APR 06 2015

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

A

Permit Number
HS001050

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 14181 NW 126th St. 68

Address Not Yet available (no rural route) City Malcolm, NE Zip 68402

Legal Description NE & SE 6 11N 5E 9
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 05-06-200-007-000

B. Owner

Name William L & Stephanie R Kuhn Signature

Address 2633 NW 55th St City/State/Zip Lincoln, NE 68524

Home Phone 402-770-9358 (Bill) Work Phone 402-310-7907 (Steph)

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd L. Jakoubek for Lloyd

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone

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 25
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
Date frwd
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

Business Office Use Only
Date Received 4-7-15 Amount Paid $375.00
Received By SB Cash/Check No. CK. 8613

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

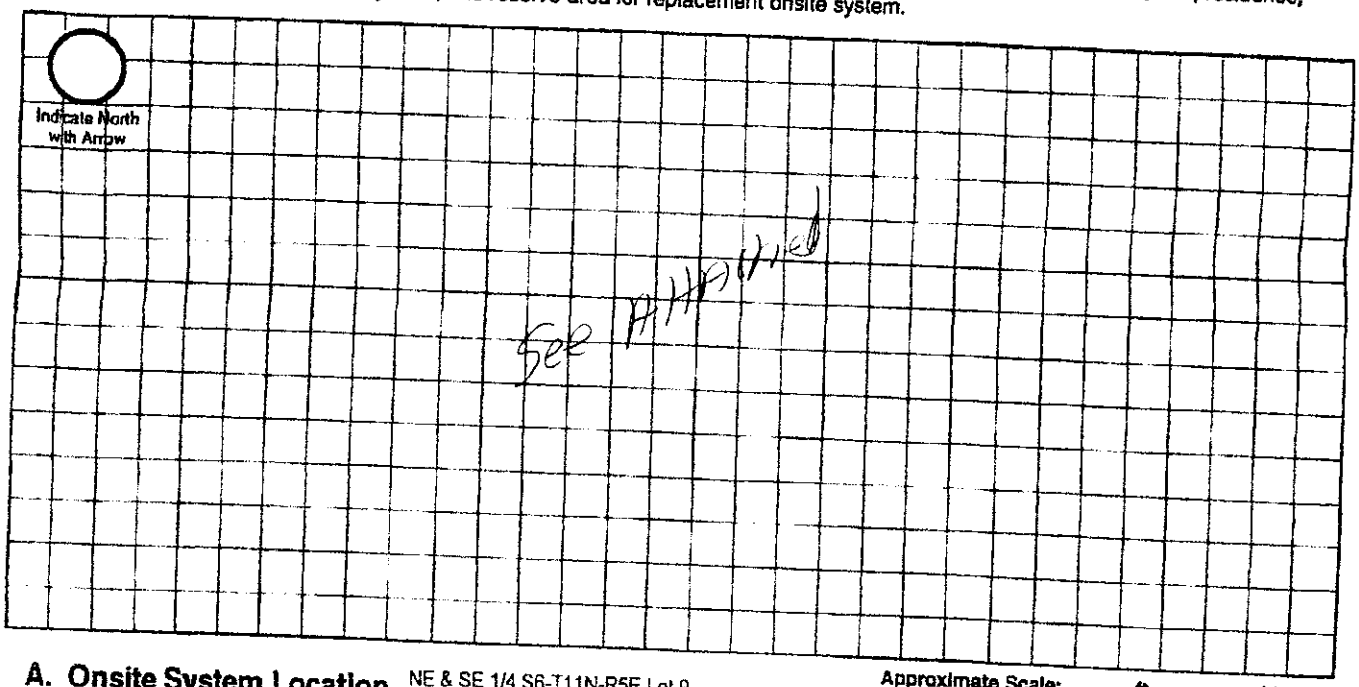
C

Permit Number: HS001050

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.



