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

DEC 0 3 2015

A

Permit Number
HS001175

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 20801 N 80th St (no rural route) City Ceresco, NE Zip 68017

Legal Description Lakewood Hills Lot 1 12-7-15

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

PID 19-15-201-001-000

B. Owner

Name Brock & Kristin Thorberg Signature

Address 1944 SW 34th St City/State/Zip Lincoln NE 68522

Home Phone Work Phone

C. Certified Installer

Name: Nate Peterson / Infinity Excavating Signature

Address 7701 Cornhusker Hwy Suite 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 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 3.11

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
Date frwd
Comments
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 12-3-15 Amount Paid $385.00
Received By SB Cash/Check No. 5193

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

Form A Updated: 1/13

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. HS001175

System Type: Lagoon

Situs: 20855 N 80 ST, RURAL, NE

Issued: 12/10/2015

Expires: 12/10/2016

Description: LAKEWOOD HILLS, Lot 1

Owner: THORBERG, BROCK & KRISTIN
1944 SW 34 ST
LINCOLN, NE 68522

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

B

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 20801 N 80th St (no rural route) City Colo~~n~~ NE, Zip 68017

Owner Brock Thorberg Address 1949 SW 39th St

Date of Tests 12/18/15 to 12/19/15 Weather: Precipitation 0 Temperature 30°

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. 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	36"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	7/8	34
2	36"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	7/8	34
3	32"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	3/4	40
4	32"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	5/8	48
5	36"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	7/8	39
6	36"	12/18	1:00	12/19	5:00	12/19	11:00	6	12/19	3:00	30	3/4	40
								6					
								6					

Person Conducting Percolation Test

Name: Nate Peterson

Phone: 402-202-8130

Address 2701 Cornhusker Hwy

Sum of Percolation Rates: 230

Average of Rates: 39

Rate Used for Calculation: 39

Soil type (NRCS Maps/Other)

