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

A

Permit Number
HS001206

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 12000 South 54th (no rural route) City ~~Roca~~ Lincoln, NE Zip 68430

Legal Description 4 8 7 9

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

Geographical Location (if known): Lat/Long: 40 41 31 N 96 38 52 W PID 15-04-100-011-000

B. Owner

Name Todd Hornung Signature

Address City/State/Zip

Home Phone Work Phone 402 443 871

C. Certified Installer

Name: Blain Johnson Signature

Address 8533 E State Hwy 41 City/State/Zip Adams NE 68301

Work Phone 402 610 2270

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 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 5+

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department Date rec'd Date fwd **ACTION** ☐ Approved ☐ Disapproved
Site visits Signature

2. Supt. Bldg. Insp. or Village Clerk Date rec'd Date fwd **ACTION** ☐ Approved ☐ Disapproved
Comments Signature

3. City or County Engineer Date rec'd Date fwd **ACTION** ☐ Approved ☐ Disapproved
Comments Signature

Installation Final Written Approval
By

Date

Business Office Use Only
Date Received 3-8-16 Amount Paid $385.00
Received By SB Cash/Check No. CC-2609 Discovery

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

Form A updated: 5/10

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

B

Permit Number: HS001206

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 12000 South 54th (no rural route) City Roca NE, Zip

Owner Todd Hornung Address

Date of Tests 11/2/15 to 11/3/15 Weather: Precipitation clear Temperature 55-65

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	24"	11/2	2P	11/3	3P	11/3	6:30P	6	11/3	7P	30	3/4	40
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	30	5/8	48.38
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	30	1/2	60
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Blain Johnson
Phone: 402 640 2270
Address 9533 E State Hwy 41
Adams NE 68301

Soil type (NRCS Maps/Other) Wymore Silty Clay Loam
Groundwater Depth 239 ft

Sum of Percolation Rates: 148.38
Average of Rates: 49.46
Rate Used for Calculation: 59

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

C

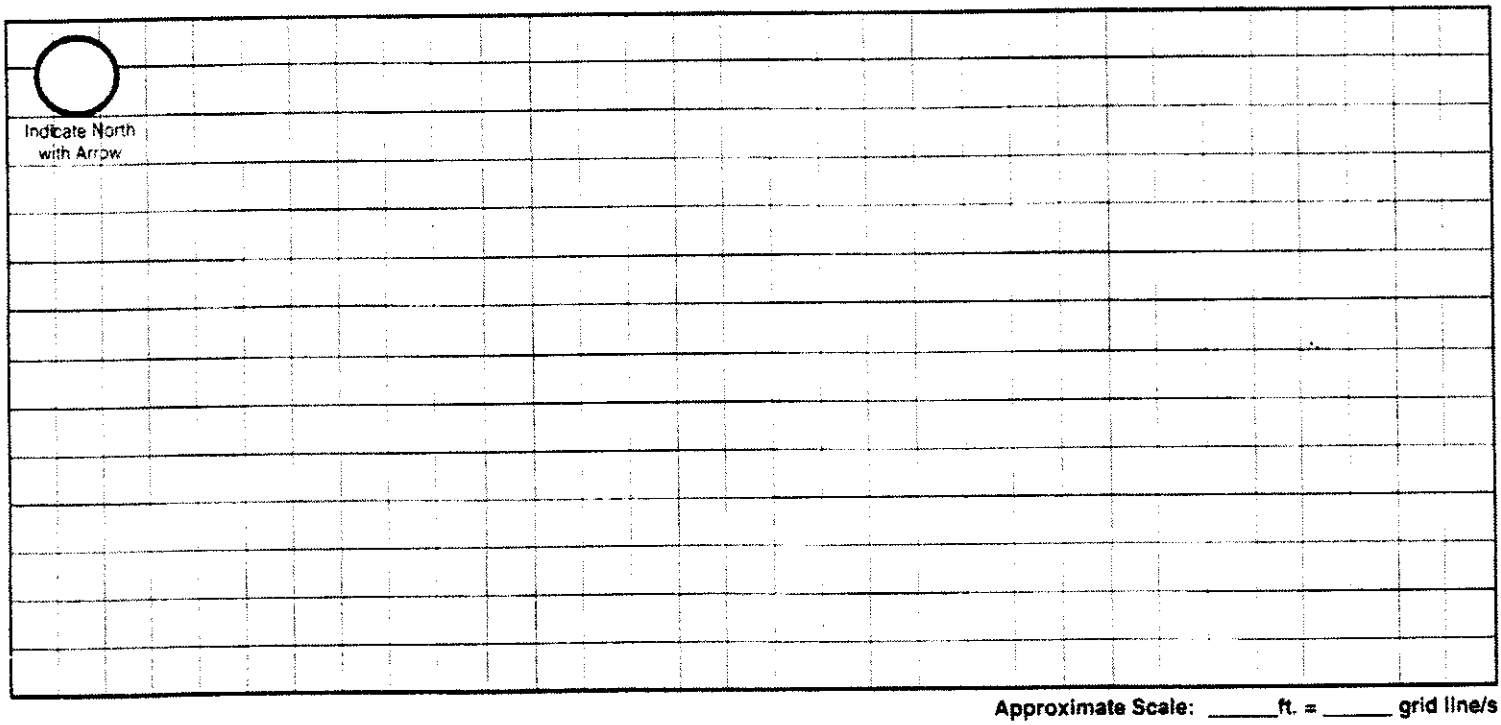
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number: HS001206

