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

JUN 1 2 2017

A

Permit Number
#S001473

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* 3501 W RAYMOND RD (no rural route) City RAYMOND, NE Zip 68428

Legal Description ____ OAK VALLEY ESTATES 3 2

1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 12-05-103-002-000 *Approx. Address (If to be determined)____

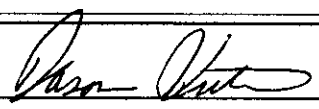
B. Owner

Name BRAD HARTMANN Signature____

Address 3501 W RAYMOND RD City/State/Zip RAYMOND, NE 68428

Home Phone____ Work Phone____

C. Certified Installer

Name: JASON KUBIK Signature 

Address 105 LOCUST ST City/State/Zip HICKMAN, NE 68372

Work Phone 402-475-2462

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 3.02
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____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____
Comments____

2. Supt. Bldg. Insp. or Village Clerk
Comments____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____

3. City or County Engineer
Comments____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____

Installation Final Written Approval
By____
Date____

Business Office Use Only
Date Received 6-12-17 Amount Paid $395
Received By SB Cash/Check No. 2935

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: HS001473

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

PID # 12-05-103-002-000

Onsite System Location

Address 3501 W Raymond Rd (no rural route) City Raymond NE, Zip 68428

Owner Brad Hartmann Address

Date of Tests 11/17/16 to 11/18/16 Weather: Precipitation 0 Temperature 40

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	30	11/17	11 am	11/18	9:45	11/18	1:15	6	11/18	1:45	30	3/4	40
2	30	11/17	11	11/18	9:45	11/18	1:15	6	11/18	1:45	30	1/2	60
3	30	11/17	11	11/18	9:45	11/18	1:15	6	11/18	1:45	30	3/4	40
4	30	11/17	11	11/18	9:45	11/18	1:15	6	11/18	1:45	30	3/4	40
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-475-2402
Address 105 Locust St
Hickman NE 68372

Soil type (NRCS Maps/Other) 7418 Morrill, 7507 Pawnee
Groundwater Depth +12

Sum of Percolation Rates: 180
Average of Rates: 45
Rate Used for Calculation: 59

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: 402-441-8643

D

Permit Number: HS001473

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) 12-05-103-002-000

Owner: BRAD HARTMANN Address 3501 W RAYMOND RD, RAYMOND NE 68428

A. Wastewater Piping

1. Material: SCH 40 PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 56 ft.

B. Septic Tank

1. Material PLASTIC
2. Capacity: (2) 1000 GALLON TANKS
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well NA ft.
   Pressure line +25 ft
   Property Line +25 ft.
   Foundation 56 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 17 ft. SW

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☑ Perforated Pipe ☑ Chamberless ☑ Other
   Material brand and inside width of Chamberless: INFILTRATOR QUICK 4 PLUS 29
2. Number of Laterals: 4
3. Length of each lataral (linear): ft. 128 ft. 128 ft. 116 ft. 116
4. Drainfield size: 1769 sq. ft.
5. Distance to:
   Well NA ft.
   Pressure line +25 ft.
   Property line +25 ft.
   Depth of Groundwater +12

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.

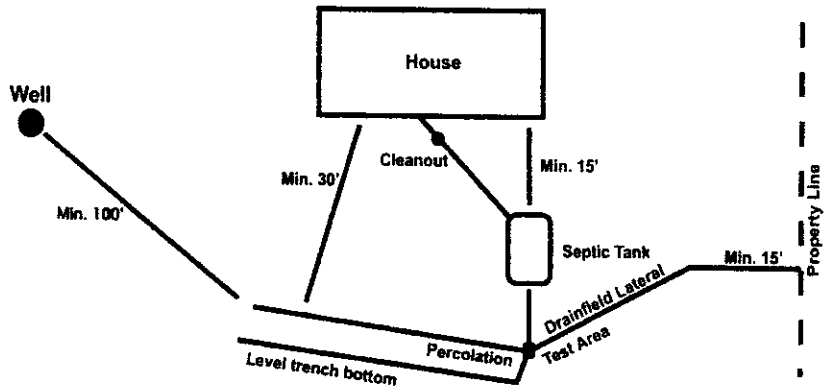
Certified Professional Signature: _____ Date: 6/7/17

