AS001099

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township_____ Range_____ 1/4_____ 1/4_____ Section _____
   Block_____ Lot_____ Addition_____
   Parcel ID 03 - 02 - 204 - 007 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 7300 W Ranger Ridge Rd

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe without disposal or whirlpool tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** _____

5. **Work to be done by:** ☐ owner ☒ contractor's name Jason Kubik

6. **Estimated project:** a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Jason Kubik Address 105 Locust Hickman Phone: 440-7606

Applicant Signature (owner or lessee)_____

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received____/____/____ REVIEW: ☐ Approved ☐ Disapproved By:_____

Site visits
Date ____/____/____ By_____
Date ____/____/____ By_____
Date ____/____/____ By_____

Installation final written approval
Date____/____/____ By_____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: 7/16/15 Amount $205.00 Check No. 2317 Initials SB

Revised 3-09

7300 W RANGER RIDGE RD 7300 W. Ranger

B

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

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

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

Owner Russ Dlouhy Address 12500 S 82 Roca NE 68430

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: _____ min./inch

Date of Tests 6-26-98 to 6-27-98 Weather: Precipitation None Temperature 90°-95°

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	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1"	30 MIN/IN
2	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1 1/4"	24 MIN/IN
3	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1"	30 MIN/IN
4	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	7/8"	34 MIN/IN
~~5~~	~~36~~	~~6-26~~	~~1:00 Pm~~	~~6-26~~	~~5:00 Pm~~	~~6-27~~	~~1:00 Pm~~	~~6~~	~~6-27~~	~~5:00~~	~~280~~	~~3/4~~	
~~6~~	~~36~~	~~6-26~~	~~1:00 Pm~~	~~6-26~~	~~5:00 Pm~~	~~6-27~~	~~1:00 Pm~~	~~6~~	~~6-27~~	~~5:00~~	~~280~~	~~1/2~~	
7	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	3/4	34 MIN/IN
8	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	5/8	48 MIN/IN

Person Conducting Percolation Tests

Name: Russ Dlouhy
Phone: 423 8389 560-5545
Address 12500 S 82 Roca NE 68430

Sum of Percolation Rates: _____
Average of Rates: _____
Rate Used for Calculation: 48 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Exclude area of holes 5 and 6 for installation.

Signature of Reviewing Official Jerrold C. Hood Date JUNE 29, 1998

FORM 23-101 10-96

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

7300 W. Ranger D

SEP 15 1998

Permit Number:

Sewage Disposal System
As Built Plans & Specifications

Date 9-4-98

System Location (Indicate correct number and street)
Address 7300 Ranger Ridge RD (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: _____
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: _____
2. Capacity: 1250 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter 8" in.
   Over outlet, diameter 8" in.
   Riser: ☐ above ☑ below grade ~~12"~~ in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 190 ft.
   Stream NA ft.
   Pressure line 55 ft.
   Property line 100 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 6
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 7' ft.

D. Absorption Field

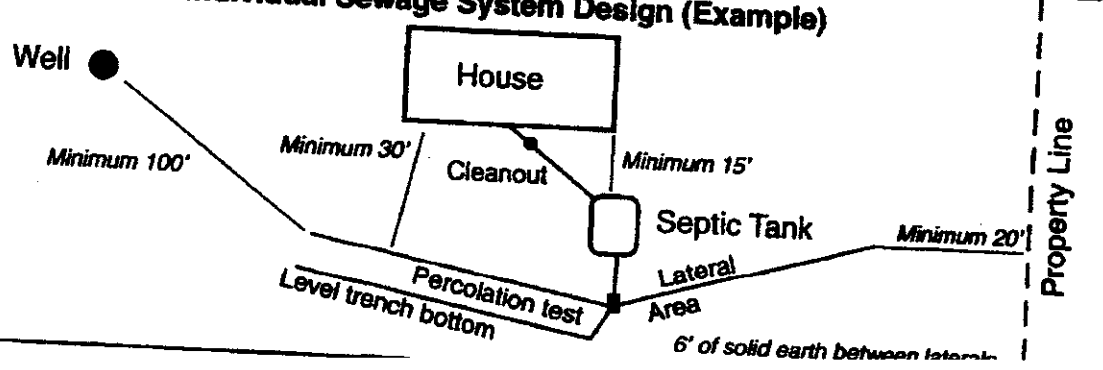
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☑ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: 4"
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 5
   Length of each line: 100 ft. 100 ft.
   100 ft. 100 ft., 7 ft.
3. Trench dimensions: Width 3 ft.
   Slope 2" in/100 ft.
   Average depth 24" in
4. Filter material: Gravel
   Depth of material 12 in.
5. Distances to: Well or suction line 200 ft.
   Stream NA ft.
   Pressure line 65 ft.
   Property line 60 ft.

