Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8040

A

Permit Number
HS001055

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C.
Submit correct fee
with this Application

If 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 18175 SW 66th St (no rural route) City Crete NE Zip 68333

Legal Description NE 1/4 SW 1/4 25 Section 8N Township 5E Range Wendelin Estates Subdivision 1st Addition 2 Block 1 Lot

PID 02-25-302-001-000

B. Owner

Name Cory Wittstruck & Stacy Reynolds 402-304-2258 402-540-8952

Address 4111 Browning St Signature Cory Wittstruck Stacy Reynolds

Home Phone City/State/Zip Lincoln, NE 68516

Work Phone

C. Certified Installer

Name Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd Jakoubek for Lloyd

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

Work Phone 402-890-6009

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 Additional Bedrooms? ☐ Yes ☒ No Total Acres 5.35

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. 02-9

1. Health Department

Site visit's Date mailed Date filed ACTION ☐ Approved ☐ Disapproved

Comments Signature

2. Supt. Bldg. Insp. or Village Clerk

Comments Date mailed Date filed ACTION ☐ Approved ☐ Disapproved Signature

3. City or County Engineer

Comments Date mailed Date filed ACTION ☐ Approved ☐ Disapproved Signature

Installation Final Written Approval By Date

Business Office Use Only
Date Received 4-21-15 Amount Paid 8625
Received By SB Cash/Check No. 205 375.00

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

B

Permit Number: 1+5001055

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 18175 SW 66th St (no rural route) City Crete NE, Zip 68333

Owner Cory Wittstruck & Stacy Reynolds Address 4111 Browning St, Lincoln, NE 68516

Date of Tests 4/14/2015 to 4/15/2015 Weather: Precipitation 0 Temperature 68

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	Water Level Drop I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Last 30 mins of 4 hr or last 10 mins of 1 hr					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	28	4/14	2:00pm	4/15	6:00pm	4/15	4:00pm	6	4/15	4:30pm	30	1/8	240
2	24	"	"	"	"	"	"	6	"	"	"	1/16	480
3	34	"	"	"	"	"	"	6	"	"	"	0	—
4	20	"	"	"	"	"	"	6	"	"	"	0	—
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.

