NOV 23 2016

Lincoln Lancaster County Health Department
[illegible]

HS001372

Existing Facility

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Submit Completed Application with Site Application

Please print or type

1. Onsite System Location

Address 17705 S 12th St City Roca Zip Code 68430

Legal Description NE 26 8N 6E 38
Quarter Section Township Range Block Lot

Tax Lot 08-26-200-003-000

2. Owner: Prairie Hill Learning Center
Mandie Cody Schadwinkel
Signature Mandie Cody Schadwinkel
Address 17705 S 12th St City, State Roca, NE 68430
Home Phone Work Phone 403-438-6668

3. Certified Installer
Name Lloyd Jakoubek, Raymond Contracting Inc
Signature Lloyd Jakoubek
Address 13800 NW 70th St City, State Raymond, NE 68428
Cell Phone 402-890-6009 or 402-783-2663

4. Engineer [illegible]
Designer Name [illegible]

5. This System Will Serve a

Residence [illegible] Bedroom(s) [illegible] Design Flow 12.32
Design Capacity

x Commercial, Church, Other Public Facility School Design Flow Allowance in Gal. 700
Type of Establishment x Restaurant [illegible]
Based on metered water usage.

Approved Private Wastewater Treatment System Design Engineer (PE)
Health Department
Signature
Date
Comments

Date Site Visited by Health Department
Comments

Date of Quality Engineer Visit
Comments

Fee Amount Paid 11/23/16 $ 345
Receipt # LC VISA

Date

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

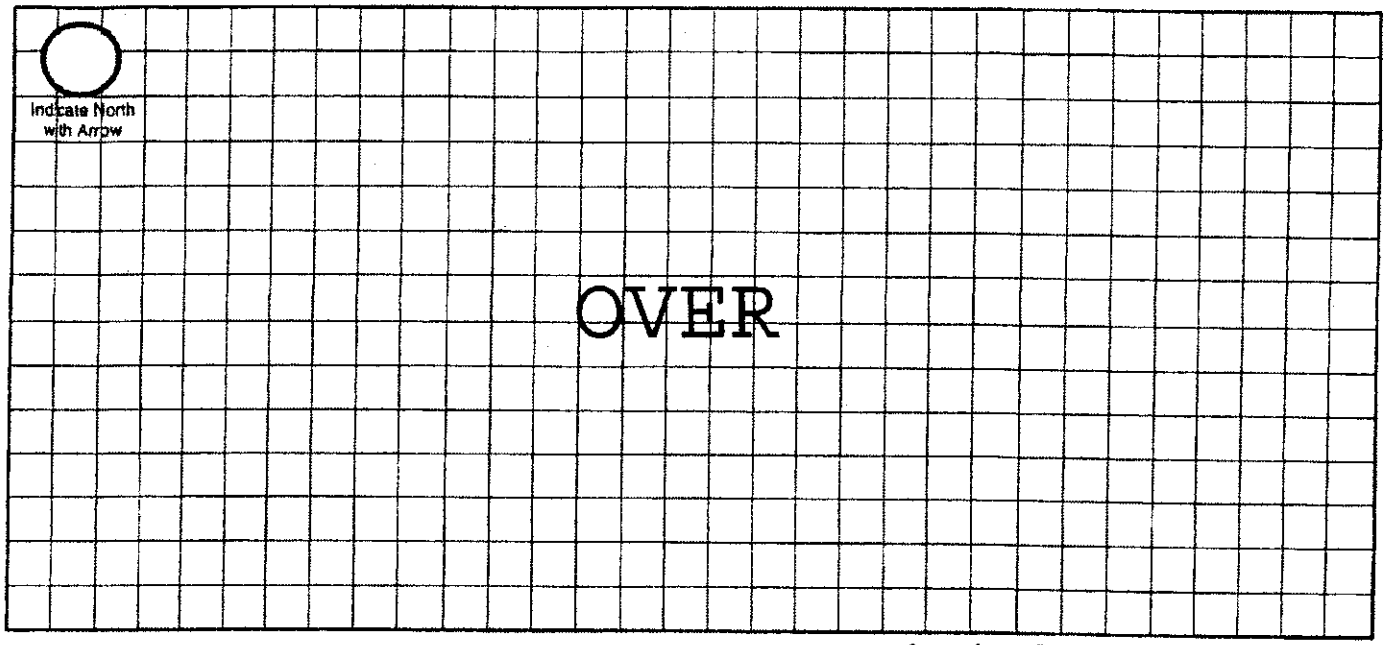
C

Permit Number: HS001372

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) 17705 S 12th St City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____sq.ft.

