HS001297

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☐**ALTER** ☐**REPAIR** an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 12801 NW 56 St

   Legal Description of Property: Township:_____ Range:_____ Section:_____

   Block_____ Lot_____ SubDivsion_____ Add:_____

   ***Parcel ID** 05-12-200-005-000 SB (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: _____)
   Number of bedrooms 3 ? Does the system have a: ☐ Garbage Grinder ☐Large Capacity Tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** extend existing Add 100' Lat.

5. **Current Type of Lateral-**_____ **Current Linear Ft. Of Lateral -**_____

   Current Tank Gallonage-_____

6. Print Name Melvin King Address 12801 NW 56 St Phone: 402-438-5419

   Applicant Signature: For Melvin by Matt Taylor

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received____/____/____ REVIEW: ☐ Approved ☐ Disapproved By:_____

Comments (if any):_____

Site visits
Date ____/____/____ By_____
Date ____/____/____ By_____

Installation final written approval
Date____/____/____ By_____

Return application to:

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only

Received: Date: 6/28/16 Amount $210 Check No. 1214 Initials SB

Revised 4/8/13

owner says - drop

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

Exhibit 5

Permit Number: H5001297

Onsite Wastewater Treatment System

Inspection Sheet

Date 6/30/16 Legal Description ___ ¼ ___ ¼ 12 / 11 / 5 Lot 40
Section/Township/Range

Onsite System Location

Address (no rural route) 12801 NW 56th 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 Added 100' Linear 362 Sq. Ft. Tank Size existing 1,000 gals - May have added filter material to

Total length of laterals 100' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe) bore + capacities to 500 sq. ft.

No. of Absorption Laterals 1 Width 3.625 factor No. of Drop Boxes ___ Distribution Box ___

Leveling Method Used Hand level

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 NA

Lateral #2 ___

Lateral #3 ___

Lateral #4 ___

Comments:

Inspections prior to Final Approval
Initial DS Date 06/28/16

Follow-Up ___ Date ___

Follow-Up ___ Date ___

Installation Final Written Approval
By Doug Shaw
Date 06/30/16

Field Note Drawing (See Reverse Side):

11-5-12

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: H500297

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) _____

Owner: Melvin King Address 12801 NW 56th St.

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 150 ft.

B. Septic Tank

1. Material concrete (on file)
2. Capacity: existing
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well 300 ft.
   Pressure line – ft
   Property Line – ft.
   Foundation 150 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 15 ft. west ~~west~~ ft. ~~15~~

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: Infiltrator (Standard Plus)
2. Number of Laterals: 3 existing / 1 installed
3. Length of each lateral (linear): ft. 100 ft. ____ ft. ____ ft. ____
4. Drainfield size: 336 sq. ft.
5. Distance to:
   Well 300 ft.
   Pressure line – ft.
   Property line – ft.
   Depth of Groundwater more than 4 ft

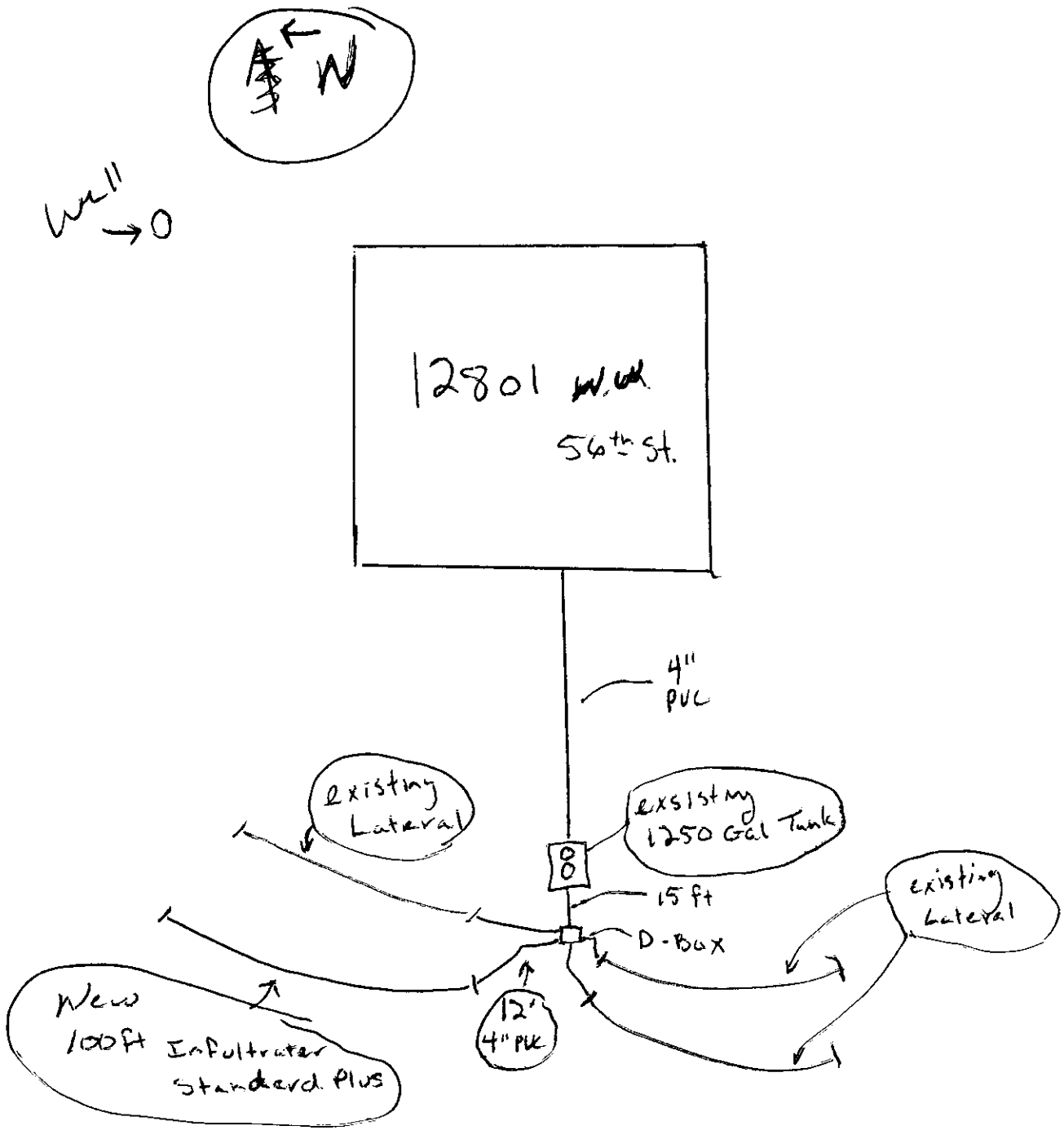
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☐ Yes ☐ No

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: _____ Date: 7-7-16

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


N
Well
12801
56th St.
4" PVC
existing Lateral
existing 1250 Gal Tank
15 ft
D-Box
existing Lateral
New 100ft Infiltrator Standard Plus
12" 4" PVC