwd 6-27-14
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 6-27-2014
Date frwd 6-27-2014
ACTION ☒ Approved ☐ Disapproved
Signature Jim Blaugh

Installation Final Written Approval
By
Date 3/23/15

Business Office Use Only
Date Received 4/25/14 Amount Paid 365.00
Received By SB Cash/Check No. 4185

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS 000 926 Certified Installer: Subbert

Address: _____

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

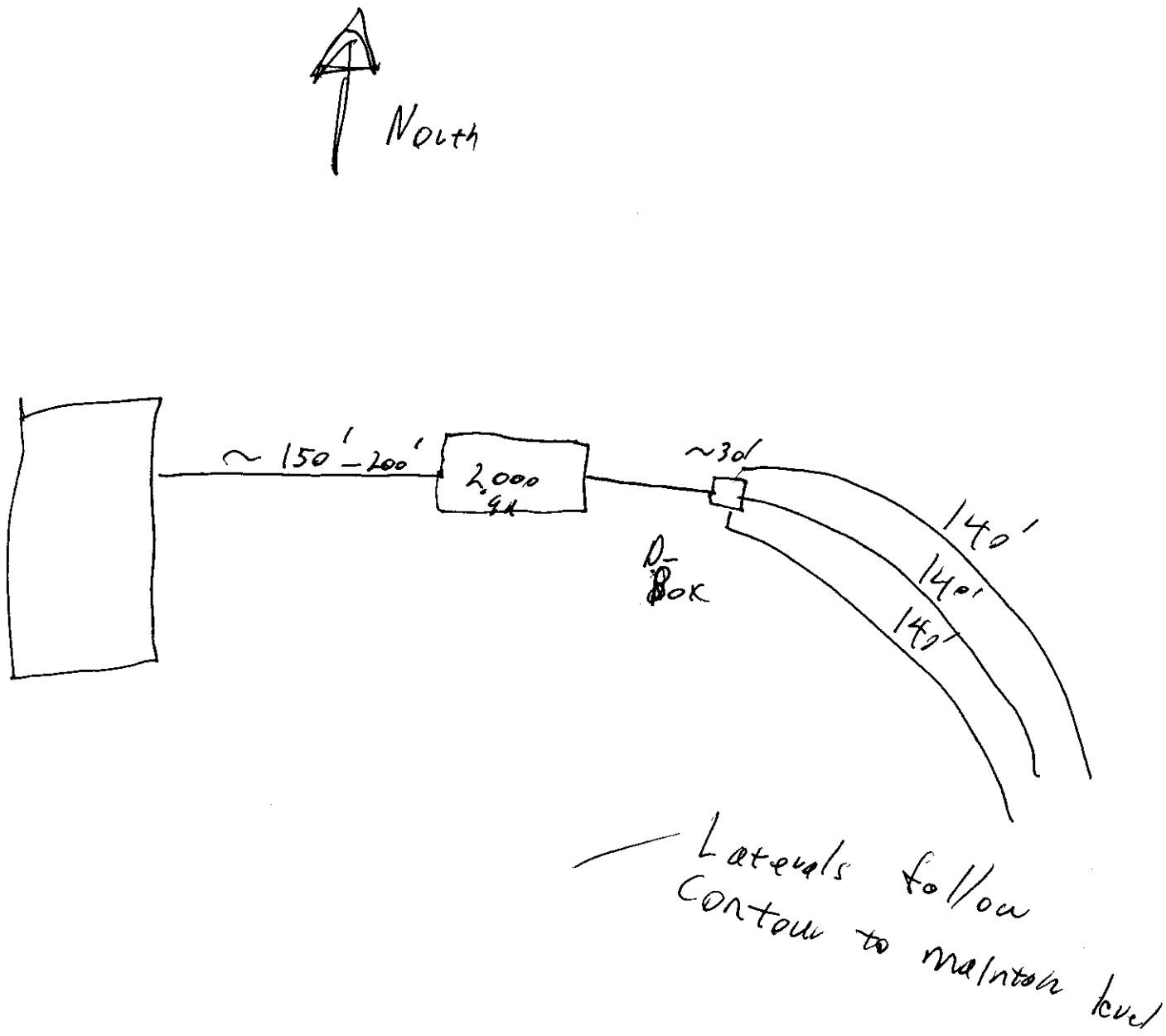
LAGOON SETBACKS

				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 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:** 2,000
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:** 1,680
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)	

