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

A

Permit Number HS001210

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 W McKelvie Rd (no rural route) City Malcolm NE Zip 68402

Legal Description NE (1/4) 26 (1/4) 11N (Section) 5E (Township) (Range) (Subdivison) (Addition) 27 (Block) (Lot)

PID 05-26-200-011-000

B. Owner

Name Matt & Jennifer Bratrsovsky Signature

Address 450 S Lincoln St City/State/Zip Malcolm, NE 68402

Home Phone 402-805-1052 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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

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

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 5

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 ACTION ☐ Approved ☐ Disapproved
Date frwd Signature
Comments

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 3-9-16 Amount Paid $385.00
Received By SB Cash/Check No. 8848

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

Form A Updated: 1/13

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

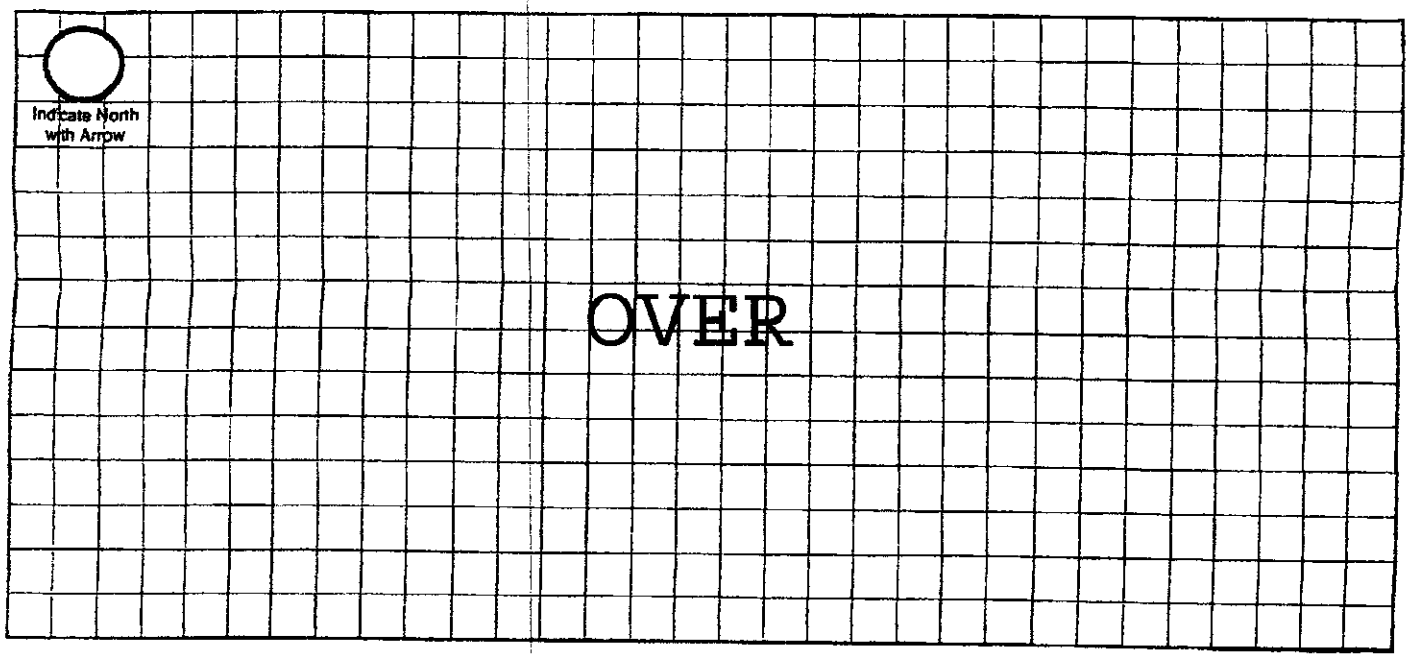
C

Permit Number: HS001210

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) W McKelvie Rd City Malcolm NE, Zip 68402