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

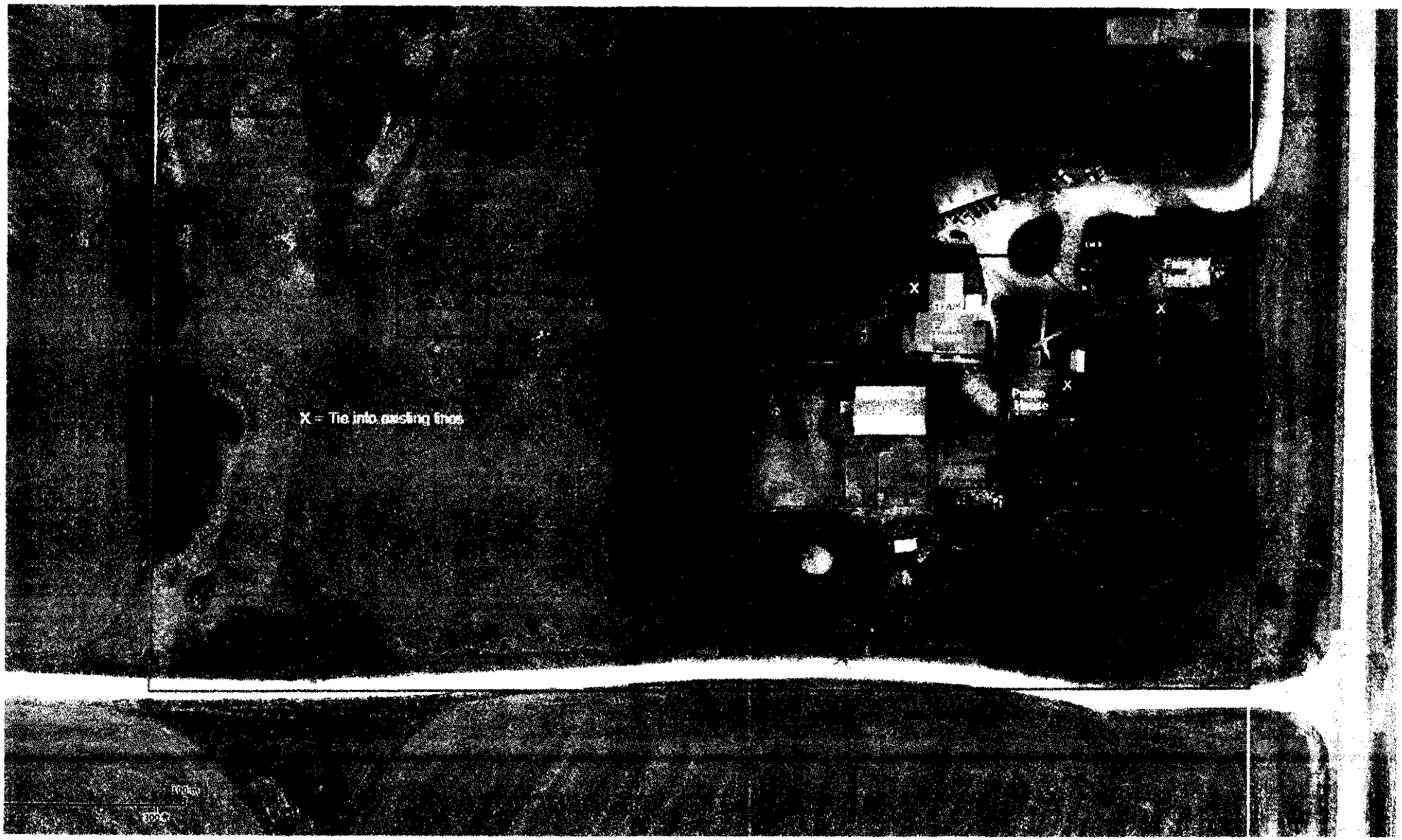
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

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 Existing Buildings Date _____

Installer Kevin L. Johnston Date 11/10/2010



N
W E
S

Lancaster County/City of Lincoln GIS Map

Prairie Hill Learning Center 17705 S 12th St, Roca, NE 68430 402-438-6668

Printed: Nov 10, 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. HS001372

System Type: Lagoon

Situs: 17705 S 12 ST, RURAL, NE

Issued: 11/30/2016

Expires: 11/30/2017

Description: S26, T8, R6, 6th Principal Meridian, LOT 38 NE

Owner: PRAIRIE HILL LEARNING CENTER
17705 S 12 ST
ROCA, NE 68430

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
13500 NW 70 ST
RAYMOND, NE 68425

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

Exhibit 6

Permit Number: HS001372

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 12/14/16 Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 1705 S 12th City _____

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 ☒ No ☐
Lagoon floor is level	Yes ☒ No ☐
Lagoon is equipped with a depth gage/concrete slab — P/O	Yes ☐ 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 ☐ No ☒ *Note
Inside slope not steeper than three horizontal to one vertical	Yes ☒ No ☐
Minimum width of the top of the dike shall be 4 feet	Yes ☒ No ☐
Fence installed	Yes ☐ No ☒

Top of the Dike 86 Bottom of Lagoon ____ Design Flow 700

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.