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) 12000 South 54th City Roca NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap. 1000 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 59 (min/inch = mpi) No. of Bedrooms 3 Soil Type 1 Land Slope _____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1050 sq.ft.

Total length of laterals 292' 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 3-4-16

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. HS001206

System Type: Standard

Situs: 12000 S 54 ST, RURAL, NE

Issued: 3/9/2016

Expires: 3/9/2017

Description: S4, T8, R7, 6th Principal Meridian, LOT 29 NW

Owner: HORNUNG, TODD A & LISA A
1811 COUNTY ROAD F
WAHOO, NE 68066

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

BLAINE JOHNSON
8533 E STATE HWY 41
ADAMS, NE 68301

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) 12000 South 54th

Owner: Todd Hornung Address 1811 County Road F Wahoo NE 68066

A. Wastewater Piping

1. Material: Plastic Diameter: 4 in
2. Distance between dwelling and septic tank: 70 ft.

B. Septic Tank

1. Material: Concrete
2. Capacity: 1000 gallon
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well NA ft.
   Pressure line 50+ ft
   Property Line 50+ ft.
   Foundation 70+ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: SE ft 10

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☒ Chamberless ☐ Other
   Material brand and inside width of Chamberless: Infiltrator Quick4 Plus 39.75"
2. Number of Laterals: 3 3.625 factor
3. Length of each lateral (linear): ft. 90 ft. 90 ft 112 ft.
4. Drainfield size: 1050 sq. ft
5. Distance to:
   Well NA ft.
   Pressure line +50 ft.
   Property line +50 ft.
   Depth of Groundwater 239