Inspected By: Doug Arnold **Date:** 3/20/15


North
~ 150' - 200'
2,000 gal
~30'
D-Box
140'
140'
140'
Laterals follow contour to maintain level

SCANNED

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

JUN 25 2014

A

Permit Number
HS000921

Onsite Wastewater Treatment System Request for Site Clearance and Permit

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

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1/4	1/4	Section	Township	Range	Subdivison	Addition	Block	Lot
		24	12	5	6th PM			Lot 30 SE & Lot 31 NE

PID 06-24-400-004-000

B. Owner

Name Dave Colgan Signature

Address 5940 W. Pavey Rd City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Nathan Peterson / Infinity Exc. Signature

Address 7701 Cornhusker Hwy #5 City/State/Zip Lincoln NE 68507

Work Phone 402-202-8130

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 6 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 43.16

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 2,000 gallon

Site visits 3/19/15 Tank only .05

Comments

Date rec'd 6/30/14

Date frwd 6/30/14

ACTION ☒ Approved ☐ Disapproved

Signature

2. Supt. Bldg. Insp. or Village Clerk

Comments System can't be in Floodplain

Date rec'd 6-27-14

Date frwd 6-27-14

ACTION ☒ Approved ☐ Disapproved

Signature

3. City or County Engineer

Comments

Date rec'd 6-27-2014

Date frwd 6-27-2014

ACTION ☒ Approved ☐ Disapproved

Signature Jim Ploszek

Installation Final Written Approval

By

Date 3/23/15

Business Office Use Only

Date Received 4/25/14 Amount Paid 365.00

Received By SB Cash/Check No. 4185

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

Form A Updated: 1/13

SCANNED

Attachment C

580 - Drilling
385 gpd
1925

Soil Absorption Test Data Report

Owner Information:

Owner Darrel Colgan Phone /

Address: NAME 5940 W Davis Rd Raymond 68428

Location:

Township 12 Range 5-E Sec. 24 1/4 Sec. ____ 1/4 Sec. ____

County Name Lancaster Area: 80 Acres

Attach a sketch of the property showing the hole location.

Soil Type: (Check one)

Sand ____ Silt ____ Clay ____ Sandy Clay ____ Loamy Sand ____

Silty Clay ____ Silty Clay Loam ____ Sandy Loam ✓ Silt Loam ____

Dates of Test 5/30/17 to 6-1-14 Weather: Precipitation ____ Temp ____

Percolation Test Data

a	b	c	d	e	f	g	h	i	j	k	l	m	n
		Presaturation Period				Percolation Readings					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (min.)	Water Level Drop (in.)	Percolation Rate (Min./Inch)
1	30	5/30	2:PM	6/1	9:00	6/1	9:00	15	10:30	14	30	1	30
2	24							14½		14	30	¾	40
3	32							20		19	30	1	30
4	30							25½		25	30	¾	40
5	32							22		21	30	1	30
6	32							14½		13½	30	1	30

