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

SEP 2 2 2017

A

Permit Number
H5001540

New Construction

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 2000 N 112th St (no rural route) City Lincoln, NE Zip 68527

Legal Description SE (1/4) 18 (1/4 Section) 10N (Township) 8E (Range) (Subdivison) (Addition) 1 (Block) (Lot)

PID 23-18-400-028-000

B. Owner

Name Sunflower Holdings LLC, John Lionberger Signature

Address 9340 Duane Ln City/State/Zip Lincoln, NE 68505

Home Phone 402-430-4074 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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: E-7588

Designer Name Dan Rosenthal Firm Rega Engineering Group, Inc Work Phone 402-484-7342

E. This system will serve a

☐ Residential Dwelling Number of Bedrooms Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 32.14
Garbage Grinder? ☐ Yes ☐ No

☒ Commercial Establishment/Other Facility Specify Veterinary/Animal Clinic Design flow in gallons per day 650

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 **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 9-22-17 Amount Paid 405.00
Received By LC Cash/Check No. 9246

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

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

B

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 2000 N 112th St (no rural route) City Lincoln NE, Zip 68527

Owner Sunflower Holdings LLC Address 9340 Duane Ln, Lincoln, NE 68505

Date of Tests 6/19/17 to 6/20/17 Weather: Precipitation 0 Temperature 96°

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start		Initial	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 Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	42	6/19	1:00p	6/19	5:00p	6/20	4:30p	6	6/20	5:00p	30	1	30
2	41	"	"	"	"	"	"	6	"	"	"	15/16	32
3	41	"	"	"	"	"	"	6	"	"	"	1/2	60
4	20	"	"	"	"	"	"	6	"	"	"	1-7/16	21
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.
Phone: 402-783-2663 or 402-890-6009
Address 13800 NW 70th St
Raymond, NE 68428 Cert #1198

Sum of Percolation Rates: 143
Average of Rates: 36
Rate Used for Calculation: 60 (20 mpi variance)

Soil type (NRCS Maps/Other) Wymore SCL
Groundwater Depth >8'

