Attn: Nate

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

A

Permit Number HS001316

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 19300 NW 12TL (no rural route) City Davey, NE Zip 68336

Legal Description 22 12 6-E 27
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 13-22-100-009-000 SB

B. Owner

Name Corey Barker Signature

Address 1001 Meadow Lake Drive City/State/Zip Lincoln NE

Home Phone 402-202-8457 Work Phone 402 328 3272

C. Certified Installer

Name: Scott Stubbert Signature

Address 1012 C St City/State/Zip Mead Ne 68041

Work Phone 402-443-6549

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 19.78

☐ 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
Site visits
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 8-2-16 Amount Paid $385
Received By SB Cash/Check No. CC 3932

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

Form A Updated: 5/10

Hhion Note

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

B

Permit Number: H5001316

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 19300 NW 12th (no rural route) City Davey NE, Zip 68336

Owner Corey Becker Address 1001 Meadow Lake Drive

Date of Tests 8/12/15 to 8/13/15 Weather: Precipitation 0 Temperature 90

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	30	8/12	9:00	8/13	11:00	8/13	11:30	6	8/13	12:00	30	.75	40
								6					
2	34							6				.75	40
								6					
3	32							6				.65	50
								6					
4	30							6				.65	50
								6					

Person Conducting Percolation Test

Name: Scott Sublett

Phone: 402-443-6549

Address 6012 Co Rd M
Mead NE 68041

Soil type (NRCS Maps/Other) Silt Clay Loam

Groundwater Depth 25'

Sum of Percolation Rates: 180

Average of Rates: 45

Rate Used for Calculation: 45

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official

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. HS001316

System Type: Standard

Situs: No Site Address Specified

Issued: 8/8/2016

Expires: 8/8/2017

Description: S22, T12, R6, Acres 6th Principal Meridian, LOT 27 NW

Owner: BECKER, COREY A & BRANDI A
1001 MEADOW DALE DR
LINCOLN, NE 68505

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

SCOTT SUBBERT
1012 C RD M
MEAD, NE 68041

AH Note

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

D Exhibit 4

Permit Number: HS0013316

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) 19300 NW 12TH

Owner: Corey Becker Address SAME

A. Wastewater Piping

1. Material: Sch 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: _____ ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well 400 ft.
   Pressure line 20 ft.
   Property Line 100 ft.
   Foundation 30 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 15 ft. W

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☒ Chamberless ☐ Other
   Material brand and inside width of Chamberless: plastic 32"
2. Number of Laterals: 275
3. Length of each lateral (linear): ft. 140 ft. 135 ft. _____ ft. _____
4. Drainfield size: 1375 sq. ft.
5. Distance to:
   Well 400 ft.
   Pressure line 20 ft.
   Property line 100 ft.
   Depth of Groundwater 30

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: Scott Sudbeck Date: 10/4/17

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

Allied Nute

SCANNED

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

A

Permit Number HS001316

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 19300 NW 12TL (no rural route) City Davey, NE Zip 68336

Legal Description 22 12 6-E 27
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 13-22-100-009-000 SB

B. Owner

Name Corey Becker Signature

Address 1001 Meadow Oaks Drive City/State/Zip Lincoln NE

Home Phone 402-202-8457 Work Phone 402 328 3272

C. Certified Installer

Name: Scott Subject Signature

Address 1012 Co Rd M City/State/Zip Mead Ne 68041

Work Phone 402-443-6549

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 19.78

☐ 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. 82-30

1. Health Department
Site visits
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 9/2/16

Business Office Use Only
Date Received 8-2-16 Amount Paid $385
Received By SB Cash/Check No. CC 3930

White - Health Department Yellow - Engineer Pink - Building & Safety Form A Updated: 5/10

* Contacted contractor about using correct sheet in the future.
* System covered prior to inspection - NH

Alt Location Note

SCANNED

B

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

Permit Number: H5001316

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 19300 NW 12th (no rural route) City Davey NE, Zip 68336

Owner Corey Beutler Address 1001 Meadow Dale Drive

Date of Tests 8/12/15 to 8/13/15 Weather: Precipitation 0 Temperature 90

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Last 30 mins of 4 hr or last 10 mins of 1 hr Water Level Drop					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	8/12	9:00	8/13	11:00	8/13	11:30	6	8/13	12:00	30	.75	40
								6					
2	34							6				.75	40
								6					
3	32							6				.65	50
								6					
4	30							6				.65	50
								6					