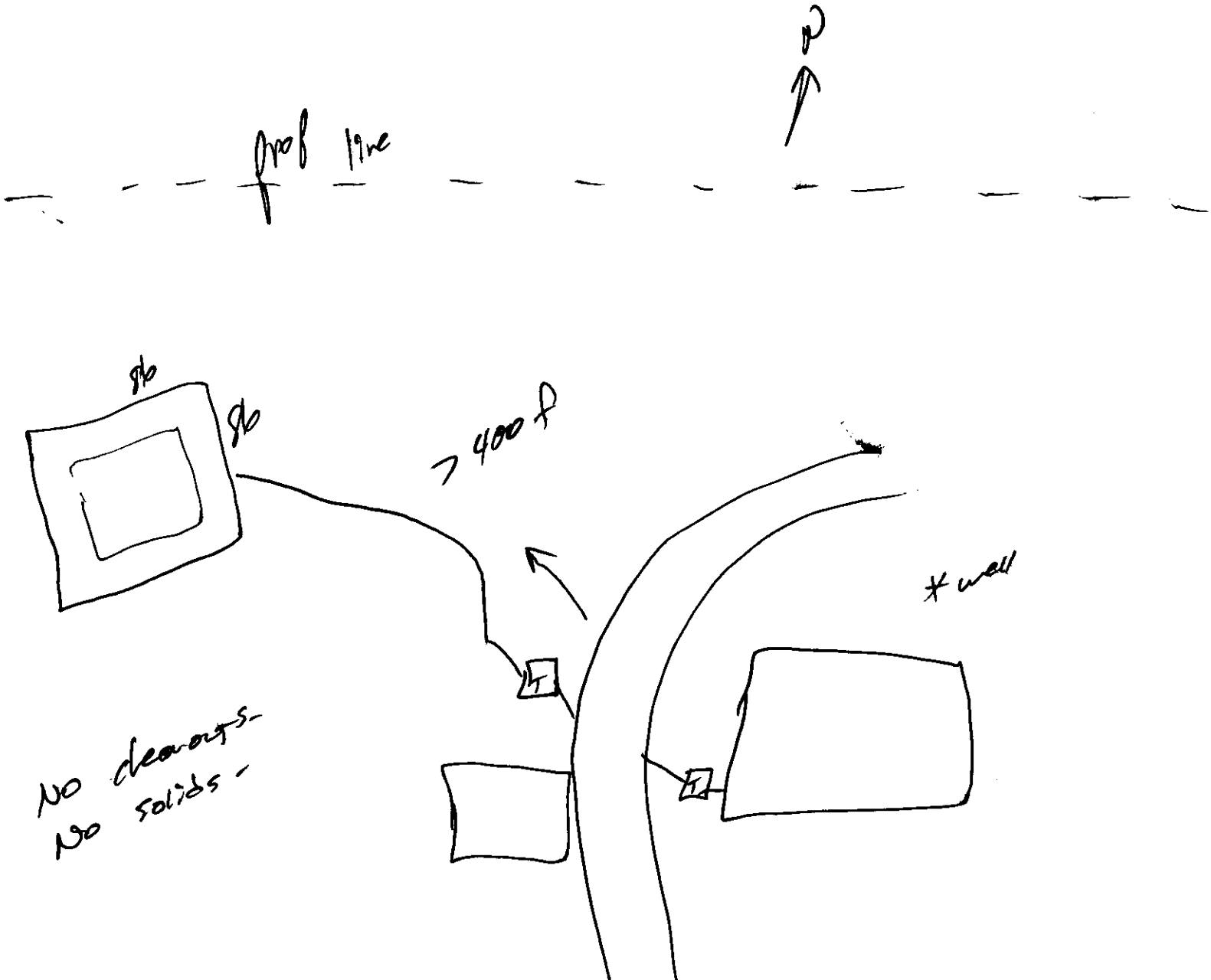
Geographical Coordinates to 6 Decimals: _____

Dike North side

Comments:

*Tanks were use to collect solids - water only -

Inspections prior to Final Approval
Initial 12/14/16 Date DH
Follow-Up 1/4/17 Date DH
Follow-Up _____ Date _____
Installation Final Written Approval
By _____
Date 2/23/17


prof line
P
sb
sb
> 400 f
* wall
No cleanouts-
No solids-

NOV 23 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

A

Permit Number
HS001372

Existing Facility

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: 17705 S 12th St (no rural route) City: Roca NE Zip: 68430

