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

A

Permit Number
HS001370

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 355W. Sprague Rd (no rural route) City Roca NE Zip 68430

Legal Description NE 34 8N 6E 52
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 08-34-200-006-000

B. Owner

Name: Eddie Turner Signature: Eddie Turner

Address 8910 Truchard Rd City/State/Zip Lincoln, NE 68526

Home Phone 402-304-0192 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 402-890-8009 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 27.41
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 11-21-16 Amount Paid $395
Received By SB Cash/Check No. VISA

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

Form A Updated: 12/13

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

B

Permit Number: HS001370

Onsite Wastewater Treatment System

Soil Evaluation Report

PID = 08-34-200-006-000
NE1/4 S34-T8N-R5E Lot 52

PLEASE PRINT OR TYPE

Onsite System Location

Address _____ City Roca NE, Zip 68430
(no rural route)

Owner Eddie Turner Address 8910 Truchard Rd, Lincoln, NE 68526

Date of Tests 3/16/16 to 3/17/16 Weather: Precipitation 0 Temperature 57°

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	24	3/16	12:30p	3/16	4:30p	3/17	4:00p	6	3/17	4:30p	30	3-1/8	10
2	24	"	"	"	"	"	2:10p	6	"	2:20p	10	2-1/8	5
3	30	"	"	"	"	"	4:00p	6	"	4:30p	30	1-1/16	28
4	20	"	"	"	"	"	2:10p	6	"	2:20p	10	1-1/2	7
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.
Phone: 402-783-2663 or 402-890-6009
Address 13800 NW 70th St
Raymond, NE 68428 Cert #1198

Sum of Percolation Rates: 50
Average of Rates: 13
Rate Used for Calculation: 28 (20 mpi variance)

Soil type (NRCS Maps/Other) Judson Silt Loam
Groundwater Depth >8'

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
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

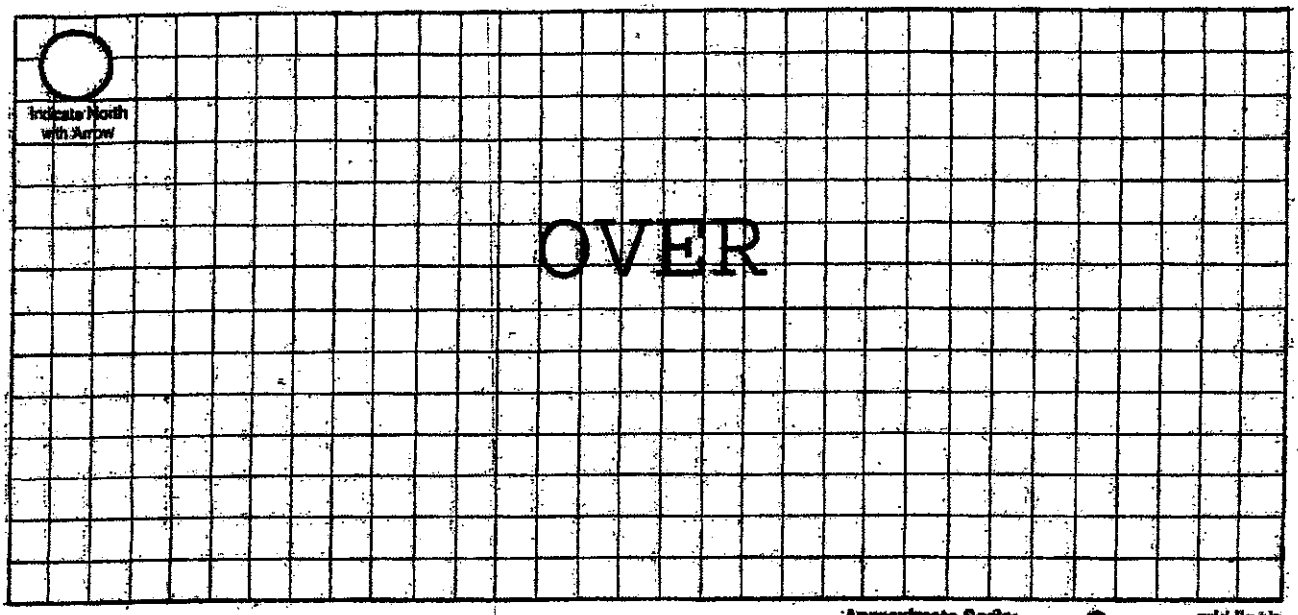
C

Permit Number: HS001370

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 lines

A. Onsite System Location

Address (no rural route) Sprague Rd City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Septic Tank Cap. 2,000 gals Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____ ☐ Lagoon (Max. allowable # of gpd per day)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☒ Lagoon

D. Drainfield Absorption System

Percolation Rate 26 (min/inch = mpi) No. of Bedrooms 5 Soil Type Judson Silt Loam Land Slope 2-6 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,250 sq.ft.