Indicate North with Arrow

Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



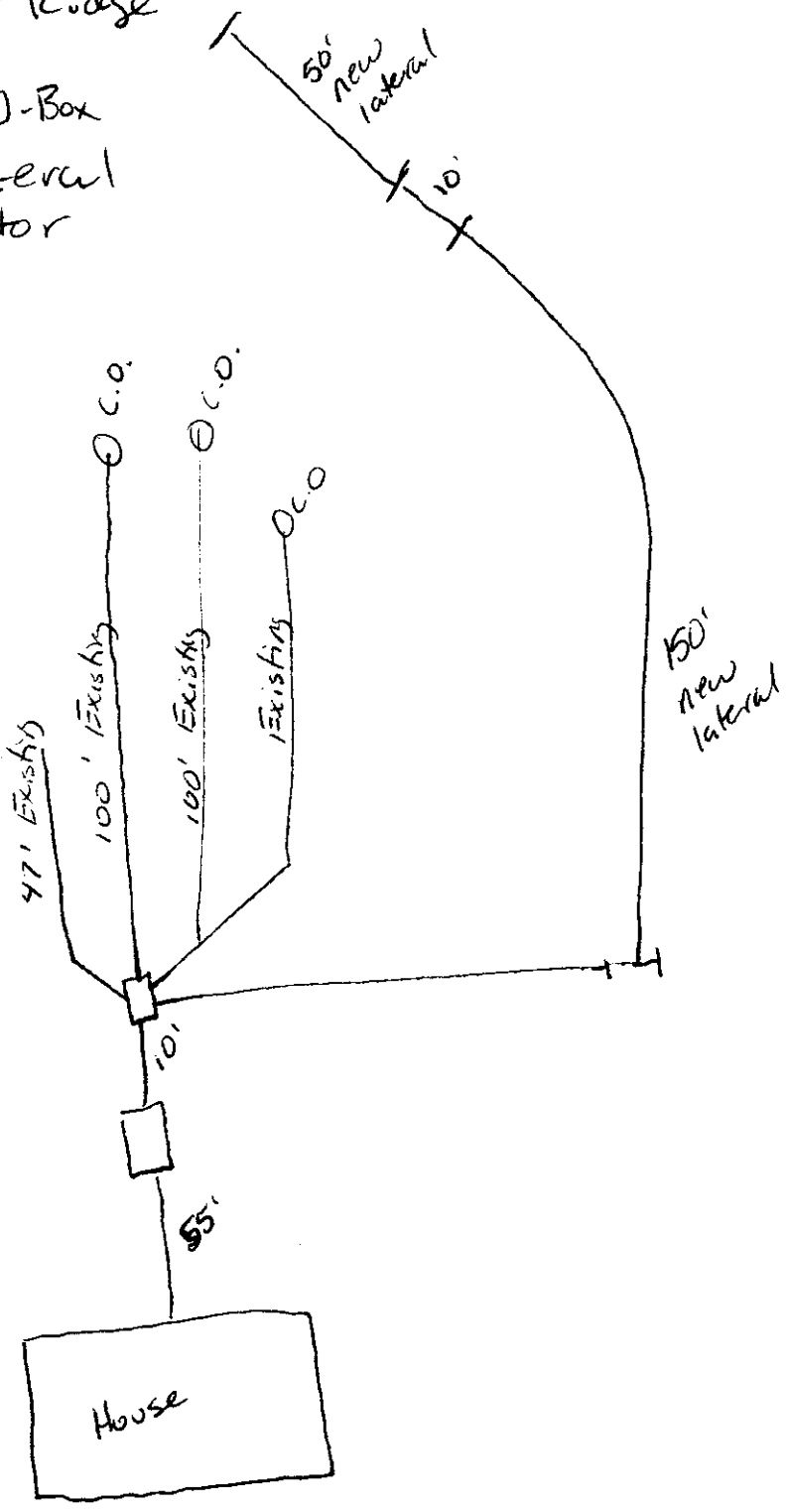
7300 West Ranger Ridge

July 2015

new plastic D-Box

200' new lateral infiltrator

N



D well

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
ALTERATION PERMIT
No. HS001099

System Type: Standard

Situs: 7300 W RANGER RIDGE RD, RURAL, NE

Issued: 7/20/2015

Expires: 7/20/2016

Description: RIDGE PARK, BLOCK 4, Lot 7

Owner: BURCH, MARK D & MARI M
7300 W RANGER RIDGE RD
LINCOLN, NE 68532

Judith A Halstead
Judith A. Halstead, MS, Health Director

Dear Applicant:

The above document is your permit to alter an existing On-site Waste Water System at the location listed. Please contact this office once the alteration is complete to obtain final approval before use.

Judith A Halstead
Judith A. Halstead, MS
Health Director

SOUTHWICK LIQUID WASTE INC
105 LOCUST ST
HICKMAN, NE 68372

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

Exhibit 5

Permit Number: H3001099

Onsite Wastewater Treatment System

Inspection Sheet

Date 7/20/15 Legal Description Ridge Park 8th 4, Lot 7
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 7300 Range Ridge City _____

Owner _____ Address _____

Mark One: ☒ Dwelling ☐ Non-dwelling

☐ New System ☒ Alteration [☐ Tank Only ☐ Trench Only] ☒ Lateral Only

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

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 800 Sq. Ft. Tank Size 1250 gals