A. Onsite System Location NE & SE 1/4 S6-T11N-R5E Lot 9 Approximate Scale: _____ ft. = _____ grid line/s

Address (no rural route) Not yet available City Malcolm NE, Zip 68402

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 (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 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

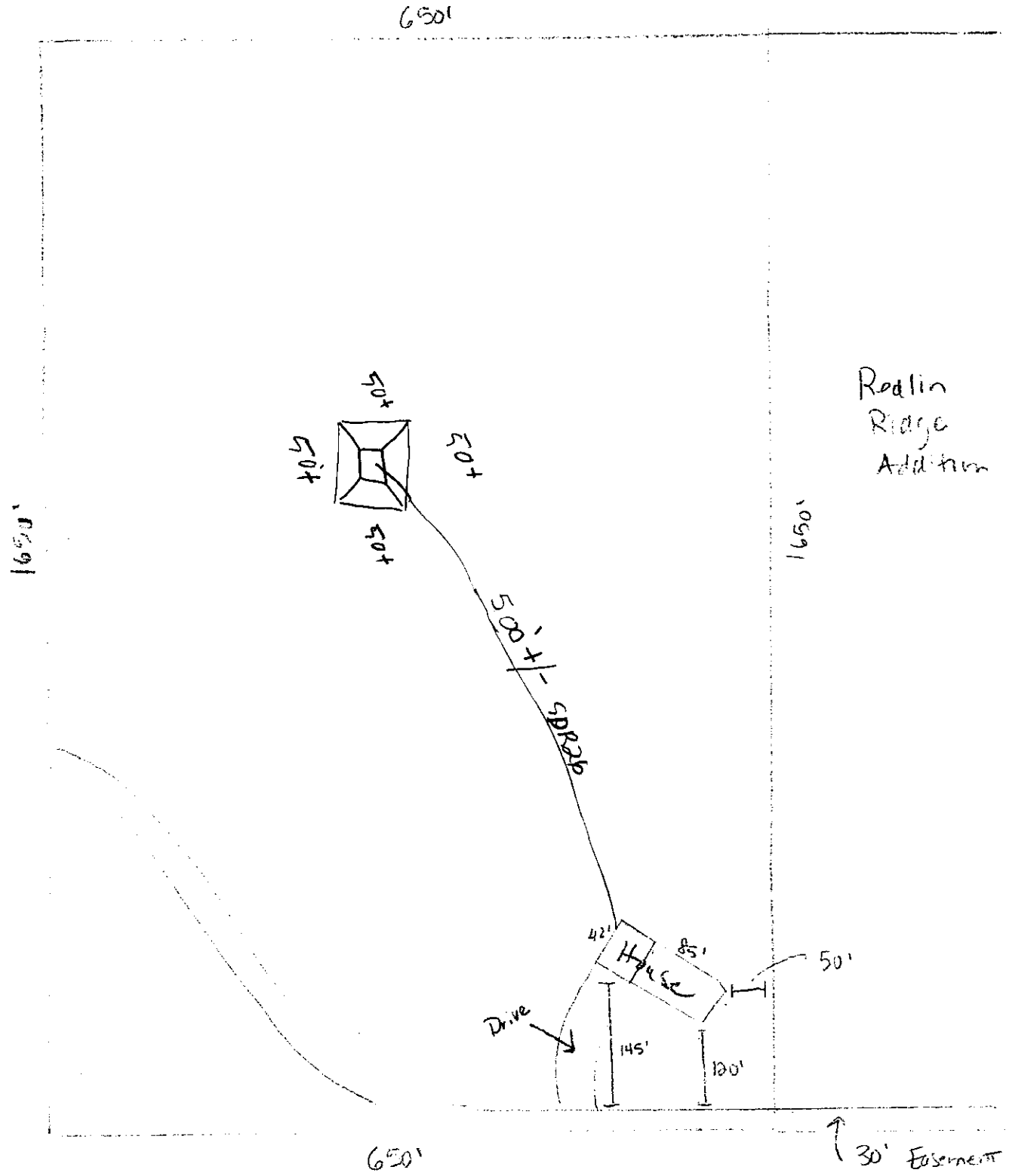
Home Building Contractor Maria A Smaal Date 4-2-15