Total length of laterals 345 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption tranches 4 Width 40" No. of drop boxes 1 Distribution 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

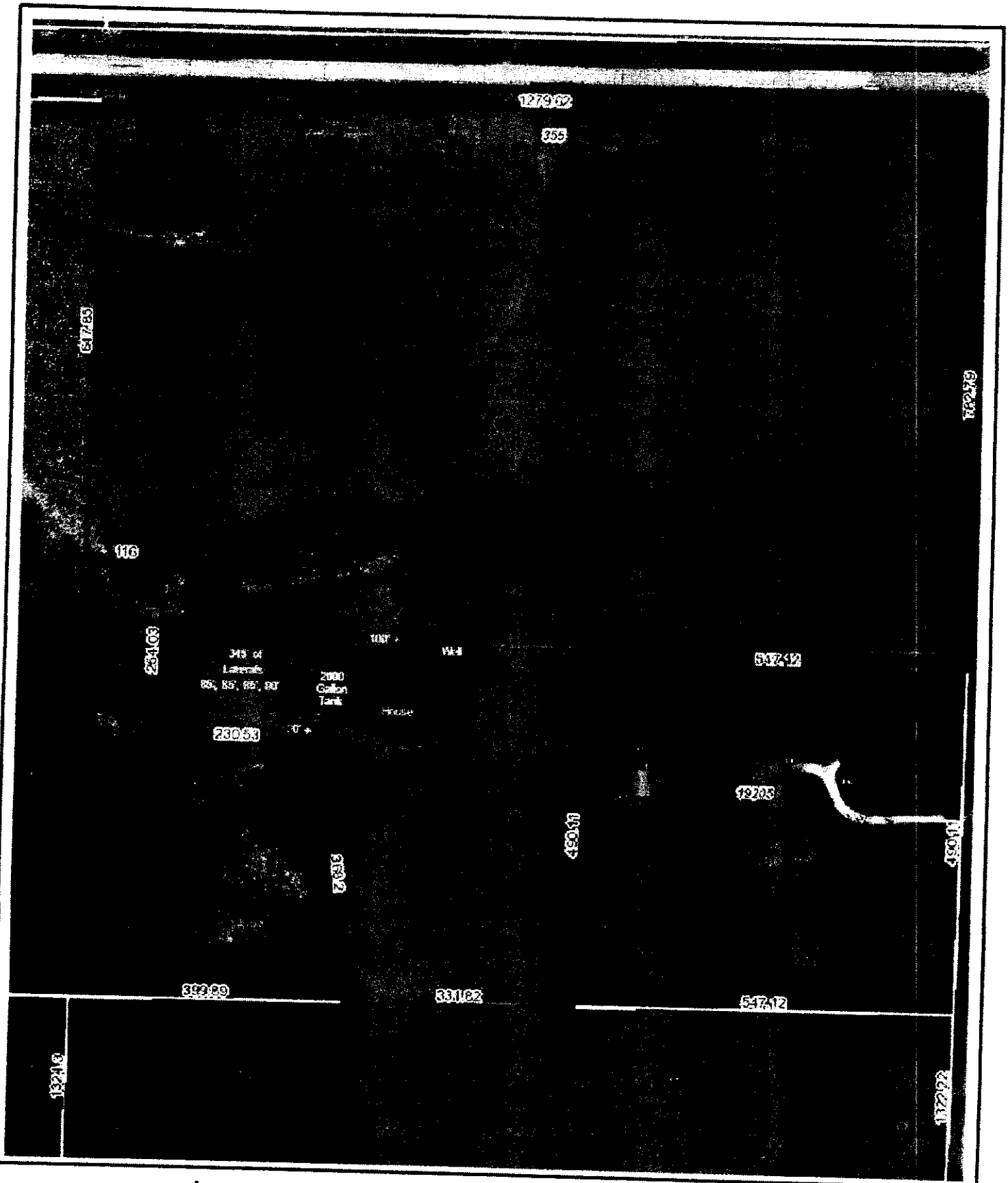
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor Eddie Turner Date 11/10/16

Installer _____ Date 11/17/16

Onsite Form C 12-06



Lancaster County/City of Lincoln GIS Map

Eddie Turner 402-304-0192 W Sprague Rd, Roca, NE 68430

N
W E
S

Printed: Nov 18, 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.