Total length of laterals N/O Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) _____

No. of Absorption Laterals 2 Width 3' No. of Drop Boxes N/O Distribution Box N/O

Leveling Method Used N/O

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
Tank (ft)	50 ☒	500 ☐	50 ☒	NA ☒	10 ☒	5 ☒
Field (ft)	100 ☐	500 ☒	50 ☐	4 ☒	25 ☐	5 ☒

Geographical Coordinates to 6 Decimals:

Tank N/O

Lateral #1 N/O

Lateral #2 N/O

Lateral #3 N/O

Lateral #4 N/O

Comments:

System was covered due to Rain

Inspections prior to Final Approval
Initial 7/20/15 Date 7/20/15

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By _____

Date 7/23/15

Field Note Drawing (See Reverse Side):

SCANNED

AS001099

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township 4 Range 7 1/4 1/4 Section
   Block 4 Lot 7 Addition Ridge Park
   Parcel ID 03 - 02 - 204 - 007 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 7300 W Ranger Ridge Rd

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 4 Describe without disposal or whirlpool tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair**

5. **Work to be done by:** ☐ owner ☒ contractor's name Jason Kubik

6. **Estimated project:** a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Jason Kubik Address 105 Locust Hickman Phone: 440-7606

Applicant Signature (owner or lessee)

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 7/16/15 REVIEW: ☑ Approved ☐ Disapproved By:

Site visits
Date 7/16/15 By
Date / / By
Date / / By

Installation final written approval
Date 7/23/15 By

Return application to: Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: 7/16/15 Amount $205.00 Check No. 2317 Initials SB

Revised 3-09

7300 W RANGER RIDGE RD 7300 W. Rango.

B

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

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

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

Owner Russ Dlouhy Addresss 12500 S 82 Roca NE 68430

Soil Type (SCS): WYMORE SILTY CLAY LOAM Percolation Rate: _____ min./inch

Date of Tests 6-26-98 to 6-27-98 Weather: Precipitation None Temperature 90°-85°

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	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1"	30 MIN/IN
2	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1 1/4"	24 MIN/IN
3	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	1"	30 MIN/IN
4	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	7/8"	34 MIN/IN
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7	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-27	5:00	280	3/4	34 MIN/IN
8	36	6-26	1:00 Pm	6-26	5:00 Pm	6-27	1:00 Pm	6	6-28	5:00	280	5/8	48 MIN/IN

Person Conducting Percolation Tests

Name: Russ Dlouhy

Phone: 423 9389 560-5545

Address 12500 S 82 Roca NE 68430

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 48 MIN/IN

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Exclude area of holes 5 and 6 for installation.

Signature of Reviewing Official Jerrold C. Hood Date JUNE 29, 1998

FORM 23-101 10-96

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) 03-02-204-007-000

Owner: MARK BURCH Address 7300 W RANGER RIDGE RD LINCOLN NE 68532

A. Wastewater Piping

1. Material: SCH 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 55 ft.

B. Septic Tank

1. Material CONCRETE
2. Capacity: 1250
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well 120 ft.
   Pressure line 50 ft
   Property Line >100 ft.
   Foundation 55 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 10 ft. N

D. Drainfield/Absorption Field

☒ Trench ❑ Bed

1. Type: ❑ Perforated Pipe ☒ Chamberless ❑ Other
   Material brand and inside width of Chamberless: INFILTRATOR QUICK 4 HIGH CAPACITY
2. Number of Laterals: 6
3. Length of each lateral (linear): ft. 47 ft. 100 ft. 100 ft. 100 150 FT 50 FT
4. Drainfield size: 1761 sq. ft. 720 ADD'L CHAMBER 1041 EXISTING PERF PIPE
5. Distance to:
   Well >100 ft.
   Pressure line >100 ft.
   Property line >50 ft.
   Depth of Groundwater >12