Legal Description: NE (1/4) 26 (1/4) Section 8N Township 6E Range ____ Subdivision ____ Addition ____ Block 38 Lot

PID: 08-26-200-003-000

B. Owner

Name: Prairie Hill Learning Center, Mandie Cody Schadwinkel Signature: Mandie Cody Schadwinkel

Address: 17705 S 12th St City/State/Zip: Roca, NE 68430

Home Phone: ____ Work Phone: 403-438-6668

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature: Lloyd J. Jakoubek

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 ____ Whirlpool Bathtub? ☐ Yes ☐ No Total Acres: 12.32
Garbage Grinder? ☐ Yes ☐ No

☒ Commercial Establishment/Other Facility Specify: School Design flow in gallons per day: 700

Type of Wastewater: ☒ Domestic ☐ Non-Domestic Based on metered water usage.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-31

1. Health Department
Site visits: 11/30/16 11/30/16
Comments: *Lagoon & Line Partial 17A
ACTION ☒ Approved ☐ Disapproved
Signature: [signature]

2. Supt. Bldg. Insp. or Village Clerk
Comments: ____ Date received ____ Date mailed ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

3. City or County Engineer
Comments: ____ Date received ____ Date mailed ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

Installation Final Written Approval
By ____
Date ____

Business Office Use Only
Date Received 11/23/16 Amount Paid $ 395
Receipted By LC Cash/Check No VISA

* Lagoon - ex13472

SCANNED

C

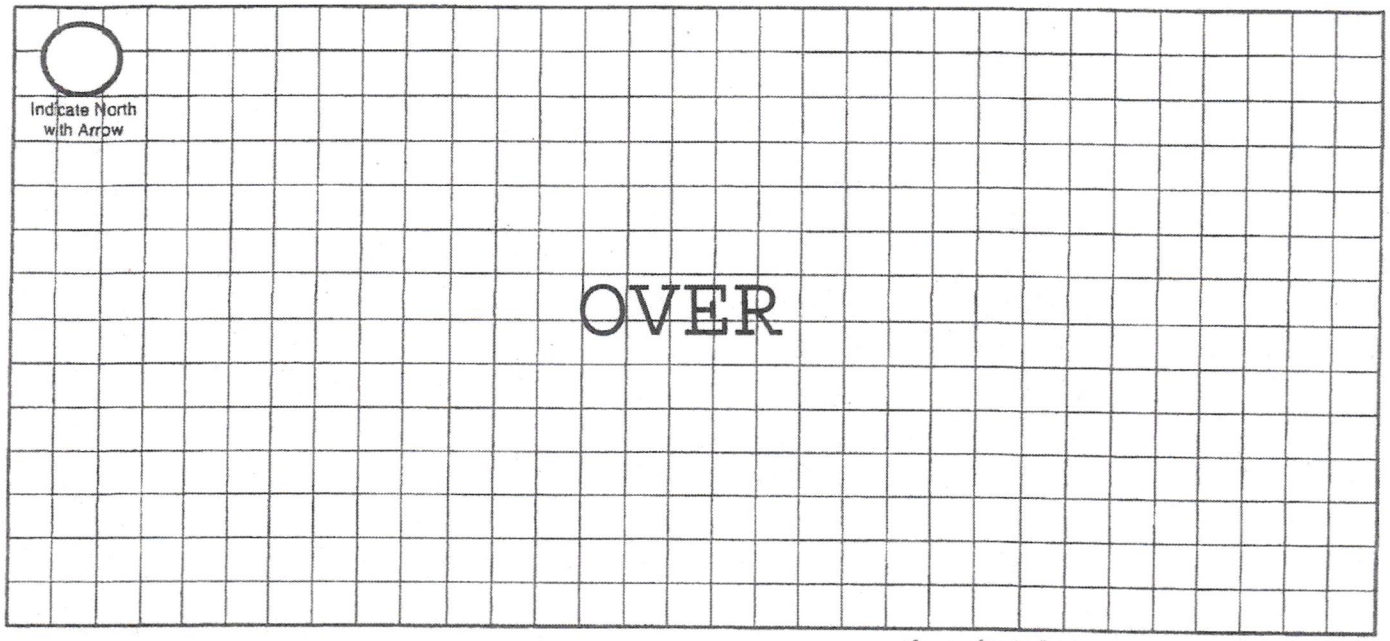
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F. Required Signatures

Home Building Contractor Existing Buildings Date _____

Installer Kirk Jakubek Date 11/10/2020



Lancaster County/City of Lincoln GIS Map

Prairie Hill Learning Center 17705 S 12th St, Roca, NE 68430 402-438-6668

N
W E
S

Printed: Nov 10, 2016

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