Installer Mark L. Johnson Date 4/2/15

S6, T11, R5, 6th Principal Meridian, lot 9 E½

William & Stephanie Kuhn - Owners

Address: TBD



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. HS001050

System Type: Lagoon

Situs: No Site Address Specified

Issued: 4/23/2015

Expires: 4/23/2016

Description: S6, T11, R5, 6th Principal Meridian, LOT 9 E1/2

Owner: KUHN, WILLIAM L & STEPHANIE R
2633 NW 55 ST
LINCOLN, NE 68524

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

11-5-6

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

D Exhibit 4

Permit Number: HS001050

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☒ Lagoon (Skip to Back Page) ☐ Subsurface Septic ☐ Mound

Onsite Wastewater System Location

Address or Legal Description or Parcel Identification Number (PID) 14181 NW 126th St. Malcolm, NE 68402

Owner: William L. Kuhn Address 2033 NW 55th St. Lincoln, NE 68524

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and ~~septic tank~~ LAGOON: 500 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

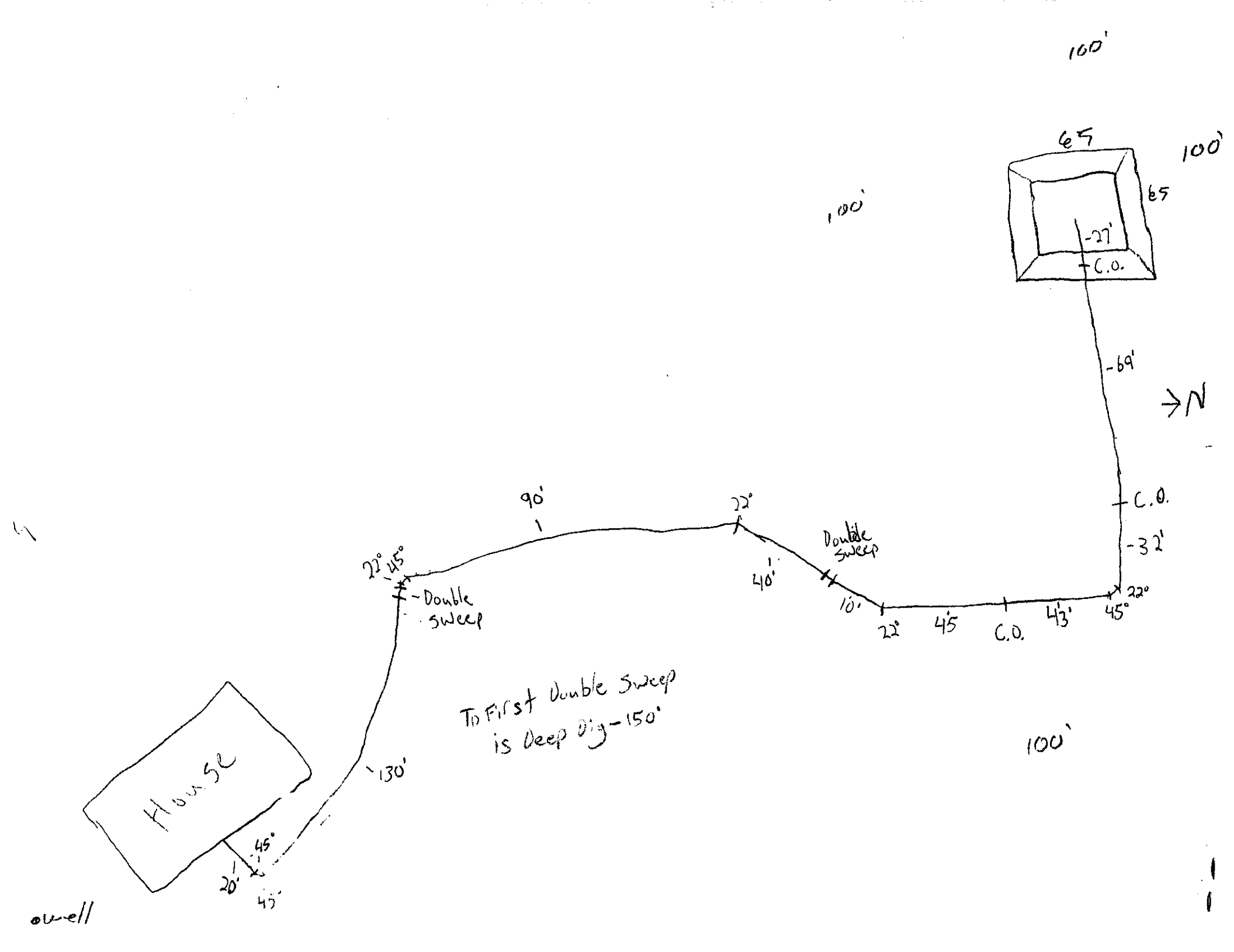
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No (partially)