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: Jamie Kuehn Date: 7-10-15

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

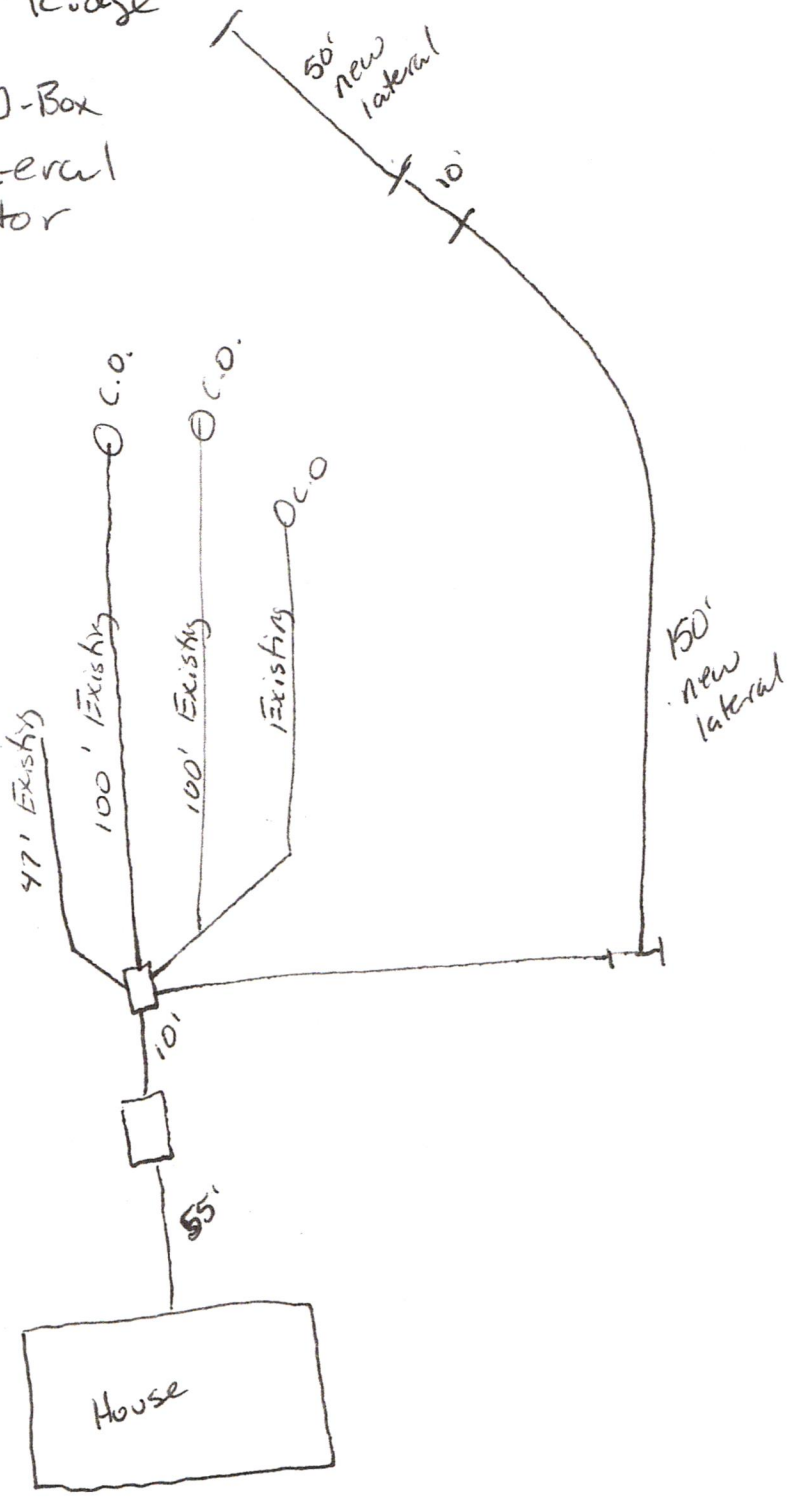
7300 West Ranger Ridge

July 2015

new plastic D-Box

200' new lateral infiltrator

N



D well

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

Exhibit 5

Permit Number: H3001099

Onsite Wastewater Treatment System

8/11/15

Inspection Sheet

Date 7/29/15 Legal Description Ridge Park 8th 4, Lot 7
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 7300 Ranger Ridge City _____

Owner _____ Address _____

Mark One: ☒ Dwelling ☐ Non-dwelling

☐ New System ☒ Alteration [☐ Tank Only ☐ Trench Only] ☒ Lateral Only

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

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 800 Sq. Ft. per • Tank Size 1250 gals

Total length of laterals N/O Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) _____

No. of Absorption Laterals 2 Width 3' No. of Drop Boxes N/O Distribution Box N/O

Leveling Method Used N/O

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
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	10 ☐	5 ☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	5 ☐

Geographical Coordinates to 6 Decimals:

Tank N/O

Lateral #1 N/O Lateral #3 N/O

Lateral #2 N/O Lateral #4 N/O

Comments:

X System was covered due to Rain

Inspections prior to Final Approval
Initial 7/29/15 Date 7/29/15

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By _____

Date 7/29/15

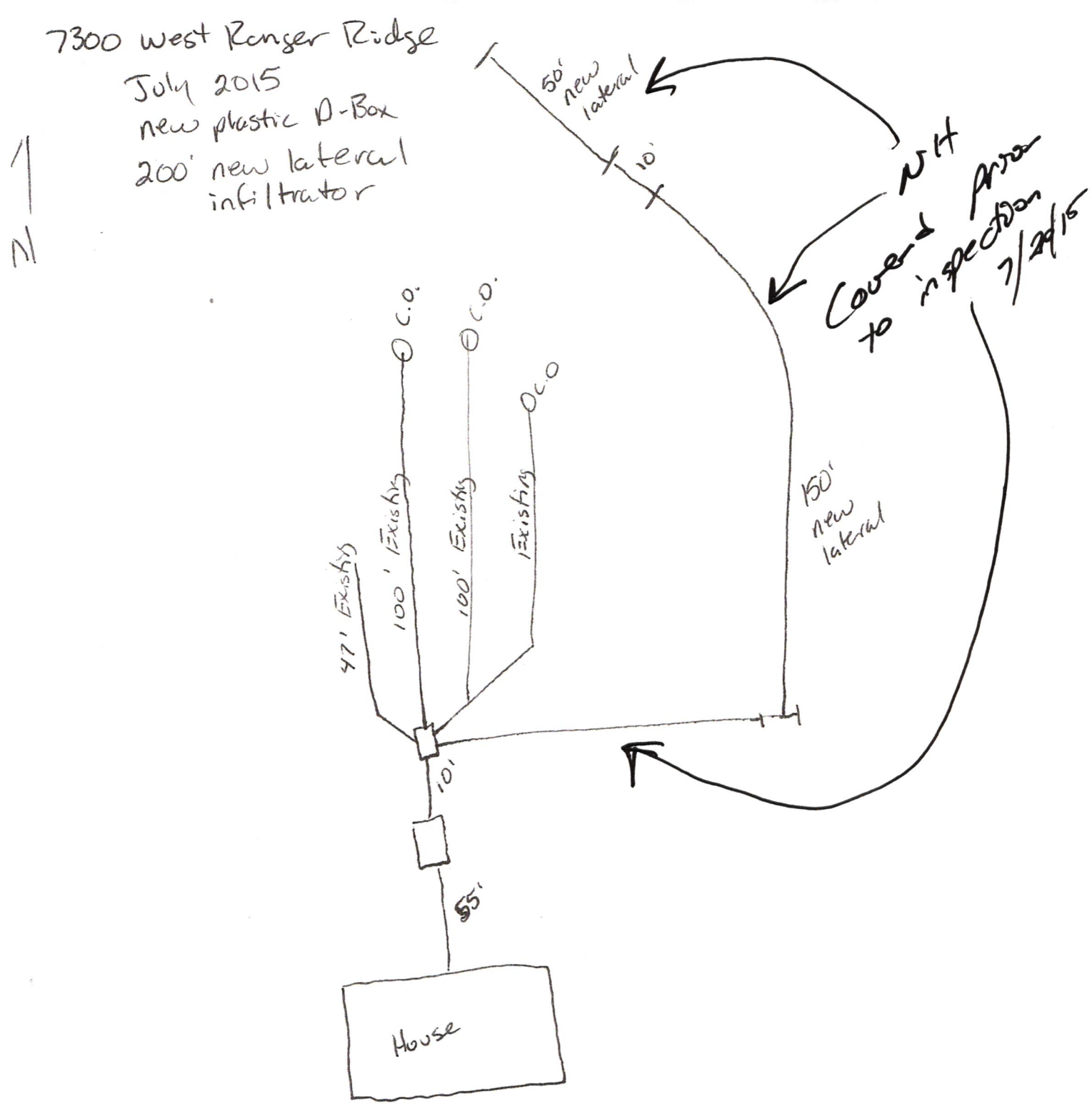
Field Note Drawing (See Reverse Side):

7300 west Ranger Ridge

July 2015

new plastic D-Box

200' new lateral infiltrator



O well