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. HS001370

System Type: Standard

Situs: No Site Address Specified

Issued: 11/22/2016

Expires: 11/22/2017

Description: S34, T8, R6, 6th Principal Meridian, LOT 52 NE

Owner: TURNER, EDDIE & MCCLANE, KARI
8910 TRUCHARD RD
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

RAYMOND CONTRACTING INC
13800 NW 70TH ST
RAYMOND, NE 68428

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

A

Permit Number
HS001370

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 Sprague Rd (no rural route) City Roca NE Zip 68430

Legal Description NE 34 8N 6E 52
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 08-34-200-006-000

Lot 52 - need to post Substitutes

B. Owner

Name: Eddie Turner Signature: Eddie Turner

Address: 8910 Truchard Rd City/State/Zip: Lincoln, NE 68526

Home Phone: 402-304-0192 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: 27.41
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 11/22/16
Date frwd 11/22/16
ACTION ☒ Approved ☐ Disapproved
Signature:

2. Supt. Bldg. Insp. or Village Clerk
Comments:
Date rec'd 11-21-16
Date frwd 11-21-16
ACTION ☒ Approved ☐ Disapproved
Signature: Eileen Miller
Clerk of the Board of Village of Sprague

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

Installation Final Written Approval
By: Doug Amen
Date: 11/22/16

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

Form A Updated: 1/13

SCANNED

C

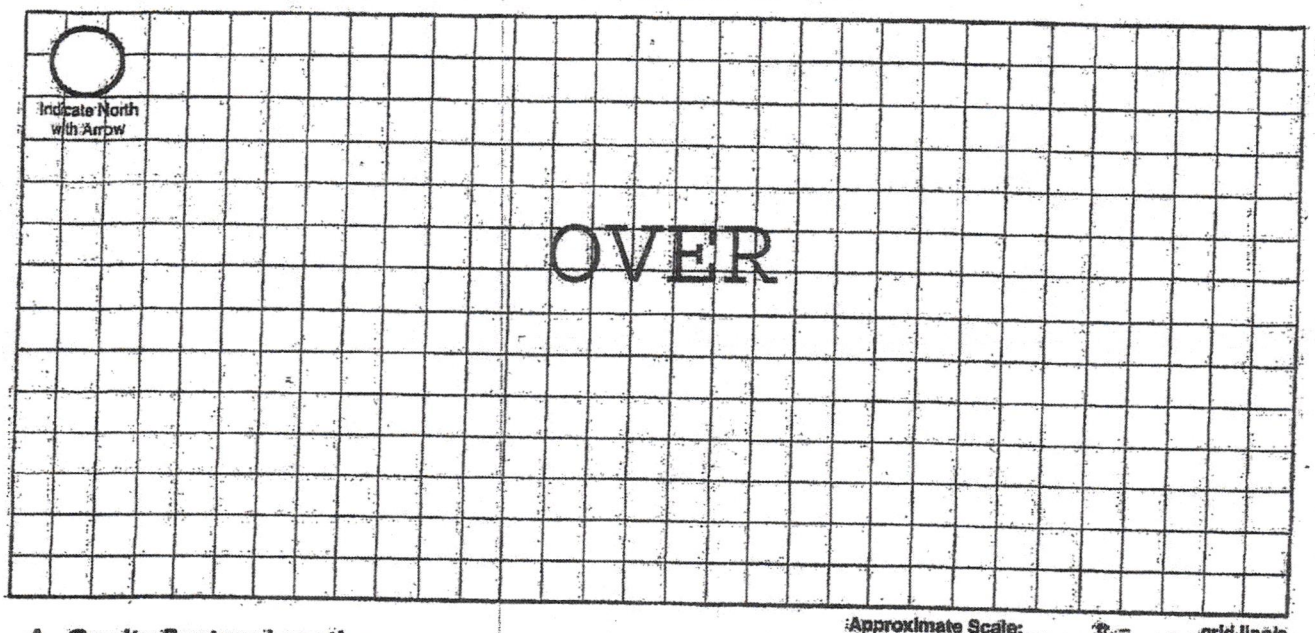
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number: HS001370

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) Sprague Rd City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Septic Tank Cap. 2,000 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 28 (min/inch = mpi) No. of Bedrooms 5 Soil Type Judson Silt Loam Land Slope 2-6 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved) Total Square feet of drainfield 1,250 sq.ft.

Total length of laterals 345 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 4 Width 40" No. of drop boxes 1 Distrubition 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 Eddie Turner Date 11/10/16

Installer [signature] Date 11/17/16

Onsite Form C 12/06

SCANNED



Lancaster County/City of Lincoln GIS Map

Eddie Turner 402-304-0192 W Sprague Rd, Roca, NE 68430

N
W E
S

Printed: Nov 18, 2016

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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: HS001370

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 PID = 08-34-200-009-000

Address or Legal Description or Parcel Identification Number (PID) 3551 W Sprague Rd. Roca, NE 68430

Owner: Eddie Turner Address 8910 Trueblood Rd, Lincoln NE 68526

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 75 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2,000
3. Depth to top of tank, below unfinished grade: 12-18 in.
4. Distance to:
   Well 80 ft. ↓
   Pressure line N/A ft
   Property Line 100 ft.
   Foundation 40 ft. ↓