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

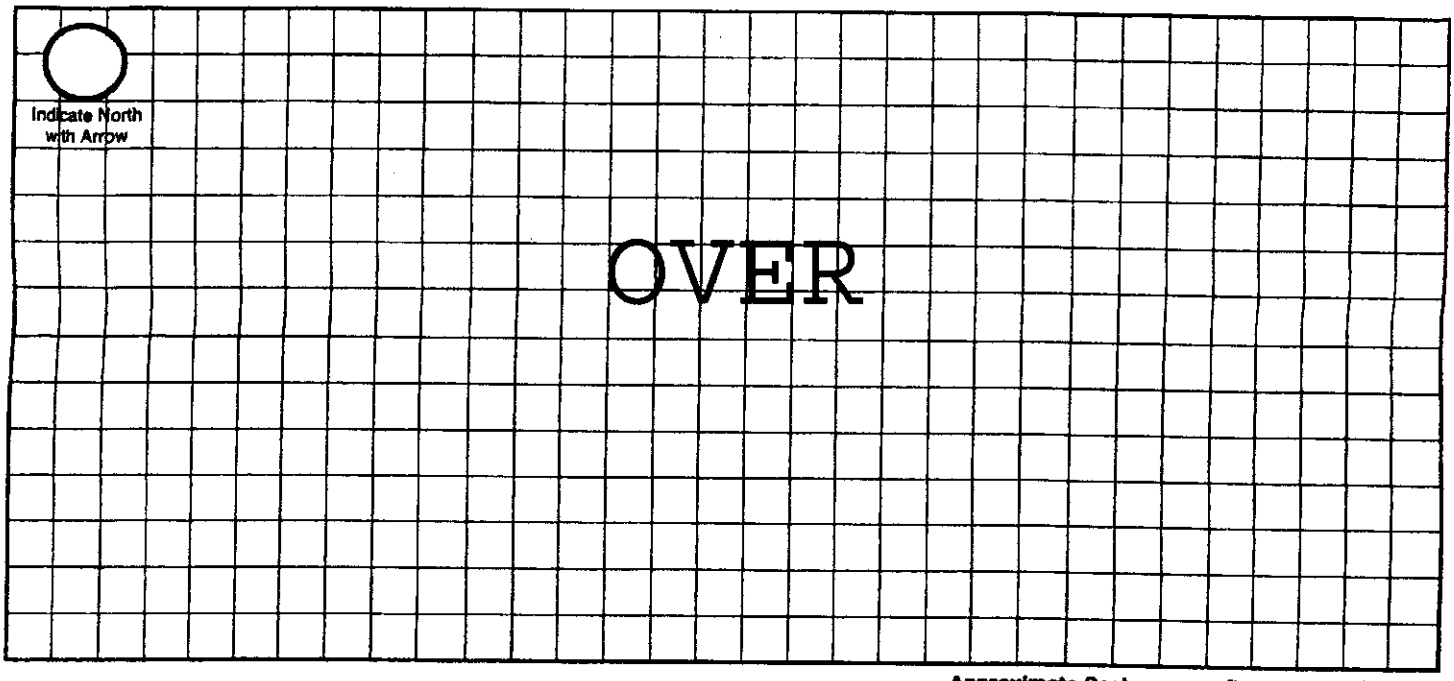
C

Permit Number:

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) 2000 N 112th St City Lincoln NE, Zip 68527

B. Proposed Septic Tank/s

Septic Tank Cap. 2,000 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 60 (min/inch = mpi) No. of Bedrooms N/A Soil Type Wymore SCL Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,006.98 sq.ft.

Total length of laterals 240 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 3 Width 40" No. of drop boxes_____ 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_____

Installer Brian L. Johnson Date 9/21/2017

RECEIVED

AUG 21 2017

Nebraska DEQ

Onsite Wastewater Treatment System Application for Construction/Operating Permit

Nebraska Dept of Environmental Quality

For NDEQ Use Only	NDEQ ID:	Program ID:

Print or Type

John | | Lionberger
Owner/Authorized Representative First Name | Initial | Last Name

Sunflower Holdings, LLC
Business or Legal Entity Name (if applicable)

9340 Duane Lane | Lincoln | NE | 68505
Owner Address | City | State | Zip

Phone Number 402-467-4469 Email bethanyvet@windstream.net

☒ Check here if authorized representative and include a description of the representative's authority to sign on behalf of the owner Authorized representative is professional engineer and designed system

Professional Engineer, Master Installer or Registered Environmental Health Specialist

Print or Type

Dan | Rosenthal | E-7588
First Name | Initial | Last Name | Certification/License Number

REGA Engineering Group, Inc.
Company Name

601 Old Cheney Road, Suite A | Lincoln | NE | 68512
Mailing Address | City | State | Zip

Phone Number 402-484-7342 Email dan@regaeng.com

Location *Legal description* OR *Geographical coordinates to 4 decimal points*

__ __ 18 | 10N | R8E | Lancaster | | |
¼ ¼ Section | Township | Range | County | Latitude | Longitude

2000 North 112th Street, Lincoln, NE
Physical address if different than owner's mailing address

System Information

☒ Dwelling-Peak single day flow 650 gals **OR** ☐ Non-dwelling-Peak single day flow _____ gals

☐ Domestic Wastewater ☒ Non-Domestic Wastewater -Description of non-domestic wastewater sources (i.e. restaurant, laundry, butcher shop, camper dump station or other) Animal Clinic

☒ New System ☐ Modification, reconstruction or alteration of existing system

☒ Septic System ☐ Mound ☐ Holding tank ☐ Lagoon ☐ Other (if other, describe here)_____

Depth to seasonal high groundwater for planned location of the soil absorption system _____ ft.

Percolation rate 60 min/inch Maximum ground slope 1.0 %

I swear or affirm that the application information and documentation submitted are true, complete and accurate.

Dan Rosenthal
Owner/Authorized Representative Signature

8/18/2017
Date

NOTICE: Failure to complete the form or include the appropriate fee(s) will delay the application. NDEQ issued construction permit is required prior to any construction.

Version 5-

20170903E08

REGA
ENGINEERING GROUP, INC.

Project: Bethany Animal Hospital Septic System

Date: 8/18/17

Design Requirements

Given: 650 gal/day from water flow work sheet.

Formula 019.02

$SF = \text{design flow (gpd)} \times (0.20) \times \sqrt{\text{percolation (min/in}}$