If Yes, the Certified Professional must sign below for final approval:

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: Kevin L. Jakowski Date: 11/4/2015

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


100'
65
100'
65
100'
-27'
C.O.
-69'
N
C.O.
-32'
22°
90'
22°
22° 45°
Double sweep
40'
Double sweep
10'
22°
45
C.O.
43'
45°
House
130'
45°
20'
45°
To First Double Sweep is Deep Dig - 150'
100'
owell

Lincoln-Lancaster County Health Department
Environmental Public Health Division
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ok JC 6/13/16

Exhibit 6

Permit Number: H 5001050

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 11/13/15 Legal Description ¼ ¼ 6/11/5 Lot 9 Section/Township/Range

Onsite System Location

Address (no rural route) 1418 NW 126th City _____

Owner _____ Address _____

Mark One: ☒ ~~Dwelling~~ ☐ Non-dwelling

☐ ~~New~~ System ☐ Repair

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): _____

Lagoon constructed so not to receive surface water	Yes ☒ No ☐
Lagoon floor is level	Yes ☒ No ☐
Lagoon is equipped with a depth gage/concrete slab	Yes ☒ No ☐
Influent line is at least 4 inches and slopes no less than 1/8 inch	
Clean outs located every 75 feet and one located 1 foot about highest water level	Yes ☒ No ☐
Inside slope not steeper than three horizontal to one vertical	Yes ☒ No ☐
Minimum width of the top of the dike shall be 4 feet	Yes ☒ No ☐
Fence installed	Yes ☐ No ☐

Top of the Dike 60' Bottom of Lagoon 20' Design Flow 4 600

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Surface Water distance from Water Mark	Private Drinking Water Wells	Public Drinking Water Supply Wells		All Other Water Wells	Property Lines	Trees and Brush	Neighbor's Foundation		All Other Setbacks
50 ft ☒	100 ft ☐	Non-Community	100ft ☐	100ft ☒	50ft ☒	50ft ☐	Class 1	200ft ☒	☐
		Community	* ☐				Class 2	200ft ☐	
							Class 3	100ft ☒	

*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: NA

Dike North side

Comments:

Inspections prior to Final Approval
Initial DC Date 11/16/15
Follow-Up _____ Date Needs fence
Follow-Up 6/7/16 Date OK
Installation Final Written Approval
By _____
Date 6/7/16

Nate C. Hartman

From: Gordon McGill
Sent: Thursday, April 23, 2015 10:37 AM
To: Nate C. Hartman
Subject: RE: Bill Kuhn...
Attachments: Gordon McGill.vcf

alright .....it is ok to build on this lot 9 e1/2 s6-t11-r5

Gordon McGill
Building &Safety
Plans Examiner II / Building Inspector

402-441-6424 (o)
gmcgill@lincoln.ne.gov

From: Nate C. Hartman
Sent: Thursday, April 23, 2015 10:35 AM
To: Gordon McGill
Subject: Bill Kuhn...

Status???

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
Water Quality Section
Lincoln-Lancaster County Health Department
(402) 441-8643 Fax (402) 441-3890

Nate C. Hartman

From: Ken D. Schroeder
Sent: Tuesday, April 07, 2015 3:25 PM
To: Nate C. Hartman
Cc: Pamela L. Dingman
Subject: sewage disposal system for PID #05 06 200 007 000
Attachments: part of sec 6-11-5.pdf

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for Lot 9 irregular tracts located in the E 1/2 of Section 6, T11N, R5E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec.6-11-5)*
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