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

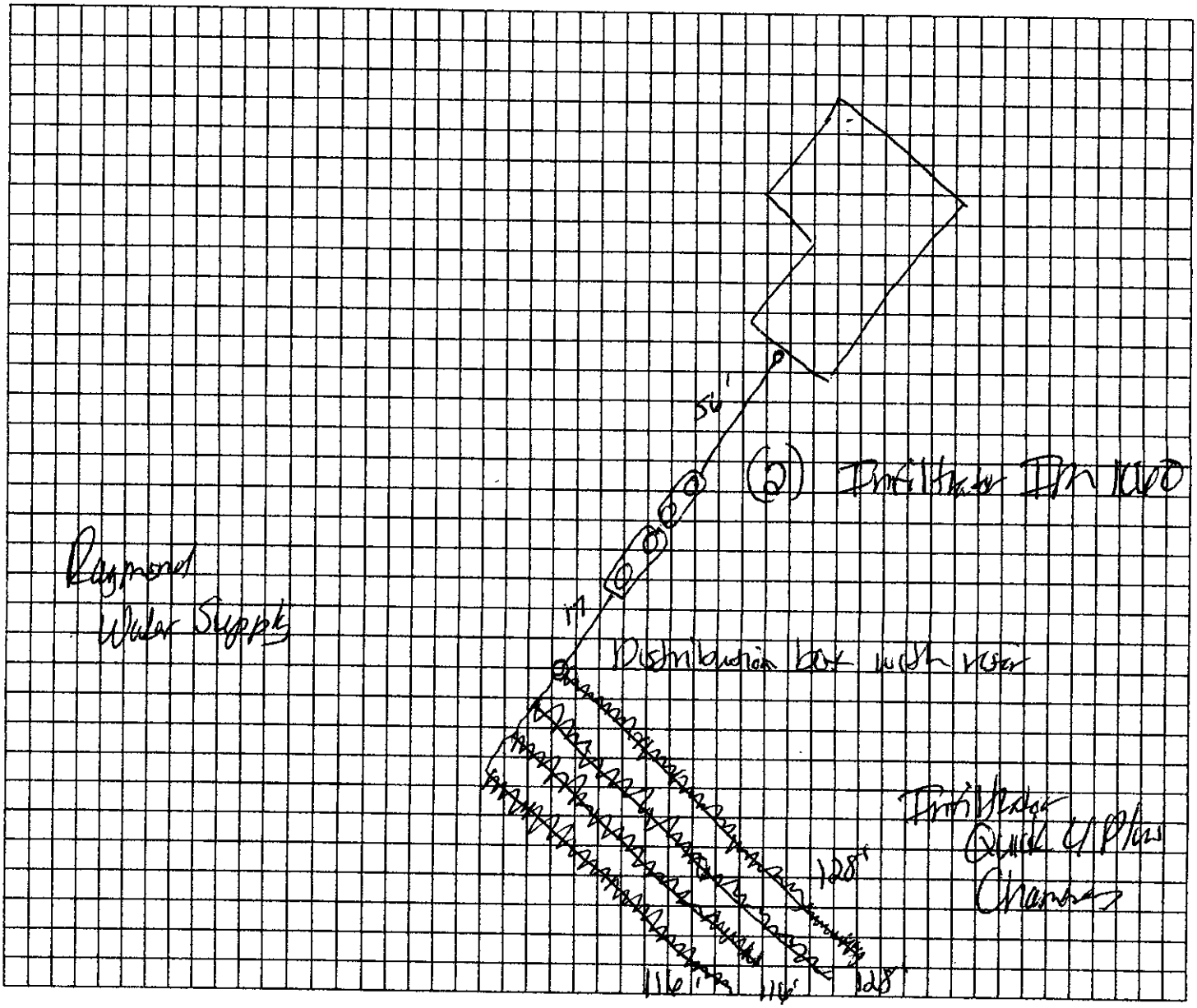
HS00473

Indicate North
w/ Arrow Here:

Onsite Wastewater System Design (Example)



*Note-If Lagoon, show all applicable dimensions



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. HS001473

System Type: Standard

Situs: 3501 W RAYMOND RD, RURAL, NE

Issued: 6/15/2017

Expires: 6/15/2018

Description: OAK VALLEY ESTATES, BLOCK 3, Lot 2

Owner: HARTMANN, BRAD L & LYNDSAY M
3501 W RAYMOND RD
RAYMOND, NE 68428

Charlotte Burke, MS, RD, Interim 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.

Charlotte Burke, MS, RD
Interim Health Director

SOUTHWICK LIQUID WASTE
105 LOCUST STREET
HICKMAN, NE 68372