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

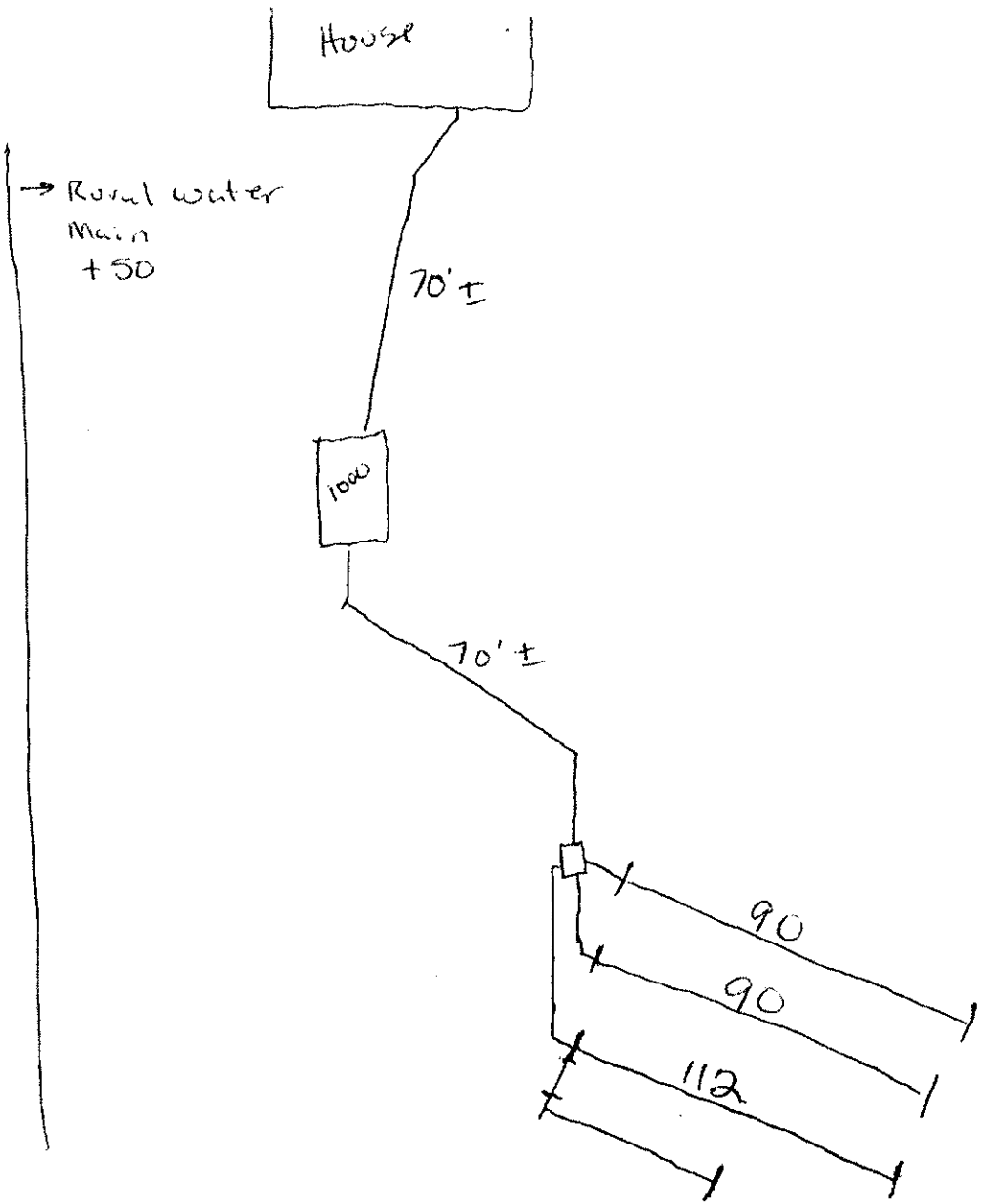
If Yes, the Certified Professional must sign below for final approval

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: Blair Tuma Date 16 Mar 16

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

12000 South 54th



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

Exhibit 5

OK per 3/28/16

Permit Number: H5001206

Onsite Wastewater Treatment System

Inspection Sheet

Date 3/28/16 Legal Description ____ ¼ ¼ 4 8 7 Section/Township/Range

Onsite System Location PID 15-04-100-011-000

Address (no rural route) 12000 South 54th City Lincoln

Owner Todd Hornung 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 1,058 Sq. Ft. Tank Size 1,000 gals

Total length of laterals 292' Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) ____

No. of Absorption Laterals 3 Width 3.625 No. of Drop Boxes ____ 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 NA

Lateral #1 ____ Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Installer - Blaine Johnson

Inspections prior to Final Approval
Initial DC Date 3/16/16

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Rhine

Date 3/16/16

Field Note Drawing (See Reverse Side):