Phone: 402-783-2663 or 402-890-6009

Address 13800 NW 70th St

Raymond, NE 68428 Cert #1198

Soil type (NRCS Maps/Other) Pawnee Clay Loam

Groundwater Depth 41

Sum of Percolation Rates: 720

Average of Rates: 360

Rate Used for Calculation: Failed

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

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

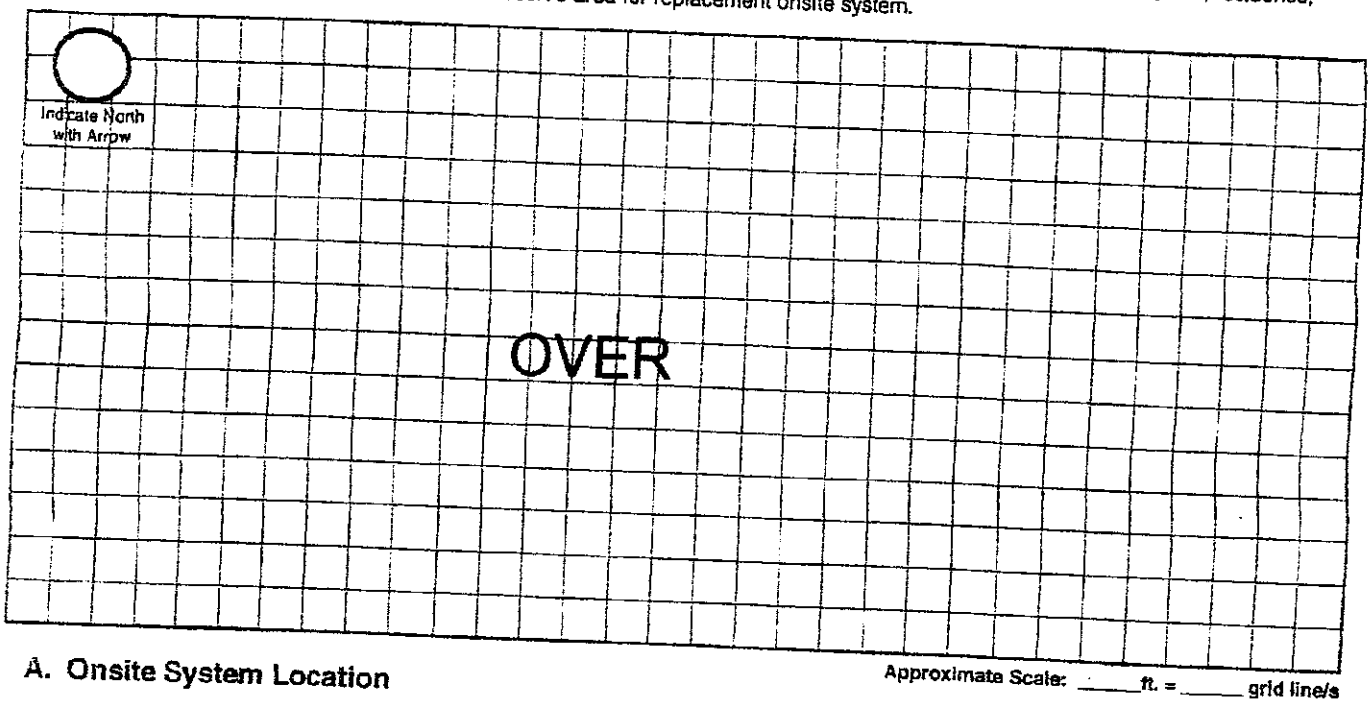
C

Permit Number: HS001055

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) 18175 SW 66th St City Crete NE, Zip 68333

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

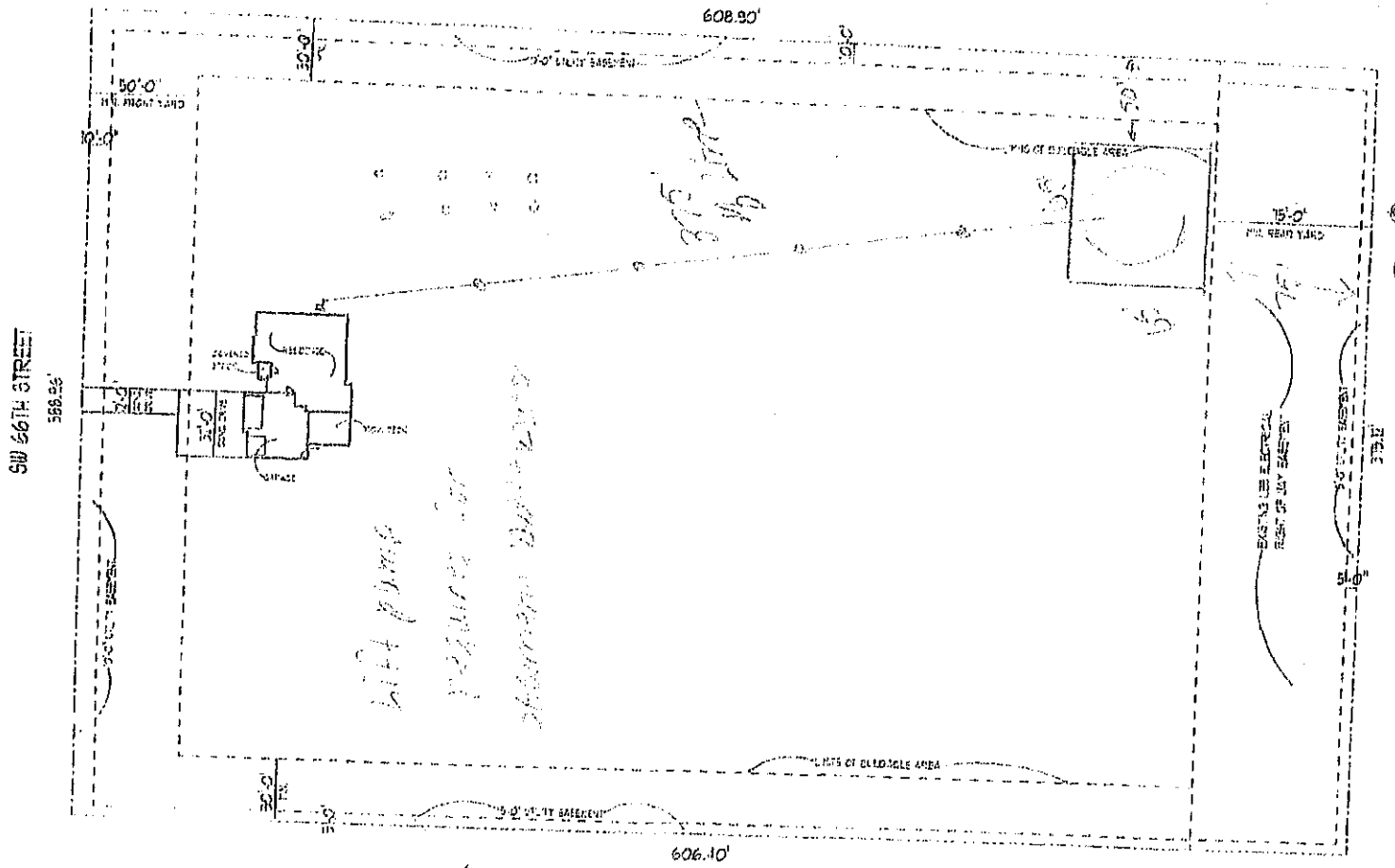
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☒	50 ☒	N/A ☐	30 ☒	50 ☒	100 ☒	200 ☒	☒