$SF = 650 \times 0.20 \times \sqrt{60}$

$SF = 1006.98$

$\text{LF of Lateral} = \frac{1006.98}{4.5'} = 223 \text{ LF}$

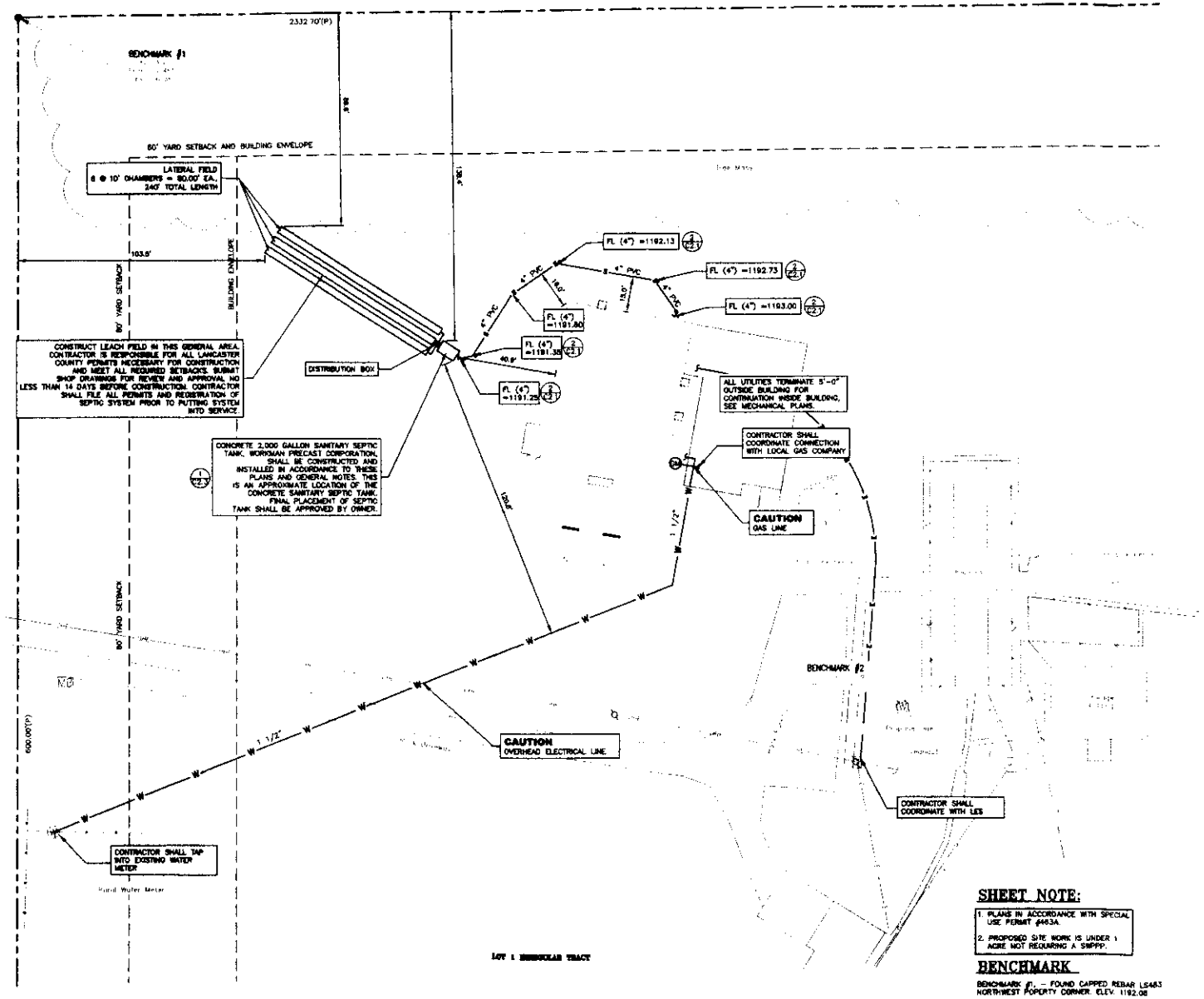
Call 240 LF

3 - 12" Round Laterals = 36" x 1.5 = 54" or 4.5'

$\frac{240 \text{ LF}}{3} = 80'$ Per Lateral

Need 3 Laterals @ 80' Each

PROFESSIONAL CIVIL ENGINEER
DANIEL J. ROSENTHAL
E-7588
STATE OF NEBRASKA



NORTH
SCALE 1" =20 '

20 0 20 40 60 Feet

LEGEND

- PROPERTY LINE
- S — S — 4" SANITARY SEWER LINE FROM SERVICE CONNECTION TO 5' OUTSIDE BUILDING (1/C2.1)
- W — W — 1 1/2" SERVICE WATER LINE TO 5' OUTSIDE BUILDING (1/C2.1)
- E — 4" CONDUIT ELECTRICAL LINE (SEE ELECTRICAL PLANS FOR FURTHER INFORMATION)
- CLEANOUT (1/C2.1)

UTILITY NOTES:

1. 4" SANITARY SEWER PIPE TO BE SDR 26.
2. UTILITY CONTRACTOR SHALL HAVE APPROVAL OF ALL GOVERNING AGENCIES HAVING JURISDICTION OVER THE SYSTEM PRIOR TO INSTALLATION.
3. SANITARY SEWER CONSTRUCTION SHALL BE IN ACCORDANCE WITH THE LATEST EDITION OF THE "TEN STATE STANDARDS" FOR WASTEWATER FACILITIES AND CITY OF LINCOLN STANDARD PLANS AND SPECIFICATIONS.
4. THE "TEN STATE STANDARDS" FOR SEWER AND WATER SEPARATION SHALL BE CONFORMED TO
5. PROVIDE MINIMUM 18" VERTICAL SEPARATION BETWEEN ALL WATER AND SANITARY SEWER UTILITIES. PROVIDE MINIMUM 10' HORIZONTAL SEPARATION BETWEEN ALL WATER AND SANITARY SEWER UTILITIES.
6. CONTRACTOR TO VERIFY ALL LOCATIONS OF UTILITIES BEFORE BORING AND TRENCHING.
7. CONTRACTOR TO FIELD VERIFY ALL UTILITIES. IF CONFLICT OCCURS BETWEEN EXISTING AND PROPOSED CONTACT ENGINEER BEFORE BUILDING.
8. ALL UTILITIES STOP 5' OUTSIDE OF BUILDINGS. SEE MECHANICAL PLANS FOR CONTINUATION INTO BUILDINGS.
9. CONTRACTOR TO COORDINATE TRANSFORMER LOCATION WITH LES AND OWNER.

SHEET NOTE:

1. PLANS IN ACCORDANCE WITH SPECIAL USE PERMIT #463A.
2. PROPOSED SITE WORK IS UNDER 1 ACRE NOT REQUIRING A SWPPP.

BENCHMARK

BENCHMARK #1. - FOUND CAPPED REBAR LS463 NORTHWEST PROPERTY CORNER. ELEV. 1192.08

BENCHMARK #2. - NORTH RIM OF EXISTING WELL. ELEV. 1196.25

Diggers Hotline of Nebraska
1-800-331-5666

NOTE:
UNDERGROUND UTILITY LOCATIONS SHOWN ARE FROM INFORMATION PROVIDED TO US FROM UTILITY COMPANIES. UTILITY COMPANIES MAKE NO WARRANTIES OR GUARANTEES REGARDING THE ACCURACY OF THE INFORMATION CONTAINED IN THEIR DOCUMENTS AND PROVIDED IT ONLY AS GENERAL INFORMATION TO THE RECEIVER. FOR SPECIFIC LOCATIONS DURING CONSTRUCTION CALL "DIGGERS HOTLINE" 1-800-331-5666 (STATEWIDE) PRIOR TO DIGGING.

REGA #161272

ISSUED FOR:	DATE:	BY:	REVIEW BY:
75% PROGRESS SET	11/10/16	BTS	NB
100% CONSTRUCTION SET	11/16/16	BTS	NB
PLAN REVISIONS	3/3/17	MK	MK/DR
REVISED UTILITY AND DETAILS	08/21/17	SDB	DR

REGA
ENGINEERING GROUP, INC.
601 OLD CHENEY RD., SUITE A
LINCOLN, NEBRASKA 68512
(402) 484-7342
- ENGINEERING
- PLANNING
- LAND SURVEYING

TWC TERRAMACHIA CONSTRUCTION, INC.

Bethany Animal Clinic

2000 North 112th Street
Lincoln, Nebraska

All design, documents and data presented shall remain the property of TerraMachia Construction Inc and shall not be reused, arranged, or disclosed in any form without written consent. TerraMachia Construction Inc shall not be responsible for any alterations or omissions made by anyone who is not employee of TerraMachia Construction Inc.

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PROJ. NO: 161272
DRAWN BY: BTS
CHECKED BY: NB

ISSUE SCHEDULE

No	Description	Date
1	PERMIT	11/16/16

REVISION SCHEDULE

No	Description	Date

UTILITY PLAN

C1.5

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. HS001540

System Type: Standard

Situs: 2000 N 112 ST, RURAL, NE

Issued: 10/4/2017

Expires: 10/4/2018

Description: S18, T10, R8, 6th Principal Meridian, LOT 1 SE

Owner: SUNFLOWER HOLDINGS LLC
9340 DUANE LN
LINCOLN, NE 68505

Shavonna M. Lausterer, MPH, CPH, 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.

Shavonna M. Lausterer, MPH, CPH
Health Director

RAYMOND CONSTRACTING
13800 NW 70 ST
RAYMOND, NE 68428