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

A

Permit Number
HS001395

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 9578 West Stagecoach City Crete, NE Zip 68333
(no rural route)

Legal Description S½ SW 34 8 5
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 02-34-300-002-000 SB *Approx. Address (If to be determined)

B. Owner

Name Tom Vlasin Signature

Address 27101 Nottingham dr. City/State/Zip Waterford WI 53185

Home Phone 262-488-4429 Work Phone

C. Certified Installer

Name: Brian Probyl Signature

Address 135 E 23 City/State/Zip Crete Ne 68333

Work Phone 402-826-3045

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 4 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 80
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

1. Health Department
Site visits 2/21/17 Date rec'd
Date frwd
Comments
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 2/21/17

Business Office Use Only
Date Received 2-22-17 Amount Paid $395.00
Received By SB Cash/Check No. 6361
+$10 cash

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

Form A Updated: 4/15

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

B

Permit Number: HS001395

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 9578 W Stagecoach Rd (no rural route) City Crete NE, Zip 68333

Owner Tom Vlasin Address 27101 Nottingham drive

Date of Tests 6-30 to 7-1 Weather: Precipitation none Temperature 95°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop: Last 30 mins of 4 hr or last 10 mins of 1 hr					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	27	6-30	3:00	7-1	4:00	7-1	4:00	6	7-1	4:30	30	5/8	48
2	30	↓	↓	↓	↓	↓	↓	6	↓		↓	1/2	60
3	31							6				11/16	45
4	28							6				11/16	45
5	28							6				5/8	48
6	26							6				5/8	48
								6					
								6					

Person Conducting Percolation Test

Name: Brian Pribyl
Phone: 402-826-3045
Address 135 E 23 Crete, NE 68333

Sum of Percolation Rates: 292
Average of Rates: 48.67
Rate Used for Calculation: 40-50 mpi

Soil type (NRCS Maps/Other)