Groundwater Depth 10+

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

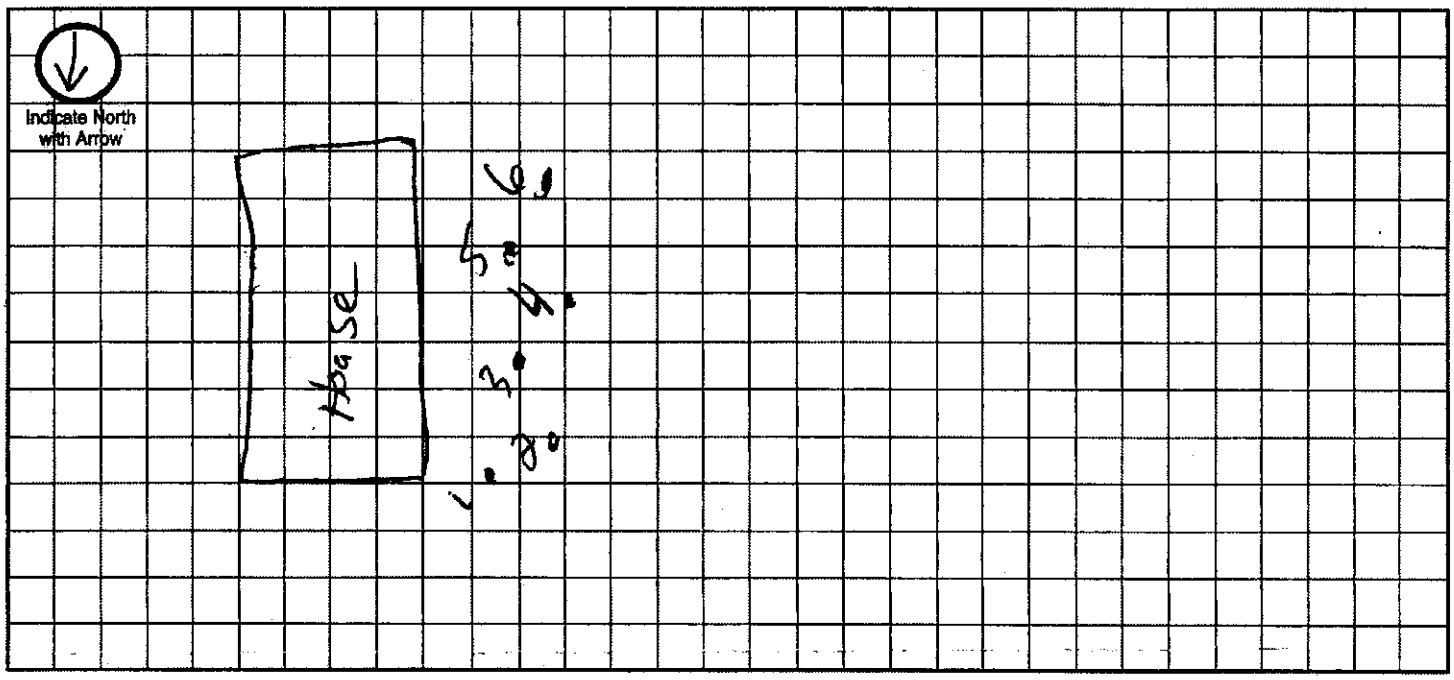
C

Permit Number: HS001175

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) 2080 / N80th City Ceresco NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap 2000 gals Tank Material: ☒ Concrete ☐ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1/8" per day)

C. Reserve Area for Replacement Onsite System

☒ Drainfield Absorption Area (percoloation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 39 (min/inch = mpi) No. of Bedrooms 5 Soil Type 4/more 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_____ Date _____

Installer_____ Date _____

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

4/12/16 OK

Exhibit 5

Permit Number: H5001175