Scott Sadler
Signature of Person Conducting Test

Address: 1012 C Rd
Mead Ne 68041

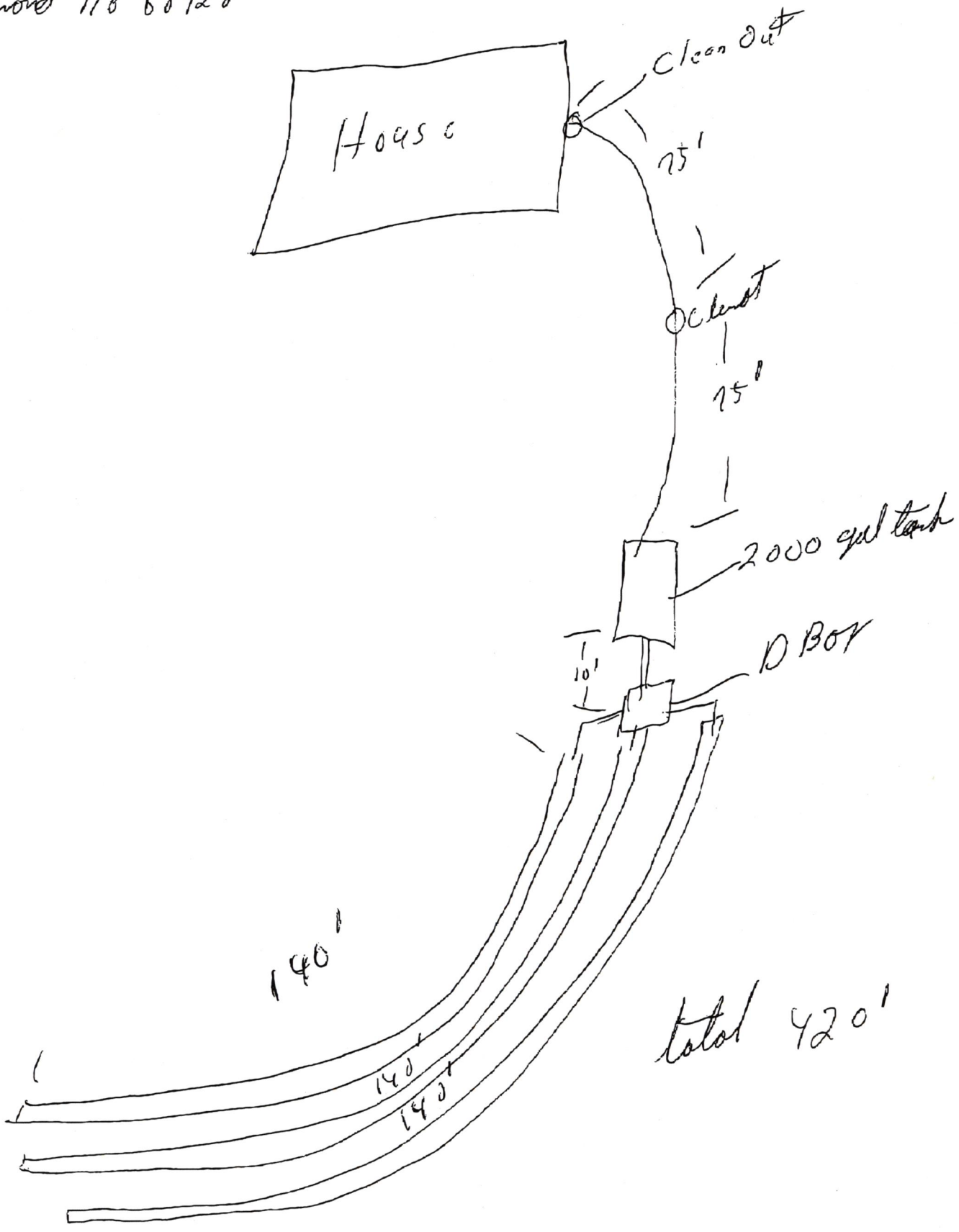
Phone: 402-443-6549

Sum of Percolation Rates = 240

*Average of Rates in Minutes per Inch = 34

* If rates vary more than 20 minutes/inch, do not average but use the slowest rate for design purposes.

David Colgan
5440 W Davey Road
Raymond Ne 68428



SCANNED

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
LAGOON/SEPTIC INSPECTION REPORT