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 ☒	☒

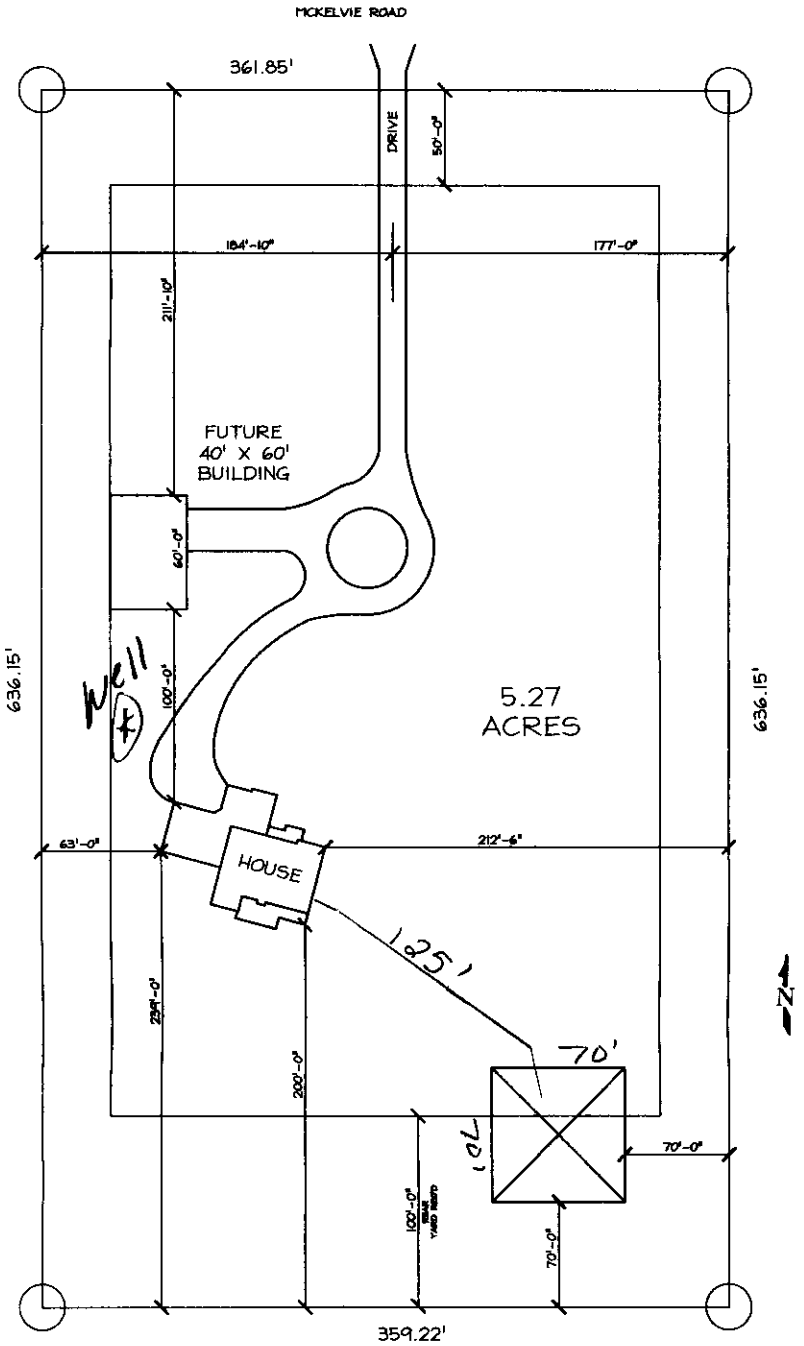
F. Required Signatures

Home Building Contractor Bratcovsky Custom Homes Date 3.8.16

Installer Matt Bratcovsky Date 3-8-16

Onsite Form C 12-06

Reviewed by [signature] 3-9-16


MCKELVIE ROAD
361.85'
DRIVE
50'-0"
184'-10"
177'-0"
211'-10"
FUTURE
40' X 60'
BUILDING
60'-0"
100'-0"
Well
636.15'
636.15'
5.27
ACRES
63'-0"
212'-6"
HOUSE
1251
70'
294'-0"
200'-0"
70'-0"
101'
100'-0"
70'-0"
359.22'
N

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. HS001210

System Type: Lagoon

Situs: No Site Address Specified

Issued: 3/16/2016

Expires: 3/16/2017

Description: S26, T11, R5, 6th Principal Meridian, LOT 27 NE

Owner: TALLON, DAVID & KRISTI
2180 144 DR
RAYMOND, NE 68428

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

OK 3/22/17

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

Exhibit 6

Permit Number: HS001210

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 12/09/16 Legal Description ¼ ¼ 26/T11/R5 Lot 27 Section/Township/Range

Onsite System Location

Address (no rural route) 7303 W. MCKELVIE RD. City Malcom

Owner Matt & Jennifer Bratrasorsky Address 450 S Lincoln St Malcolm, NE

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ 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 70	Yes X No ~~X~~

Top of the Dike ~~10~~ Bottom of Lagoon ~~30~~ 34' Design Flow 450

NH 3/22/17

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 NA		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 ☒	☐ NA
		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

Comments:

