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. HS001223

System Type: Lagoon

Situs: 8600 BUCKBOARD DR, RURAL, NE

Issued: 4/12/2016

Expires: 4/12/2017

Description: S3, T9, R5, 6th Principal Meridian, LOT 34 NE 5.41 AC

Owner: BEACH, JERRY D & BARBARA E
8600 BUCKBOARD LN
LINCOLN, NE 68532

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 INC
13800 NW 70TH ST
RAYMOND, NE 68428

APR 15 2016

9-5-3

D Exhibit 4

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

Permit Number: HS001223

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) 8100 Buckboard Ln, Lincoln NE 68532

Owner: Jerry Beach Address same

A. Wastewater Piping

1. Material: Sdr 26 PVC Diameter: 4 in.
2. Distance between dwelling and ~~septic tank~~ Lagoon: 122 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: ____ ft. ____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

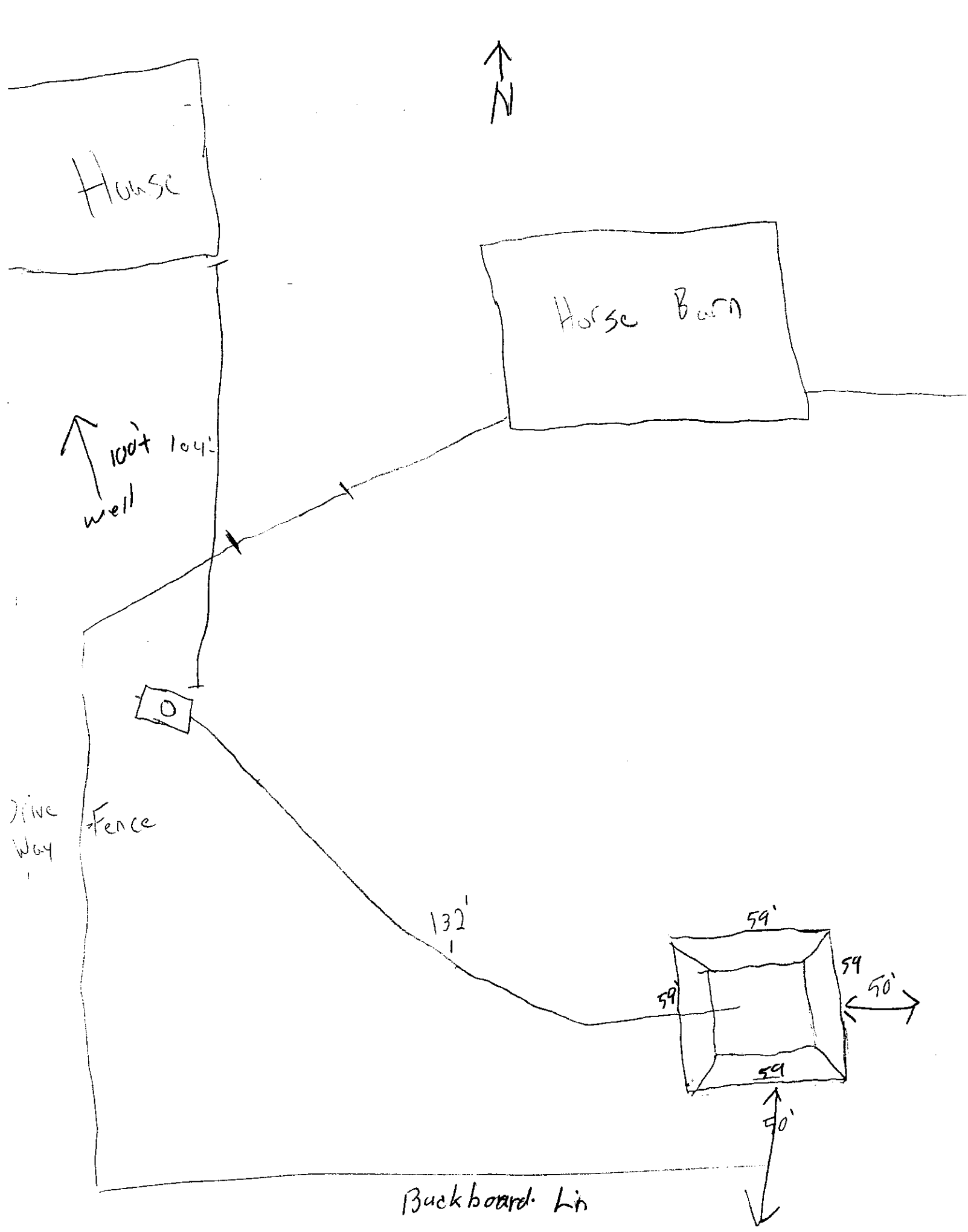
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No Partially

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: Richard Johnson Date: 4/7/2016

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


N
House
Horse Barn
100'
104'
well
Drive Way
Fence
132'
59'
59'
59'
59'
50'
50'
Backboard Ln

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
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Exhibit 6

Permit Number: H5001223

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 4/6/16 Legal Description 3 / 9 / 5 Lot 34
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 8600 Buckboard City Lincoln

