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

A

Permit Number
HS001205

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 5265 Praire Sage Dr (no rural route) City Roca Ne, NE Zip 68430

Legal Description _____

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

PID 15-17-402-001-000 SB

B. Owner

Name Dan Proett Signature _____

Address 5265 Praire Sage Dr City/State/Zip Roca Ne 68430

Home Phone _____ Work Phone _____

C. Certified Installer

Name: Kevin Lewis Signature _____

Address 4810 W claire Ave City/State/Zip Lincoln Ne 68523

Work Phone 402 310 9160

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 _____ 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 24.38 ❑ 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 3-4-16 Amount Paid $385.00
Received By SB Cash/Check No. 8154

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

Design Associates
of Lincoln, Inc.
ARCHITECTS • PLANNERS • ENGINEERS

October 9, 2015

John Chess
Lincoln - Lancaster County Health Department
Environmental Health Division – 2nd Floor
3140 'N' Street
Lincoln, Nebraska 68510

RE: On-site Wastewater Treatment System
Lot 1, Block 2 Roca Ridge Addition
SE ¼, SE ¼, Sec. 17, T8N, R7E
5625 Prairie Ridge Road
Roca, Lancaster County, Nebraska

Mr. Chess,

The following is offered an explanation of sizing calculations for a wastewater lagoon far an establishment located at 5265 Prairie Ridge Drive. First, the property is an acreage parcel and a single family residence was constructed on it in 2002. Next, in 2007 a 30x83' storage building was also constructed on the property. Finally, in 2014 the storage building was converted into a social hall. The hall has been operating with porta-potties as temporary restroom facilities.

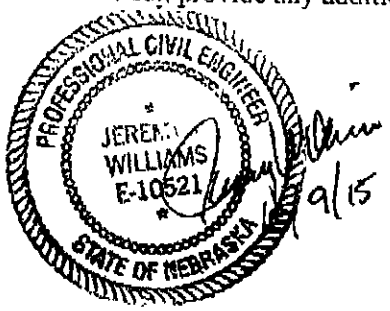
Now that the hall is established, they would like to add a permanent wastewater facility. Although the existing residence utilizes a septic system, the soils have marginal percolation rates and a septic tank and lateral field will take up a large amount of space. Therefore, a lagoon is the proposed system for the establishment.

Wastewater generated by the facility is domestic waste only. Restrooms will be added and there is a utility sink. The hall hosts events on average two days a week. It is estimated that they generate 750 gallons per day when hosting an event. Therefore, a design flow of 225 gallons per day is be utilized for sizing calculations. This will require a lagoon of the following size:

Square (side in feet): 5' level = 46', 6' level = 52', bottom = 16'
Round (diameter in feet): 5' level = 52', 6' level = 58', bottom = 22'

If you have any questions or if we can provide any additional information please give me a call at (402) 474-3000.

Thanks,



Jeremy Williams, P.E.
For the firm

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. HS001205

System Type: Lagoon

Situs: 5265 PRAIRIE SAGE DR, RURAL, NE

Issued: 3/9/2016

Expires: 3/9/2017

Description: ROCA RIDGE ADDITION, BLOCK 2, Lot 1

Owner: PROETT, DANIEL M & KONRARDY, NANCY L
5265 PRAIRIE SAGE DR
ROCA, NE 68430

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

GAGNER CONSTRUCTION COMPANY INC
4810 W CLAIRE AVE
LINCOLN, NE 68523

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

012 Y 9/6/16

Exhibit 6

Permit Number: HS001205

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 8/24/16 Legal Description ___ ¼ ___ ¼ 17/8/7 Lot 1 Section/Township/Range

Onsite System Location

Address (no rural route) 5265 Prairie Lace Dr City Roca

Owner Dan Proett Address ___

Mark One: ☐ Dwelling ☒ Non-dwelling Social Hall

☒ New System ☐ Repair

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

Lagoon constructed so not to receive surface water	Yes X No ___
Lagoon floor is level	Yes X No ___
Lagoon is equipped with a depth gage/concrete slab	Yes X 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 X No ___
Inside slope not steeper than three horizontal to one vertical	Yes X No ___
Minimum width of the top of the dike shall be 4 feet	Yes X No ___
Fence installed	Yes ___ No X Yes installed & inspected 8/29/16

Top of the Dike 52' Bottom of Lagoon 16' Design Flow 225

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 ___

Dike North side NA

Comments:

Inspections prior to Final Approval
Initial ___ 8/22/16 Date DS
Follow-Up ___ 8/29/16 Date DS
Follow-Up ___ Date ___

Installation Final Written Approval
By Doug Amen
Date 8/30/16

OCT 1 6 2002

B

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

Permit Number: 023802561

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 15901 S 54th (no rural route) City Roca NE, Zip 68430

Owner DAVID Fairbanks Address P.O. Box 88 Roca, NE 68430

Soil Type (SCS): clay / clay loam Percolation Rate: 53.5 min./inch

Date of Tests 10/5/02 to 10/6/02 Weather: Precipitation 1/2" Temperature 60's/50's

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 PM		End PM		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	37	10/5	1:05	10/5	7:10	10/6	12:50	6"	10/6	4:50	240	3 3/4	64
2	37	10/5	1:08	10/5	7:11	10/6	12:52	7"	10/6	4:51	240	5	48
3	36	10/5	1:11	10/5	7:12	10/6	15:54	6"	10/6	4:52	240	3 3/4	64
4	37	10/5	1:13	10/5	7:14	10/6	12:56	8 1/2"	10/6	4:54	240	4	60
5	37	10/5	1:15	10/5	7:16	10/6	12:59	8 1/2	10/6	4:55	240	3 1/2	48
6	36 1/2	10/5	1:18	10/5	7:17	10/6	12:61	7"	10/6	4:56	240	4	60
7	36	10/5	1:20	10/5	7:18	10/6	12:63	6 1/2	10/6	4:58	240	4	60
8	35	10/5	1:22	10/5	7:19	10/6	12:64	6	10/6	4:59	240	3 1/2	48
9	36	10/5	1:24	10/5	7:20	10/6	2:65	6	10/6	5:00	240	8	30

Sum of Percolation Rates: 482

Average of Rates: 53.5

Rate Used for Calculation:

Person Conducting Percolation Tests

Name: David Fairbanks

Phone: 402-499-9252

Address: P.O. Box 88
Roca, NE 68430

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96