Permit No. HS 000 921 Certified Installer: Subbert

Address: _____

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

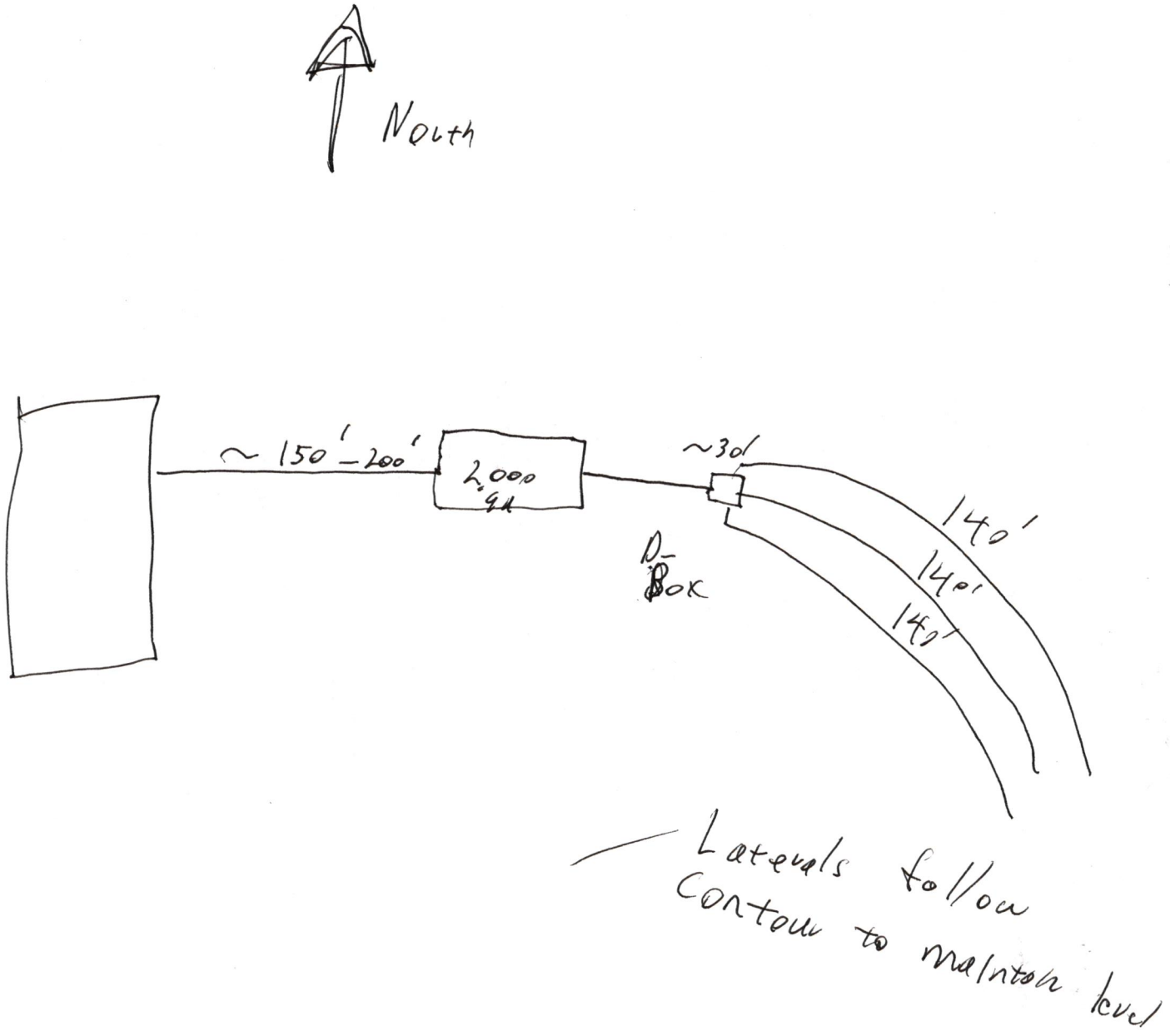
LAGOON SETBACKS

				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)	
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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)	
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TANK AND SOIL ABSORPTION SYSTEM SETBACKS

				Item	MIN. SETBACK DISTANCE – FT. (METERS)		COMMENTS
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IN	OUT	NA	NO	Except Neighbor's Foundation:			
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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:** 1,680
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)	

Inspected By: Doug Arnold **Date:** 3/20/15


North
~ 150' - 200'
2,000 gal
~30'
D-Box
140'
140'
140'
Laterals follow
Contour to maintain level