Owner _____ Address _____

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	Yes___ No___

Top of the Dike 58' Bottom of Lagoon 16' Design Flow 300

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 ☑	

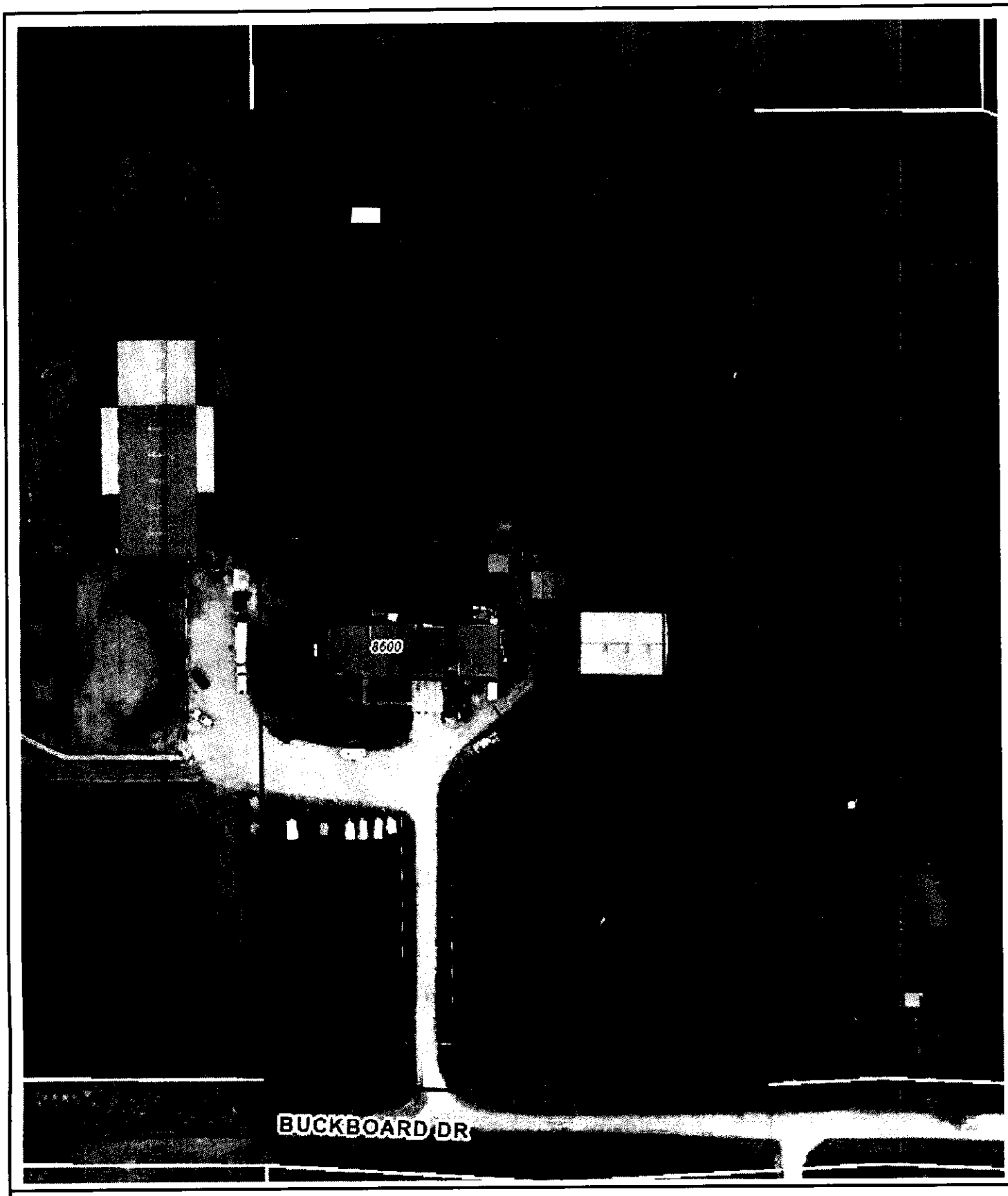
*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: NA

Dike North side

Comments:

Inspections prior to Final Approval
Initial DS Date 4/7/16
Follow-Up _____ Date Needs Fence
Follow-Up DC Date 5/16/17
Installation Final Written Approval
By Doug Ames
Date 5/16/17



Lancaster County/City of Lincoln GIS Map

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Printed: Apr 15, 2016

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SCANNED

emailed for signature 4/4/16 10:57am

A

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

Permit Number #S001223

Existing Home

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 8600 Buckboard Ln (no rural route) City Lincoln, NE Zip 68532

Legal Description NE (1/4) 3 (1/4) 9N (Section) 5E (Township) (Range) (Subdivison) (Addition) (Block) 34 (Lot)

PID 03-03-200-013-000

B. Owner

Name Jerry & Barbara Beach Signature

Address 8600 Buckboard Ln City/State/Zip Lincoln, NE 68532

Home Phone 402-430-7084 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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 5.45

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 4/7/16 Date rec'd 4/12/16 Date frwd 4/12/16

ACTION ☒ Approved ☐ Disapproved Signature

Comments *Contacted on 9/8/16 - Said will be next week

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 Doug Ames

Date 5/16/17

Business Office Use Only

Date Received 4-8-16 Amount Paid $385.00

Received By SB Cash/Check No. VISA

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

Form A Updated: 1/13

* Letter is complete - as of 5/8/17



Lancaster County/City of Lincoln GIS Map

Jerry Beach 8600 Buckboard Dr, Lincoln, NE 68532 402-430-7084

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Initial _____

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SCANNED



Lancaster County/City of Lincoln GIS Map

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Printed: Apr 15, 2016

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