DEC 5 2016

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

**A**

Permit Number
HS001382

# 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 TBD West Van Dorn (no rural route) City Denton, NE Zip

Legal Description NE 1/4 (1/4) 4 (Section) 9 (Township) 5 (Range) Lot 35 (Subdivison) LCN (Addition) (Block) (Lot)

PID 03-04-200-005-000

## B. Owner

Name Craig Johnson Signature Craig Johnson by Bob Benes

Address 1516 Sioux St City/State/Zip Lincoln, NE 68502

Home Phone 505-2696 Work Phone

## C. Certified Installer

Name: Bob Benes Signature

Address 1633 Normandy Ct City/State/Zip Lincoln, NE 68512

Work Phone 402-416-9660

## 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 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 2.01

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
Date rec'd
Date frwd
**ACTION** ☐ Approved ☐ Disapproved
Signature
Comments

**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 12-5-16 Amount Paid $395.00
Received By SB Cash/Check No. 21538

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

B

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

Permit Number: HS001382

# Sewage Disposal System
## Soil Absorption Test Data Report
## Annex to Application

PLEASE PRINT OR TYPE

**System Location** (Indicate correct number and street)

Address TBD W. VAN DORN (no rural route) City Denton NE, Zip

Owner Craig Johnson Addresss 1516 Sioux St.

Soil Type (SCS): Pawnee Percolation Rate: 30 min./inch

Date of Tests 11-29 to 11-30 Weather: Precipitation DRY Temperature 45°

## Percolation Test Data Table

| A. | B. | C. D. E. F. Pre-Saturation Period | | | | G. H. I. J. K. Percolation Readings | | | | | 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) | Water Lev (in.) | Date (Mo/Da) | Time (Hr/Min) | Elapsed Time (Min) | Water Level Drop (in) | Percolation Rates (Min/in) |
| 1 | 36 | 11 29 | 11:30 | 11:30 | 10 AM | M-31 | 16:10 | 19 | 11-30 | 10:40 | 30 | 1" | 30 |
| 2 | | | | | | | :11 | 22 | | :41 | | 1 1/2" | 20 |
| 3 | | | | | | | :12 | 24 | | :42 | | 1" | 30 |
| 4 | | | | | | | :13 | 18 | | 43 | | 1" | 30 |
| 5 | | | | | | | :14 | 20 | | 44 | | 3/4" | 40 |
| 6 | | | | | | | :15 | 22 | | 45 | | 1" | 30 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Sum of Percolation Rates: 180
Average of Rates: 30
Rate Used for Calculation: 36

**Person Conducting Percolation Tests**

Name: Bob Beneš
Phone: 416 9000
Address 1633 Normandy Dr.
Lincoln, NE 68516

DO NOT WRITE BELOW THIS LINE

**Reviewing Action**

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-95

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

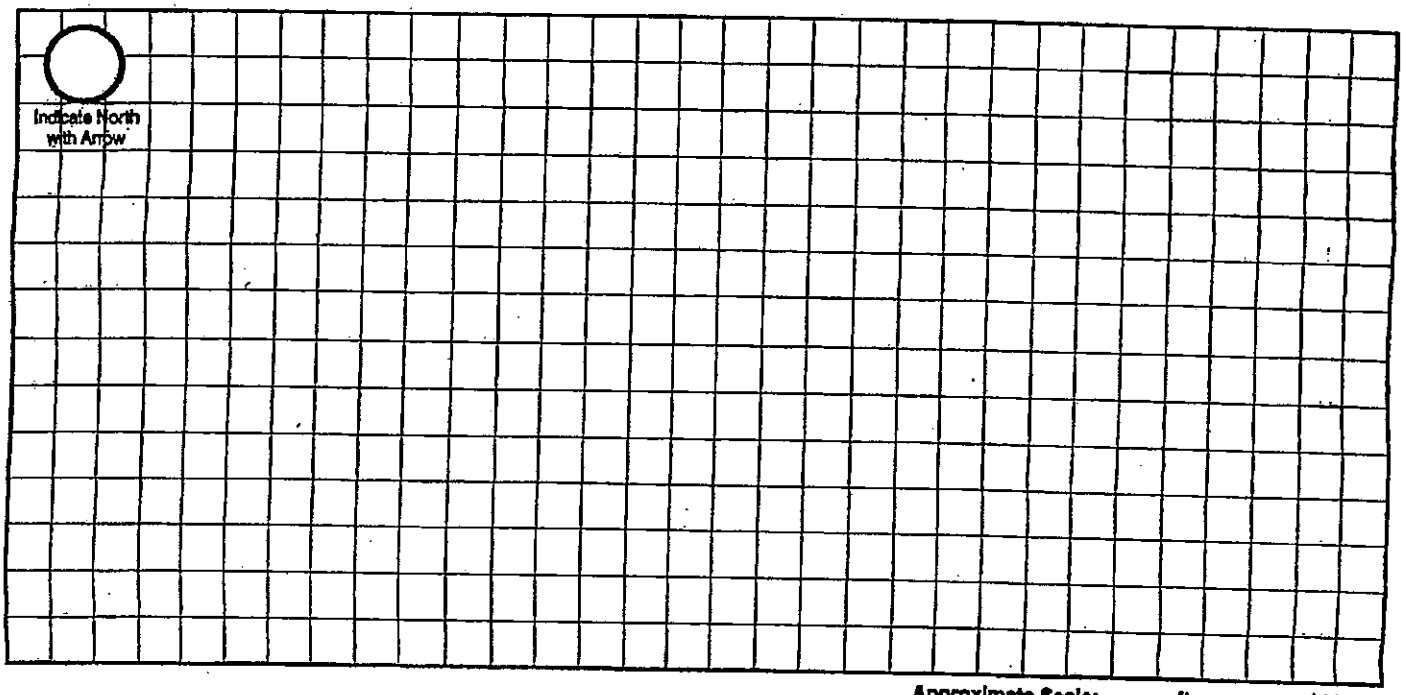
C

Permit Number: HS001382

# 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) TBD W VAN Dorn City Denton NE, Zip _____

### B. Proposed Septic Tank/s

Septic Tank Cap. 1250 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 30 (min/inch = mpi) No. of Bedrooms 3 Soil Type Pawnee Land Slope 2 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 500 sq.ft. USING 750