Groundwater Depth

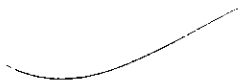
DO NOT WRITE BELOW THIS LINE

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

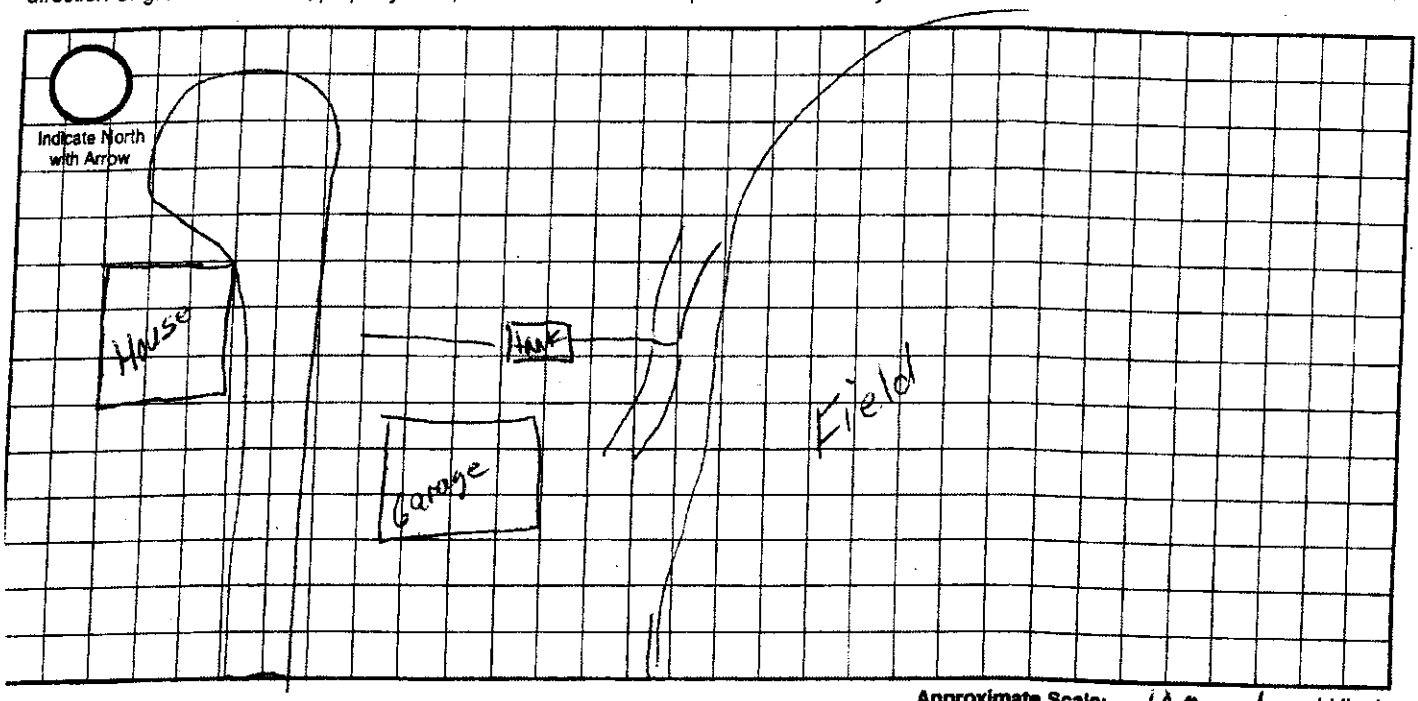
C

Permit Number: HS661395

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: 10 ft. = 1 grid line/s

A. Onsite System Location

Address (no rural route) 9578 W Stagecoach Rd City Crete NE, Zip 68333

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 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 48 (min/inch = mpi) No. of Bedrooms 4 Soil Type clay Land Slope 5 %

☑ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,320 sq.ft.

Total length of laterals 400' Type of distribution: ☐ Perforated pipe ☐ Half-Round ☑ Chamber ☐ Other

No. of absorption trenches 4 Width 40.5' No. of drop boxes 1 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 ☑	☐
agoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

me Building Contractor Ben Pringle Date 2/17/17

staller _____ Date _____

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

Exhibit 5

Permit Number: HS001395

Onsite Wastewater Treatment System

Inspection Sheet

Date 2/21/17 Legal Description ____ ¼ ¼ 34/8/5 Section/Township/Range

Onsite System Location

Address (no rural route) 9578 West Stagecoach City Crete

Owner Tom Vlasin Address 27101 Nottingham Dr Waterford, Wisc.

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 1,320 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 400' Type of Distribution: ☒ Chamber ☐ Perforated Pipe ☐ Other (describe) ____

No. of Absorption Laterals 4 Width 40.5 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 ____ N/A

Lateral #1 ____ Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial DOC Date 2/21/17