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 54 ft. S

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☒ Chamberless ☐ Other
   Material brand and inside width of Chamberless: ADS ARC36 29"
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 90 ft. 85 ft. 90 ft. 85
4. Drainfield size: 1,268 sq. ft.
5. Distance to:
   Well 100 ft. ↓
   Pressure line N/A ft.
   Property line 100 ft. ↓
   Depth of Groundwater 6'7"

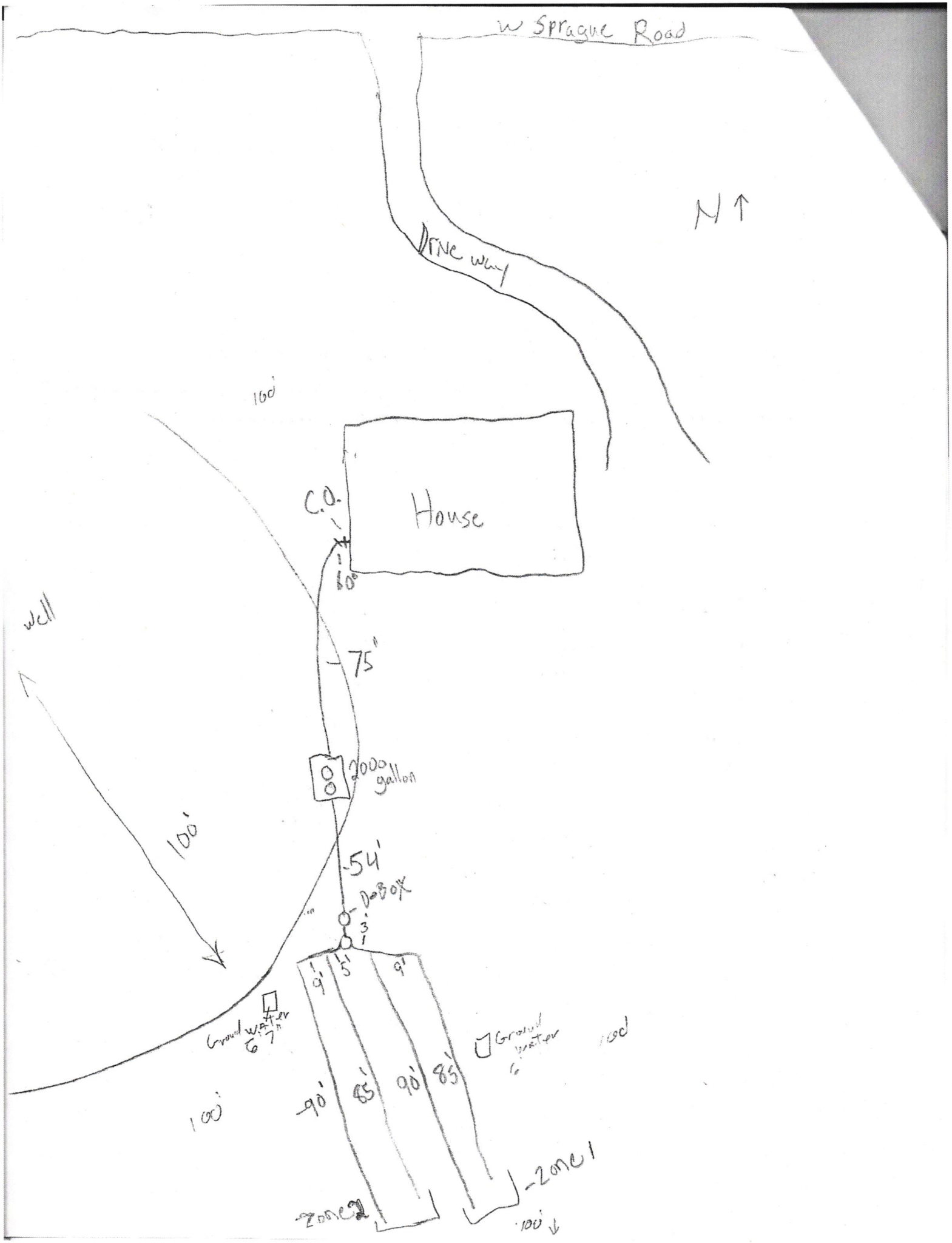
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No Partially

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: Ryan L. Jakowski Date: 4/17/17

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


W Sprague Road
N
Pine Way
160'
House
C.O.
60'
well
75'
2000 gallon
100'
54'
D-Box
3'
1'
9'
5'
9'
Ground water 6'7"
Ground water 6'
100'
90'
85'
90'
85'
Zone 1
Zone 2
100'