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

A

Permit Number
#S001253

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 11800 Fargo Pl (no rural route) City Walton, NE Zip 68461

Legal Description 10 8 31 SB Windhoek 8th Add. 2

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

PID 23-31-412-002-000

B. Owner

Name Steven Durdee Signature

Address 7242 S 96 Ct City/State/Zip Lincoln NE 68526

Home Phone Work Phone

C. Certified Installer

Name: Jason Kubik Signature Jason Kubik

Address 105 Locust City/State/Zip Hickman NE 68372

Work Phone 402-440-7006

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 3.02

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
Date frwd
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 5-11-10 Amount Paid $385
Received By SB Cash/Check No. 2563

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

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

B

Permit Number: HS001253

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 11800 Fargo Pl (no rural route) City Walton NE, Zip 68461

Owner Steven Dunder Address 7242 S 96 Ct

Date of Tests 4/13/16 to 4/14/16 Weather: Precipitation 0 Temperature 60

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			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	30	4/13	3:25	4/14	1:15	4/14	4:45	6	4/14	5:15	30	1 1/8	27
2	30	4/13	3:25	4/14	1:15	4/14	4:45	6	4/14	5:15	30	1	30
3	30	4/13	3:25	4/14	1:15	4/14	4:45	6	4/14	5:15	30	7/8	35
4	30	4/13	3:25	4/14	1:15	4/14	4:45	6	4/14	5:15	30	7/8	35
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-440-7602
Address: 105 Locust St
Hickman NE 68372
Soil type (NRCS Maps/Other) 7050 Kennebec
Groundwater Depth ±12'

Sum of Percolation Rates: 127
Average of Rates: 32
Rate Used for Calculation: 32

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 (402) 441-8027
3140 N Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS001253

System Type: Standard

Situs: 11800 FORGO PL, RURAL, NE

Issued: 5/13/2016

Expires: 5/13/2017

Description: WINDHOEK 8TH ADDITION, Lot 2

Owner: DUNDER, STEVEN G & REBECCA A
7242 S 96 CT
LINCOLN, NE 68526

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

SOUTHWICK LIQUID WASATE INC
105 LOCUST STREET
HICKMAN, NE 68372

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

OK
3/24/17

Exhibit 5

Permit Number: H5001253

Onsite Wastewater Treatment System

Inspection Sheet

Date 3/28/17 Legal Description W½ Block 8th Lot 2

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 11800 Fonzo Pl 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 ~~1320~~ 1377.5 Sq. Ft. Tank Size 2000 gals ~~1250~~

Total length of laterals 380 Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) _____

No. of Absorption Laterals 3 Width 3' No. of Drop Boxes 0 Distribution Box 1

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 N/O

Lateral #2 _____ Lateral #4 _____

Comments: see D-sheet for Drawings + notes

Inspections prior to Final Approval
Initial DH Date 3/24/17

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By _____

Date 3/30/17

Field Note Drawing (See Reverse Side):