JUL 24 2017

HS001502

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☒ ALTER ☐ REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 11850 N 56th

   Legal Description of Property: Township:_____ Range:_____ Section:_____

   Block_____ Lot_____ SubDivsion BUSINESS Add: S 11850 N 56 ST

   *Parcel ID ___-PQ53806-_____ (i.e. 99-99-999-999-999)

2. **Property use:** ☐ Residential ☒ Commercial ☐ Other use (Describe: _____)
   Number of bedrooms_____ Does the system have a: ☐ Garbage Grinder ☐ Large Capacity Tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** Add lateral

5. **Current Type of Lateral-** ARC 36 **Current Linear Ft. Of Lateral -** 200

   Current Tank Gallonage- 1000

6. Print Name Michael P. Dietze Address PO Box 116 Waverly, NE Phone: 402 786 5620

Applicant Signature: Michael P Dietze

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

Date received____/____/____ REVIEW: ☐ Approved ☐ Disapproved By:_____

Comments (if any):_____

Site visits
Date ____/____/____ By_____
Date ____/____/____ By_____

Installation final written approval
Date____/____/____ By_____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only

Received: Date: 7/24/17 Amount 215.00 Check No. 33393 Initials LC

Revised 4/8/13

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

B

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE 5635 Waverly Rd.

System Location (Indicate correct number and street)

Address 11850 North 56th (no rural route) City LINCOLN NE, Zip 68504

Owner Restore A Muscle Car Addresss

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

Date of Tests 11/23 to 11/24 Weather: Precipitation Temperature

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	11/23	1:00	11/24	9:00	11/24	12:30	30 1/8	11/24	1:00	30	3/4	60
2	37	11/23	1:00	11/24	9:00	11/24	12:30	32 1/2	11/24	1:00	30	3/4	40
3	36	11/23	1:00	11/24	9:00	11/24	12:30	32	11/24	1:00	30	1/2	40
4	36	11/23	1:00	11/24	9:00	11/24	12:30	30 1/8	11/24	1:00	30	3/4	40
5	38	11/23	1:00	11/24	9:00	11/24	12:30	32 3/4	11/24	1:00	30	1/2	60
6	36	11/23	1:00	11/24	9:00	11/24	12:30	31 1/2	11/24	1:00	30	3/4	40

Person Conducting Percolation Tests

Name: Mike Dietz

Phone:

Address PO Box 116

Waverly NE 68462

Sum of Percolation Rates: 280

Average of Rates: 47

Rate Used for Calculation: .212

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

JUL 24 2017

SCANNED

HS001502

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Legal Description of Property: Township:_____ Range:_____ Section:_____

Block_____ Lot_____ SubDivsion BUSINESS Add: S 11850 N 56 ST

***Parcel ID** ___ - P0538106 - _____ (i.e. 99-99-999-999-999)

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☐ Municipal Code 24.38 ☑ County Resolution Number 02-30

Date received 7/31/17 REVIEW: ☑ Approved ☐ Disapproved By:_____

Comments (if any):_____

Site visits
Date 08/22/17 By DV
Date ___/___/___ By_____

Installation final written approval
Date 10/18/17 By Doug Ave

Return application to:

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only

Received: Date: 7/24/17 Amount 215.00 Check No. 33393 Initials LC

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Name: Mike Pietze

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Average of Rates: 47

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Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

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

Exhibit 4

OCT 11 2017 OK gr 11-1-17

Permit Number:

Onsite Wastewater Treatment System

As-Built Description and Drawing

Alteration RePAIR

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) _____

Owner: Restore A Muscle Car Address 11850 N 56th

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 20 ft.

B. Septic Tank

1. Material CONCRETE
2. Capacity: 1000
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: E ft. 13

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless:
   ARC 36
2. Number of Laterals: 3
3. Length of each lataral (linear): ft. 150 ft. 150
   ft. 150 ft. _____ Total Added 50 50 150
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

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

If Yes, the Certified Professional must sign below for final approval:

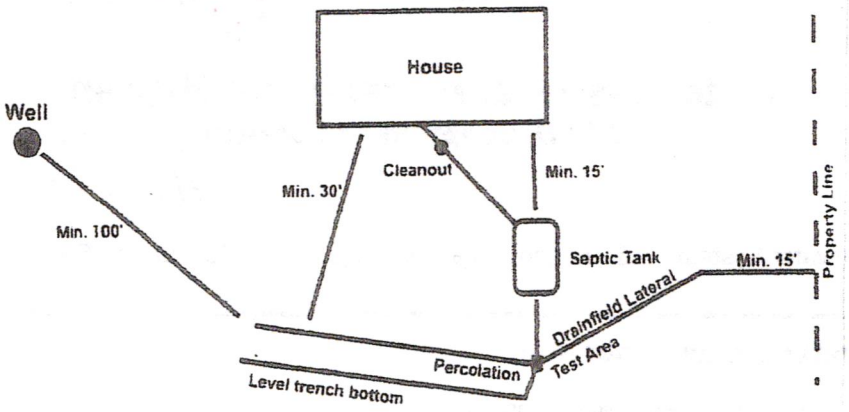
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: Michael P. Dietze Date: 08-07-2017

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

Onsite Wastewater System Design (Example)

Indicate North
w/ Arrow Here:



*Note-If Lagoon, show all applicable dimensions

ROAD
WATERLY
Body Shop
PAD
Building
20'
TANK
13'
DISTRO
20'
DISTRO
100'
100'
100'
50'
50'
50'

Restore A Muscle Car
11850 N 56th

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

Exhibit 5

Permit Number: HS001502

Onsite Wastewater Treatment System

Inspection Sheet

Date 10/18/17 Legal Description ¼ ¼ 16/11/7 Section/Township/Range Lots 36 T37

Onsite System Location

Address (no rural route) 11850 N 56th City _____

Owner _____ Address _____

Mark One: ~~☒~~ Dwelling ☒ Non-dwelling Business

❑ New System ☒ Alteration [❑ Tank Only ❑ Trench Only] ❑ Lateral Only

❑ Temporary modification (Describe problem causing discharge and reason for temporary modification): _____

_____

Drainfield Absorption System: Add Lateral to existing

☒ Lateral ❑ Bed ❑ Non-standard (engineer-designed and NDEQ approved) ❑ Holding Tank ❑ Trench

Total square feet of drainfield New 1,631.25 Sq. Ft. Tank Size Existing 1,000 gals

Total length of laterals 450' Type of Distribution: ❑ Chamber ❑ Perforated Pipe ❑ Other (describe) _____

Added 50' to each existing lateral

No. of Absorption Laterals 3 Width 3.625 No. of Drop Boxes _____ Distribution Box 2

Leveling Method Used _____

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

See "D" sheet as built

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 N/A Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial D.S. Date 8/2/17

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Lucas

Date 10/18/17

Field Note Drawing (See Reverse Side):