Person Conducting Percolation Test

Name: Scott Eddleman

Phone: 402-443-6549

Address 1012 Co Rd 11

Mead NE 68041

Soil type (NRCS Maps/Other) Silt Clay loam

Groundwater Depth 25'

Sum of Percolation Rates: 180

Average of Rates: 45

Rate Used for Calculation: 45

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official

atlas Note

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

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 8/30/17 Legal Description SWNW 22 12 (1/4 1/4 Section Township Range)

Onsite System Location

Address (no rural route) 19300 NW 12th City Davey NE, Zip 68336

Owner Corey Becker Address Same

A. Sewer Pipe

1. Material: sch 40
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

Septic Tank

☑ Label with Manufacturer, address and gallon capacity

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 2000 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☑ above ☐ below grade _____ in.
5. Inlet: ☑ baffle ☐ tee ☐ 6" dia. inspection pipe
6. Outlet: ☑ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line 400' ft.
   Stream — ft.
   Pressure line 20 ft.
   Property line 100 ft.

C. ☑ Distribution Box ☑ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: Plastic
   Number available outlets: _____
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: _____ ft.

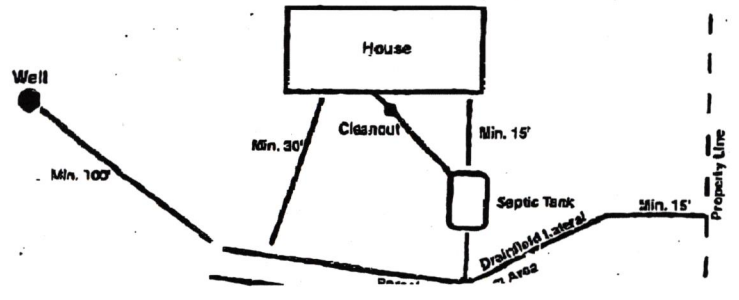
D. Drainfield Absorption

☑ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☑ Chambers
   Diameter or width: 32"
   Number of distribution lines in bed 1
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Drainfield Laterals: Number _____
   Length of each line: 100 ft. 100 ft.
   75 ft. _____ ft. _____ ft.
3. Drainfield dimensions: Width 5 ft.
   Distribution Pipe Slope 0 in/100 ft.
   Average depth 2' in
4. Filter material: Gravel
   Depth of material _____ in.
5. Distances to: Well or suction line 300 ft.
   Pressure line 20 ft.
   Property line 100 ft.
   House or building House Slab ft.
   Lake or Stream — ft.