F. Required Signatures

Home Building Contractor Mary Kinning Kinning Design Build, Inc. Date 4-20-15

Installer [signature] 402-421-1334 Date 4-20-15

Onsite Form C 12-06


608.90'
606.10'
SW 66TH STREET
568.85'
50'-0"
15'-0"
NOTE:
BUILDING MAY BE LOCATED ANYWHERE WITH-IN BUILDABLE AREA OF LOT.
LEGAL:
DEVELOPMENT
ADDITION
BLOCK
LOT
PLOT PLAN SCALE: 1" = 50'-0"
NEW VENTURES
RESIDENTIAL DESIGN
NVO356
NEW VENTURES DESIGN BUILD, INC.
STACY REYNOLDS I CORY
CONSTRUCTION RESIDENCE

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. HS001055

System Type: Lagoon

Situs: No Site Address Specified

Issued: 4/22/2015

Expires: 4/22/2016

Description: WENDELIN ESTATES 1ST ADDITION, BLOCK 2, Lot 1

Owner: WITTSTRUCK, CORY ALLEN &
REYNOLDS, STACY LEE
4111 BROWNING ST
LINCOLN, NE 68516

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: 402-441-8040

A

Permit Number
HS001055

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Include Form B and C.
Submit correct fee
with this Application

2 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 18175 SW 66th St (8330) (no rural route) City Crete NE Zip 68333

Legal Description NE SW 25 8N 5E Wendelin Estates 1st 2 1
1/4 1/4 Section Township Range Subdivision Addition Block Lot

PID 02-25-302-001-000

B. Owner

Name Cory Wittstruck & Stacy Reynolds 402-304-2258 402-540-8952

Address 4111 Browning St Signature Cory Wittstruck Stacy Reynolds

City/State/Zip Lincoln, NE 68516

Home Phone Work Phone

C. Certified Installer

Name Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd Jakoubek for Lloyd

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

Work Phone 402-890-6009

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 Will Install Extra 1/2 Bath ☐ Yes ☒ No Total Acres 5.35
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 ☐ Variance Case # ☐ County Resolution No. 82-36

1. Health Department
Site visit 9/22/15 DJ
~~Needs inspection 9/30/15 MO~~
Date made Date filed
Comments

ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date made Date filed

ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date made Date filed

ACTION ☒ Approved ☐ Disapproved
Signature

Installation Floor Work Approved
By
Date 9/30/15

Business Office Use Only
Date Received 4-21-15 Amount Paid 625
Receipted SB Cash/Check No. 205 375.00

8-5-25

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: HS0081055

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) 18175 SW 66th St Crete, NE 68333

Owner: Cory Withstruck Address 4111 Browning St Lincoln, NE 68516

A. Wastewater Piping

1. Material: SDR 26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 294 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 _____