Total length of laterals 207 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches 2 Width 3 No. of drop boxes 0 Distrubtion Box 1

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 _____ Date 12-1-16

Installer _____ 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. HS001382**

**System Type:** Standard

**Situs:** No Site Address Specified

**Description:** S4, T9, R5, 6th Principal Meridian, LOT 35 NE

Issued: 12/6/2016

Expires: 12/6/2017

**Owner:** JOHNSON, CRAIG R & JEANNE M
REVOCABLE TRUST
13000 S 224 CIR
GRETNA, NE 68028

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

ASPEN BUILDERS
1633 NORMANDY COURT SUITE B
LINCOLN, NE 68512

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

OK JR 6/8/17

Exhibit 5

Permit Number: HS001382

# Onsite Wastewater Treatment System

## Inspection Sheet

Date 6/7/17 Legal Description ¼ ¼ 4/9/5 Lot 35 Section/Township/Range

**Onsite System Location**

Address (no rural route) 10265 a 10305 W. Van Dorn 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 825 Sq. Ft. Tank Size 1,250 gals

Total length of laterals 227' Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) _____

No. of Absorption Laterals 2 Width 2.625 Factor No. of Drop Boxes _____ 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 _____

Lateral #2 _____ Lateral #4 _____

**Comments:**

Inspections prior to Final Approval
Initial _____ Date 5/5/17

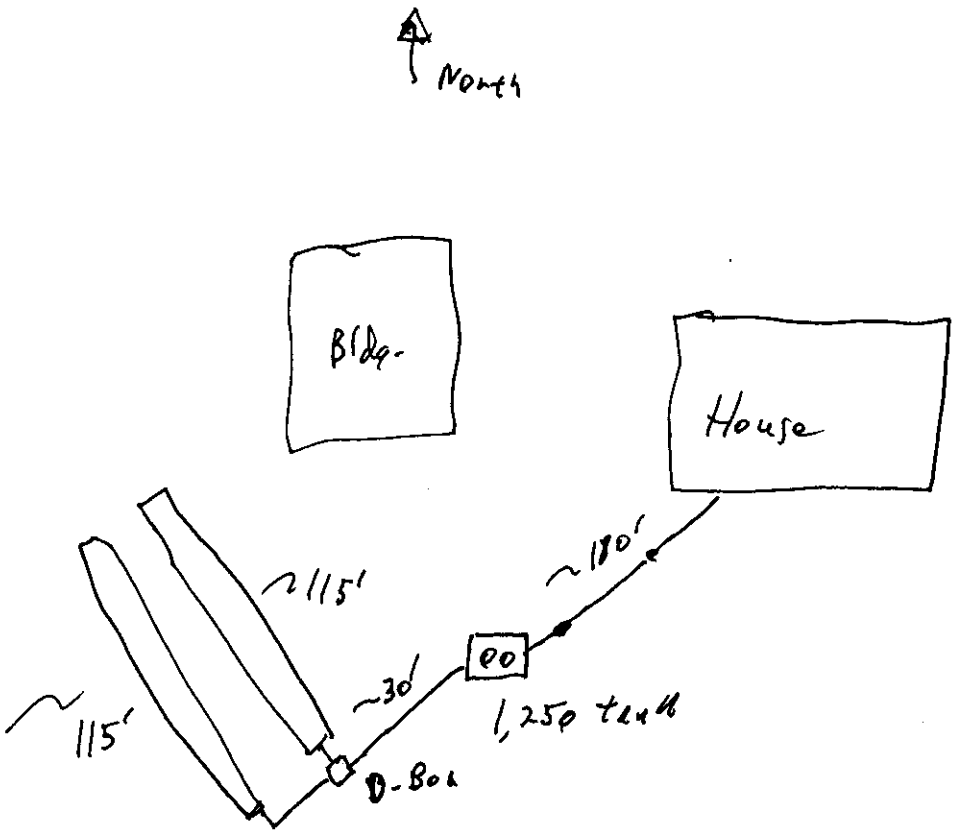
Follow-Up _____ Date _____

Follow-Up _____ Date _____

**Installation Final Written Approval**
By _____

Date 6/7/17

**Field Note Drawing (See Reverse Side):**


North
Bldg.
House
~115'
~115'
~30'
~180'
EO
1,250 feet
D-Box

## Nate C. Hartman

**From:** James L. Plouzek
**Sent:** Tuesday, December 06, 2016 11:22 AM
**To:** Nate C. Hartman
**Subject:** Lot 35, Section 4, Township 9 North, Range 5 East

We have reviewed the subject lot for flood plain conflicts. Having found no conflicts, we recommend the subject lot be approved for sewer improvements.

Jim Plouzek

## Nate C. Hartman

**From:** Todd A. Stutzman
**Sent:** Tuesday, December 06, 2016 10:08 AM
**To:** Nate C. Hartman
**Subject:** Lot 35

Nate,

Lot 35 NE located in S4, T9, R5 is a buildable lot.

Todd Stutzman
Plan Examiner II
402-441-7097
555 S 10th Street, Room 203
Lincoln, NE 69508