Onsite Wastewater Treatment System

Inspection Sheet

Date 4/6/16 Legal Description Lakewood Hills Lot 1

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) _____ 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 1450 Sq. Ft. Tank Size 2000 gals

Total length of laterals 480 ft Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) 3,625

No. of Absorption Laterals 3 Width 3' No. of Drop Boxes 2 Distribution Box —

Leveling Method Used Laser

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 _____

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments: Measured 7125 to neighbors well, - this well wasn't drilled yet

Inspections prior to Final Approval
Initial DH Date 4/5/16

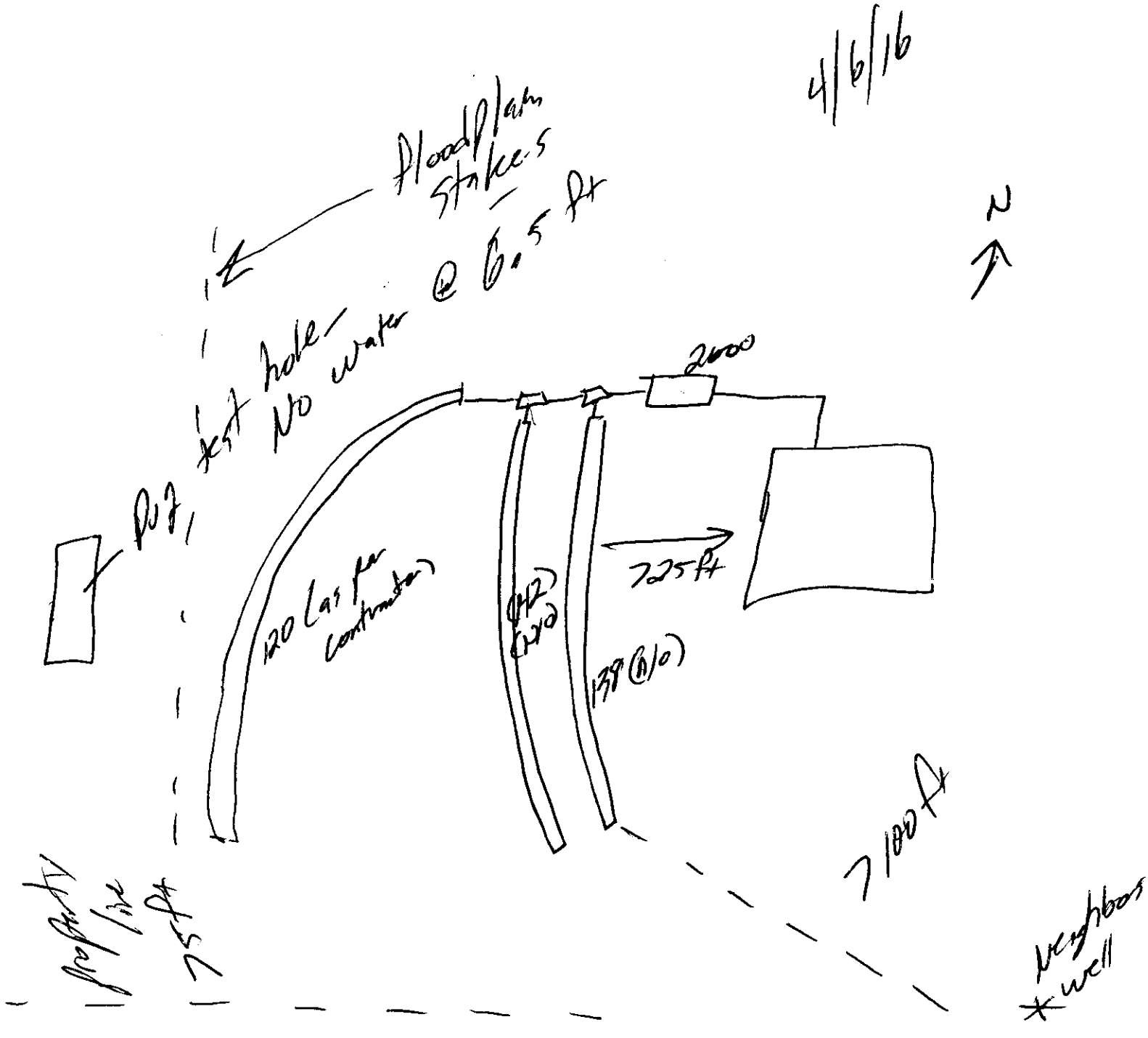
Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By _____