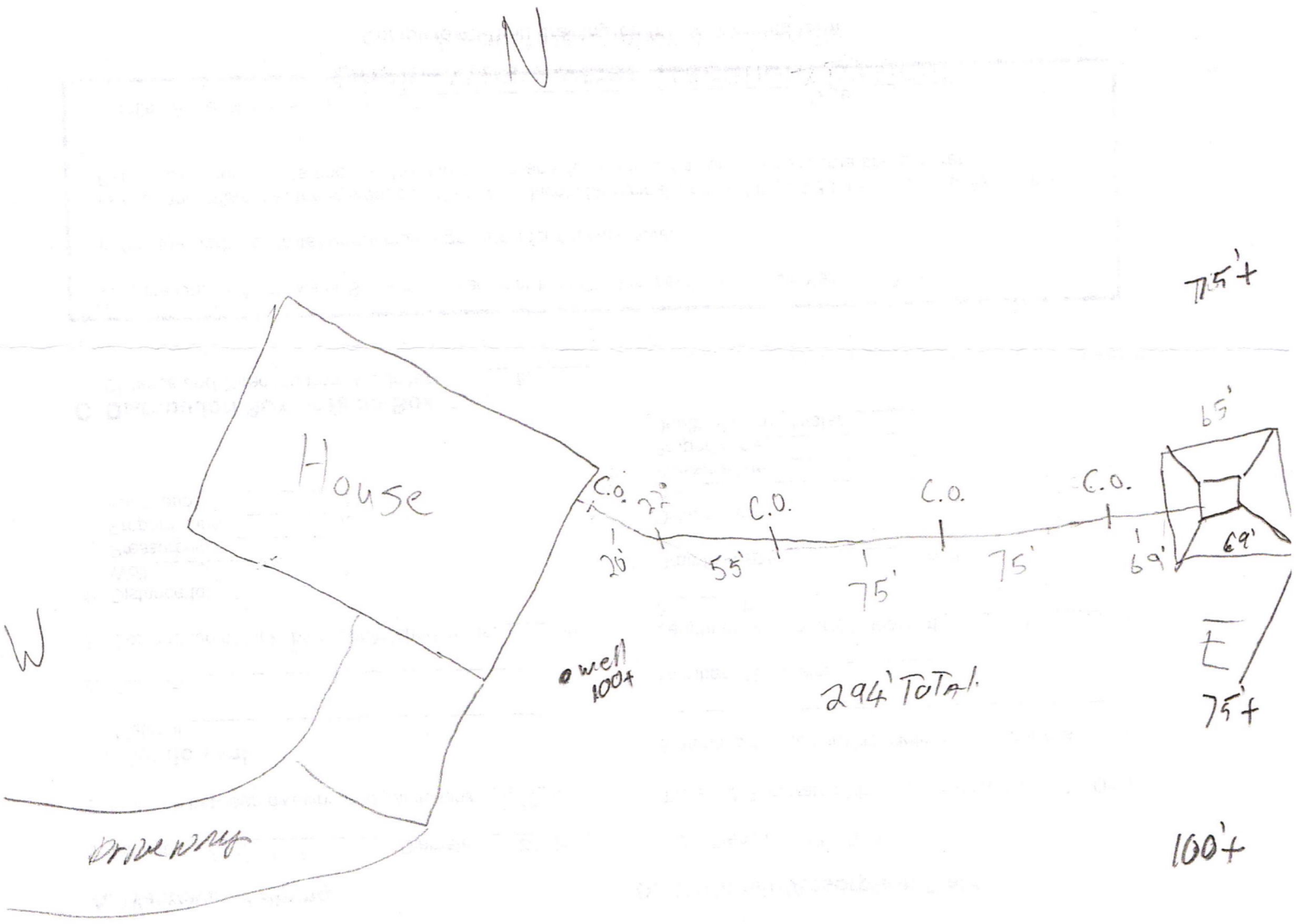
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☐ Yes ☐ No

