Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8843

A

Permit Number
HSOO1014

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 17300 S. 35th Place (no rural route) City Roca, NE Zip 68430

Legal Description: Ponderosa Crossing 1 4

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

PID 15 19 40 100 4000

B. Owner

Name S.N.B. Construction Signature By Handler - Asst. Op. Mng.

Address 3800 N. Cheney Rd. Ste. A City/State/Zip Lincoln, NE 68516

Home Phone NA Work Phone 402-420-2950

C. Certified Installer

Name: Ernst Well Drilling Inc. Signature

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

Work Phone 402-761-2281

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

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 24.36 ☐ County Resolution No. 02-30

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 1-6-15 Amount Paid 375.00
Received By C Cash/Check No. #13022

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

Form A Updated: 1/13

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

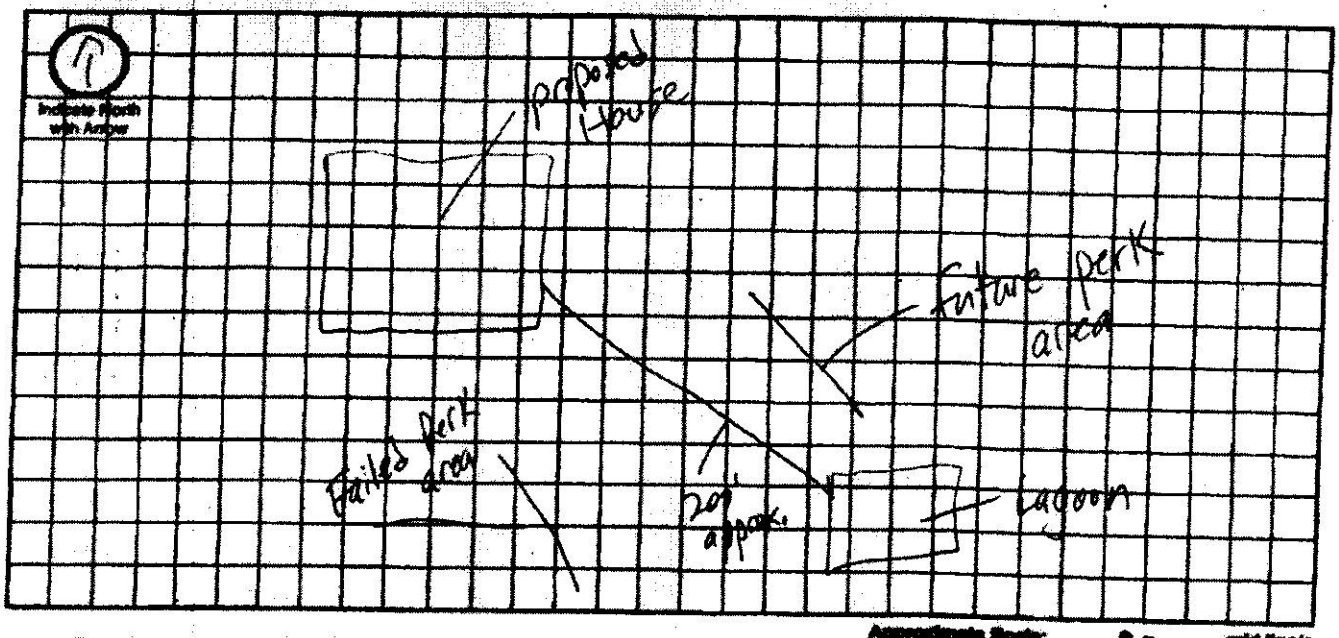
C

Permit Number: HS001014

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 lines

A. Onsite System Location

Address (no rural route) 17300 S. 35th Place City _____ NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap. 1750 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 — worst case scenario

D. Drainfield Absorption System

Percolation Rate _____ (min/inch = mpi) No. of Bedrooms 4 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 _____ Distribution 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	Ground 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 ☐	NA ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor S.W.B. Construction Date 12/31/14

Installer _____ Date 12/31/14

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. HS001014

System Type: Lagoon

Situs: No Site Address Specified

Issued: 1/8/2015

Expires: 1/8/2016

Description: PONDEROCA CROSSING, BLOCK 1, Lot 4

Owner: PONDEROCA CROSSING LLC
ATTN: MONTE FROEHLICH 129 N 10 ST
LINCOLN, NE 68508

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

SNB CONSTRUCTION LLC
3800 OLD CHENEY RD STE A
LINCOLN, NE 68516

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8843

SCANNED

A

Permit Number
HSOO1014

Onsite Wastewater Treatment System
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1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot

PID 15194000104000

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Name S.N.B. Construction Signature [signature] - Asst. Op. Mng.

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Home Phone NA Work Phone 402-420-2950

C. Certified Installer

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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 1/8/15
Date fwd 1/8/15
ACTION ☒ Approved ☐ Disapproved
Signature [signature]

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 1-7-15
Date fwd 1-7-15
ACTION ☒ Approved ☐ Disapproved
Signature [signature]

3. City or County Engineer
Comments
Date rec'd 1-7-15
Date fwd 1-7-16
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploughe

Installation Final Written Approval
By [signature]
Date 6/30/15

Business Office Use Only
Date Received 1-6-15 Amount Paid 375.00
Received By TC Cash/Check No. #13022

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

Form A Updated: 1/15