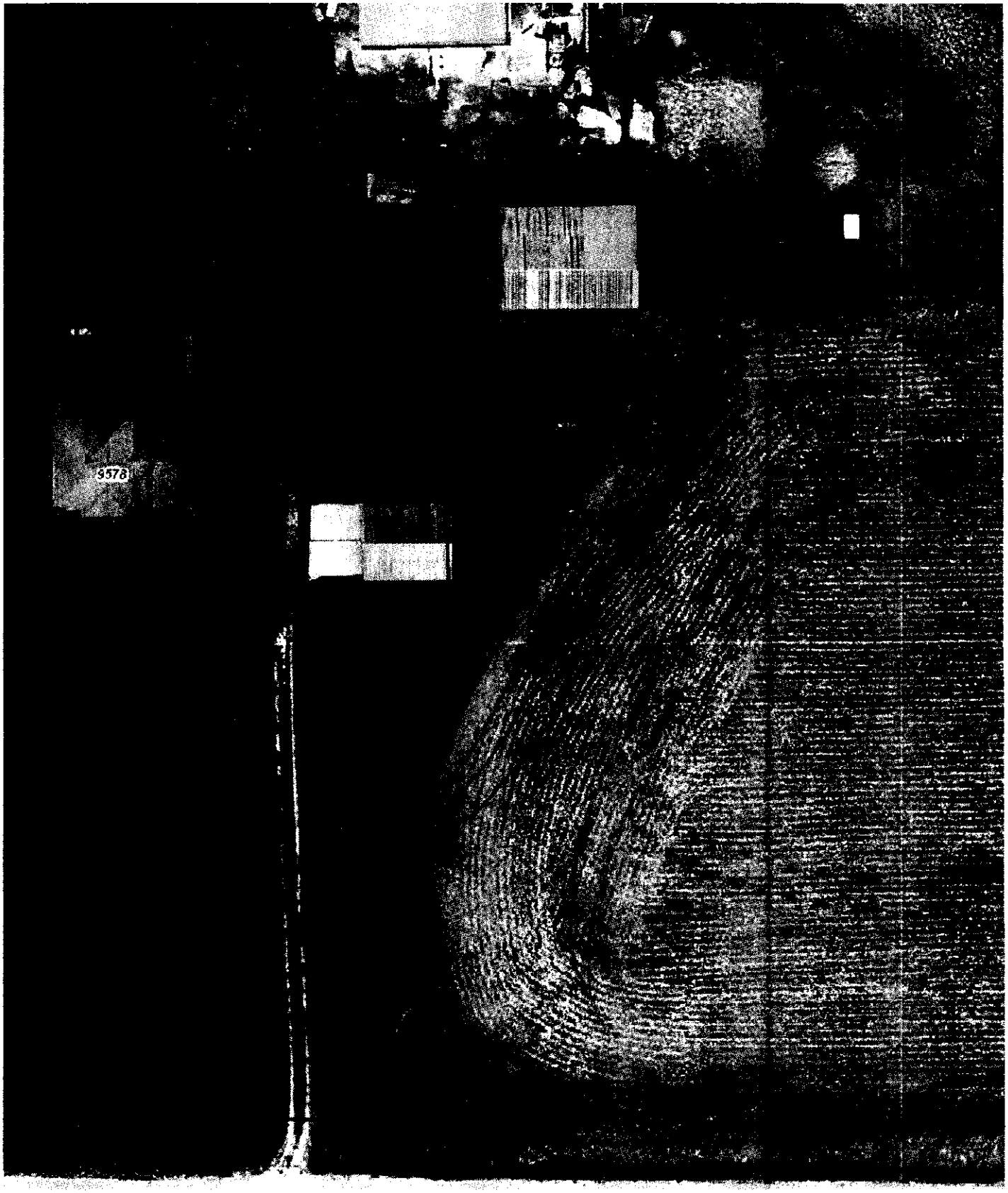
Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Thies
Date 2/21/17

Field Note Drawing (See Reverse Side):

HS001395



Lancaster County/City of Lincoln GIS Map

N
W E
S

Printed: Feb 21, 2017

Vlasic - 3578 West Stagecoach

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. HS001395

System Type: Standard

Situs: 9578 W STAGECOACH RD, RURAL, NE

Issued: 2/23/2017

Expires: 2/23/2018

Description: S34, T8, R5, 6th Principal Meridian, S1/2 SW

Owner: VLASIN, THOMAS R
27101 NOTTINGHAM DR
WATERFORD, WI 53185

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

PRIBYL PLUMBING AND HEATING INC
1475 BLUE ACRES
CRETE, NE 68333

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

SCANNED

A

Permit Number
HS001395

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 9578 West Stagecoach City Crete, NE Zip 68333
(no rural route)

Legal Description S ½ SW 34 8 5
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 02-34-300-002-000 SB *Approx. Address (If to be determined)

B. Owner

Name Tom Vlasin Signature

Address 27101 Nottingham dr. City/State/Zip Waterford WI 53185

Home Phone 262-488-4429 Work Phone

C. Certified Installer

Name: Brian Rubyl Signature

Address 135 E 23 City/State/Zip Crete Ne 68333

Work Phone 402-826-3045

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 4 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 80
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

1. Health Department
Site visits 2/21/17
Comments
Date rec'd 2/23/17
Date frwd 2/23/17
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 Doug Anderson
Date 2/21/17

Business Office Use Only
Date Received 2-22-17 Amount Paid $395.00
Received By SB Cash/Check No. 6361
$10 cash

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

Form A Updated: 4/15

* Existing property

SCANNED

HS001395



Lancaster County/City of Lincoln GIS Map

N
W E
S

Printed: Feb 21, 2017

Vlasin - ~~3578~~ 9578 West Stagecoach

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.