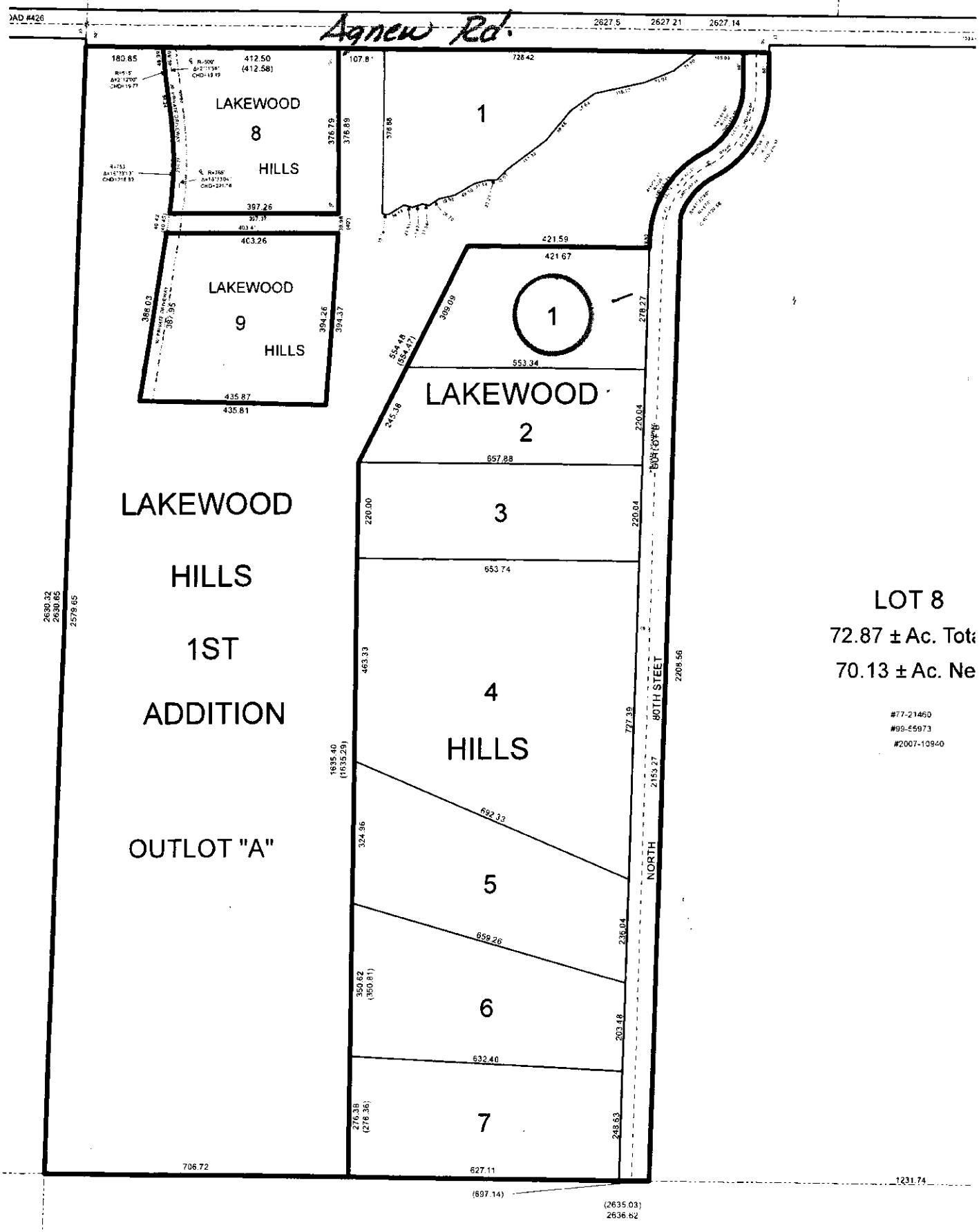
Date 4/6/16

Field Note Drawing (See Reverse Side):


4/6/16
Floodplain stakes
1st hole
No water @ 6.5 ft
N
2000
PW1
120 Lat per contractor
725 ft
7100 ft
neighbor well

THIS PLAT IS INTENDED TO SHOW AS ACCURATELY AS POSSIBLE THE RELATIONSHIP OF TRACTS OF LAND BUT IS NOT INTENDED TO BE CONSTRUED AS SURVEY ACCURATE IN ANY MANNER

Sec. 15-T1
(12-7) Rock (
Scale: 1 inch



LOT 8

72.87 ± Ac. Tota

70.13 ± Ac. Ne

#77-21460
#99-55973
#2007-10940

Nate C. Hartman

From: Todd A. Stutzman
Sent: Monday, December 07, 2015 3:31 PM
To: Nate C. Hartman
Subject: 20801 N 80th St.

Nate,

20801 N 80th Lakewood Hills lot 1 is a buildable lot. If waste water system will be located in the 100 Year flood plain a Flood Plain permit will be required.

Todd Stutzman
Plan Examiner II
402-441-7097
555 S 10th Street, Room 203
Lincoln, NE 69508

Nate C. Hartman

From: Ken D. Schroeder
Sent: Monday, December 07, 2015 4:14 PM
To: Nate C. Hartman
Cc: Pamela L. Dingman
Subject: sewage disposal system for 20801 N. 80th Street (PID #19 15 201 001 000)
Attachments: part of sec 15-12-7.pdf

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for lot 1, "LAKEWOOD HILLS" located in the NE 1/4 of Section 15, T12N, R7E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec 15-12-7.pdf)*
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

Nate C. Hartman

From: Home <swmueller@windstream.net>
Sent: Wednesday, April 06, 2016 10:55 AM
To: Nate C. Hartman
Attachments: Perk Results 2.pdf; ATT00002.c

Nate C. Hartman

From: Home <swmueller@windstream.net>
Sent: Wednesday, April 06, 2016 10:55 AM
To: Nate C. Hartman
Attachments: Perk Results 3.pdf; ATT00002.c

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

DEC 0 3 2015

SCANNED

A

Permit Number
HS001175

Onsite Wastewater Treatment System
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PID 19-15-20-001-000

B. Owner

Name Brock + Kristin Thorberg Signature

Address 1944 SW 34th St City/State/Zip Lincoln NE 68522

Home Phone Work Phone

C. Certified Installer

Name: Nate Peterson / Infinity Excavating Signature

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Work Phone 402-202-8130

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Designer Name Firm Work Phone

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☒ Residential Dwelling Number of Bedrooms 5 Whirlpool Bathtub? ❑ Yes ☒ No Total Acres 3.11

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 12/10/15
Date frwd 12/10/15

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 4/6/16

Business Office Use Only
Date Received 12-3-15 Amount Paid $385.00
Received By SB Cash/Check No. 5193

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