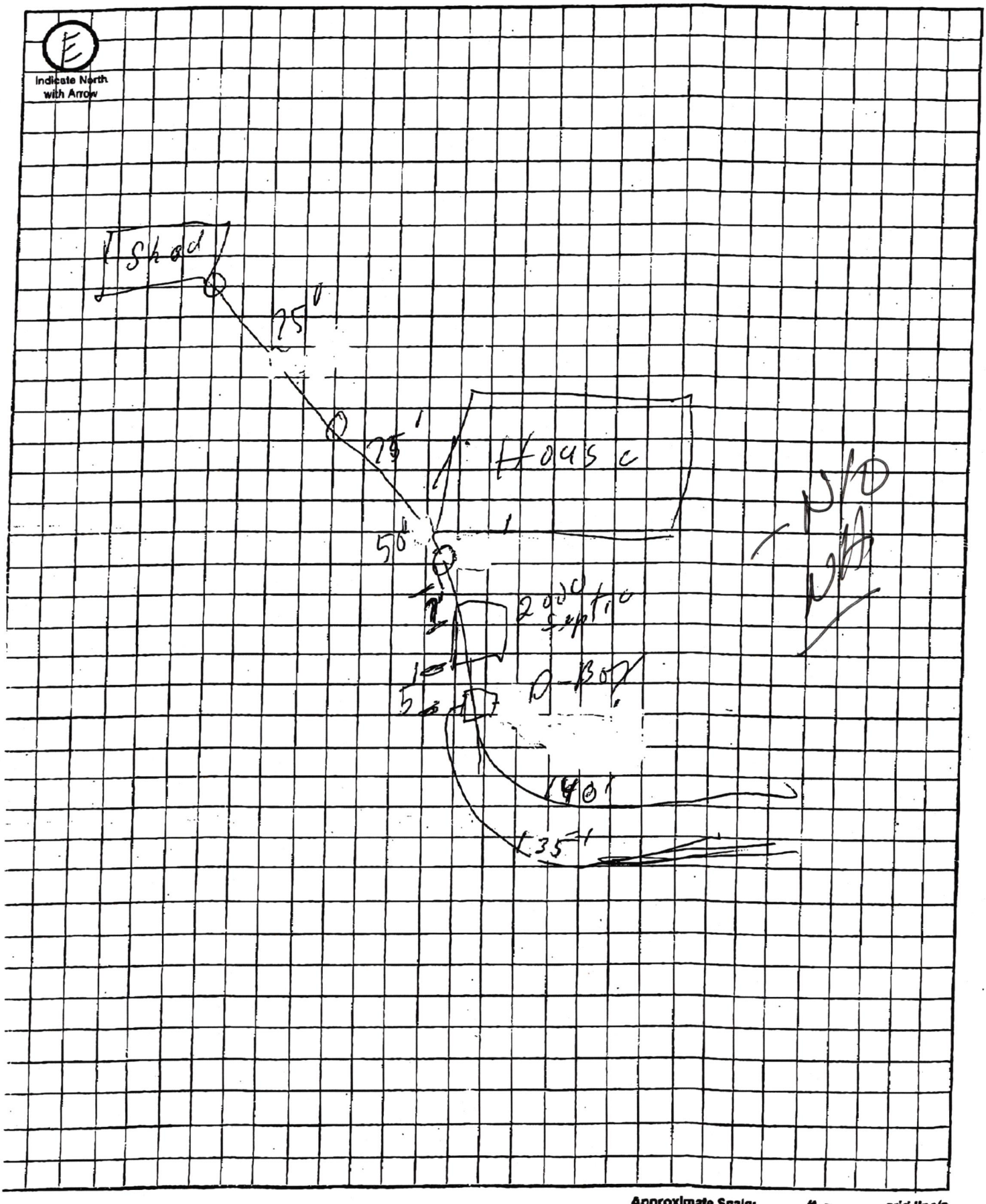
Complete As-Built drawing on the back fo this form.

Onsite Wastewater System Design (Example)



North Arrow

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line/s

AH Note

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

D Exhibit 4

Permit Number: HS0013316

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) 19300 NW 12TH

Owner: Corey Becker Address SAME

A. Wastewater Piping

1. Material: Sch 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: _____ ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well 400 ft.
   Pressure line 20 ft.
   Property Line 100 ft.
   Foundation 30 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 15 ft. W

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☒ Chamberless ☐ Other
   Material brand and inside width of Chamberless: plastic 32"
2. Number of Laterals: 275
3. Length of each lateral (linear): ft. 140 ft. 135 ft. _____ ft. _____
4. Drainfield size: 1375 sq. ft.
5. Distance to:
   Well 400 ft.
   Pressure line 20 ft.
   Property line 100 ft.
   Depth of Groundwater 30

NH

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: Scott Sudbeck Date: 10/4/17