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: _____ Date: _____

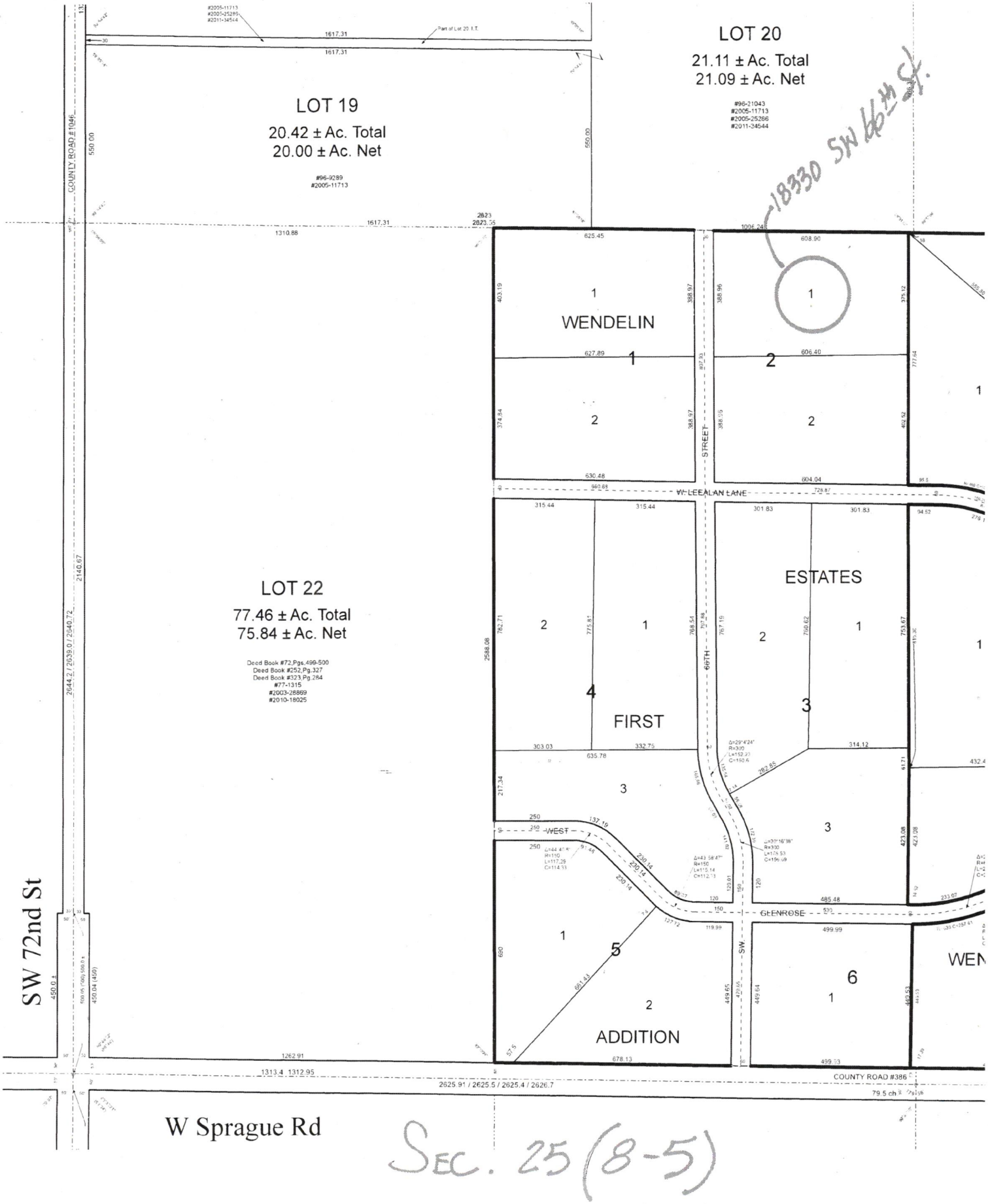
Complete As-Built drawing on the back of this form.



9/22/2015

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

S


LOT 19
20.42 ± Ac. Total
20.00 ± Ac. Net
#96-9289
#2005-11713
LOT 20
21.11 ± Ac. Total
21.09 ± Ac. Net
#96-21043
#2005-11713
#2005-25286
#2011-34544
18330 SW 66th St.
LOT 22
77.46 ± Ac. Total
75.84 ± Ac. Net
Deed Book #72,Pgs.499-500
Deed Book #252,Pg.327
Deed Book #323,Pg.284
#77-1315
#2003-28869
#2010-18025
WENDELIN
ESTATES
FIRST
ADDITION
66TH STREET
W LEEALAN LANE
WEST
GLENROSE
SW
COUNTY ROAD #386
COUNTY ROAD #1046
SW 72nd St
W Sprague Rd
SEC. 25 (8-5)