- Levi will call when fence is installed

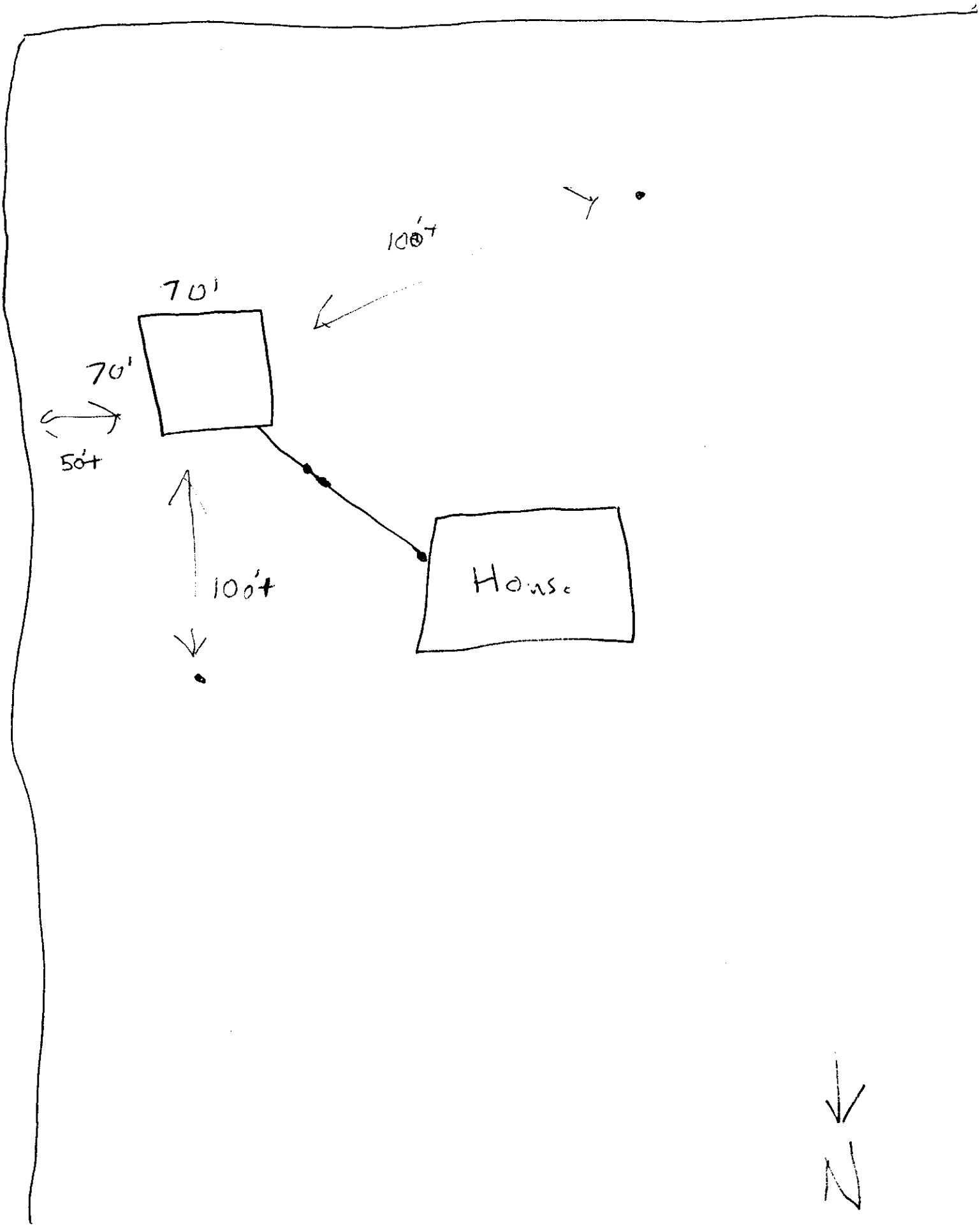
Inspections prior to Final Approval
Initial _____ Date 12/7

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By _____

Date 3/22/17


100'
70'
70'
50'
100'
House
N

Nate C. Hartman

From: James L. Plouzek
Sent: Monday, March 14, 2016 11:09 AM
To: Nate C. Hartman
Subject: Parcel No. 05 26 200 011 000 Lot 27, Sec 26, T11N, R5E

Nate – We have reviewed the parcel listed above for flood plain issues and having found none, we approve the parcel for being flood plain free.

Jim Plouzek
Road Construction Engineer
Lancaster County Engineering Dept.
444 Cherrycreek Road Bldg. C
Lincoln, NE 68528
402-441-7681
email: jplouzek@lancaster.ne.gov

Nate C. Hartman

From: Todd A. Stutzman
Sent: Tuesday, March 15, 2016 1:17 PM
To: Nate C. Hartman
Subject: 26-11-5 lot 27

Nate,

Lot 27 NE located in S26, T11, R5 is a buildable lot.

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