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



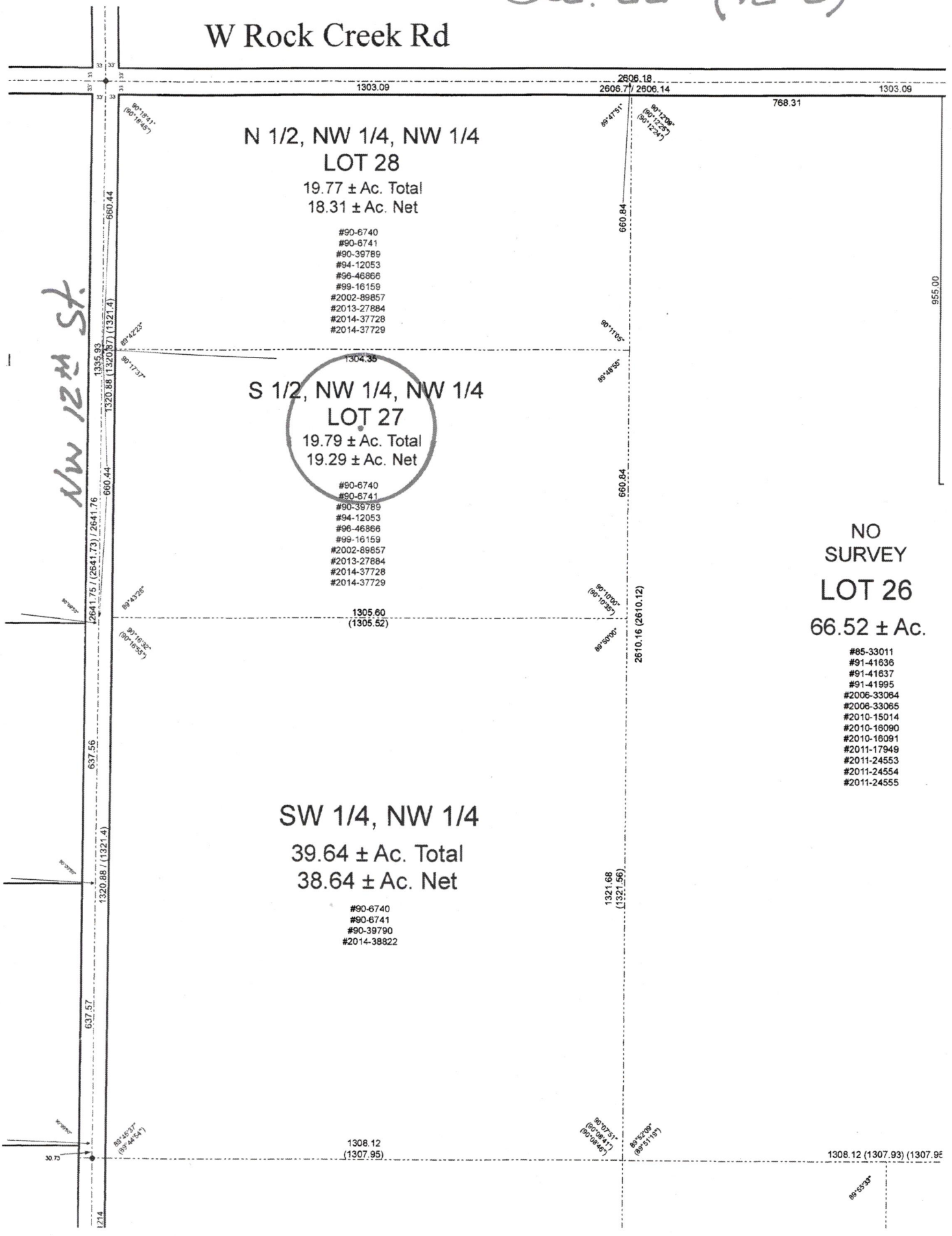
N
W E
S

Lancaster County/City of Lincoln GIS Map

Printed: Aug 05, 2016

DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email ags@lincoln.ne.gov and you will be directed to the appropriate department.

Sec. 22 (12-6)


W Rock Creek Rd
NW 12th St.
N 1/2, NW 1/4, NW 1/4
LOT 28
19.77 ± Ac. Total
18.31 ± Ac. Net
#90-6740
#90-6741
#90-39789
#94-12053
#96-46866
#99-16159
#2002-89857
#2013-27884
#2014-37728
#2014-37729
S 1/2, NW 1/4, NW 1/4
LOT 27
19.79 ± Ac. Total
19.29 ± Ac. Net
#90-6740
#90-6741
#90-39789
#94-12053
#96-46866
#99-16159
#2002-89857
#2013-27884
#2014-37728
#2014-37729
NO SURVEY
LOT 26
66.52 ± Ac.
#85-33011
#91-41636
#91-41637
#91-41995
#2006-33064
#2006-33065
#2010-15014
#2010-16090
#2010-16091
#2011-17949
#2011-24553
#2011-24554
#2011-24555
SW 1/4, NW 1/4
39.64 ± Ac. Total
38.64 ± Ac. Net
#90-6740
#90-6741
#90-39790
#2014-38822
2606.18
2606.71 / 2606.14
1303.09
768.31
1303.09
660.84
955.00
660.44
1335.93
1320.88 (1320.87) (1321.4)
1304.35
660.84
660.44
2641.75 / (2641.73) / 2641.76
1305.60
(1305.52)
2610.16 (2610.12)
637.56
1320.88 / (1321.4)
1321.68
(1321.56)
637.57
1308.12
(1307.95)
1308.12 (1307.93) (1307.9
30.73
1214