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

OCT 1 1 2017

A

Permit Number
HS001554

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 711 Mill Rd (no rural route) City RAYMOND, NE Zip 68428

Legal Description 11 11 6 6th Principle Meridian
(1/4 1/4 Section Township Range Subdivison Addition Block Lot)

PID 12-11-100-011 LC-000

B. Owner

Name Ben Bowen Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Waverly Plumbing & Well Co Signature Michael P. Dietze

Address Po Box 116 City/State/Zip Waverly, NE 68462

Work Phone 402 786 5620

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

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

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

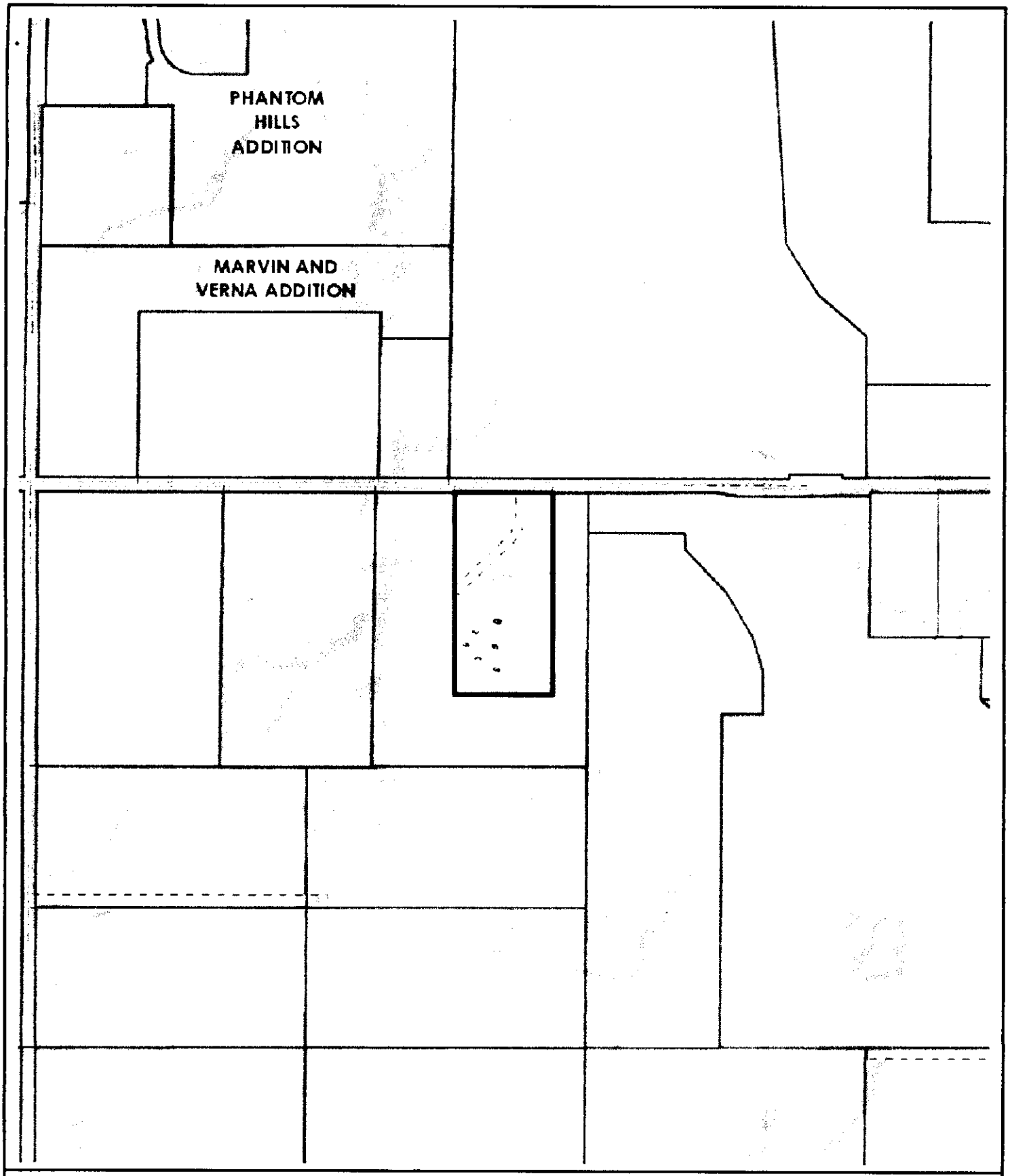
3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 10/11/17 Amount Paid $405.00
Received By JMO Cash/Check No. 33578

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

Form A Updated: 1/13



Lancaster County/City of Lincoln GIS Map

Ben Bowen

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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 co
regarding the data displayed on this map, please email ags@lincoln.ne.gov and you will be directed to the appropriate department.



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Lancaster County/City of Lincoln GIS Map

Ben Bowen

Printed: Sep 26, 2017

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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 705 Mill Rd (no rural route) City RAYMOND NE, Zip 68428

Owner BEN BOWEN Address 6039 Meridian DR Apt 417 Lincoln NE 68504

Date of Tests 09-08 to 09-09-2017 Weather: Precipitation 0 Temperature 84°

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			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	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	3/4	40
2	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	3/4	40
3	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	5/8	48
4	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	1/2	60
5	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	5/8	48
6	36"	09-08	1800	09-09	1200	09-09	1600	6	09-09	1630	30	1/2	60
								6					
								6					

Person Conducting Percolation Test

Name: Suzette Buls
Phone: 402 525 3144
Address PO Box 308
Waverly, NE 68462

Sum of Percolation Rates: 296
Average of Rates: 49.33
Rate Used for Calculation: 49

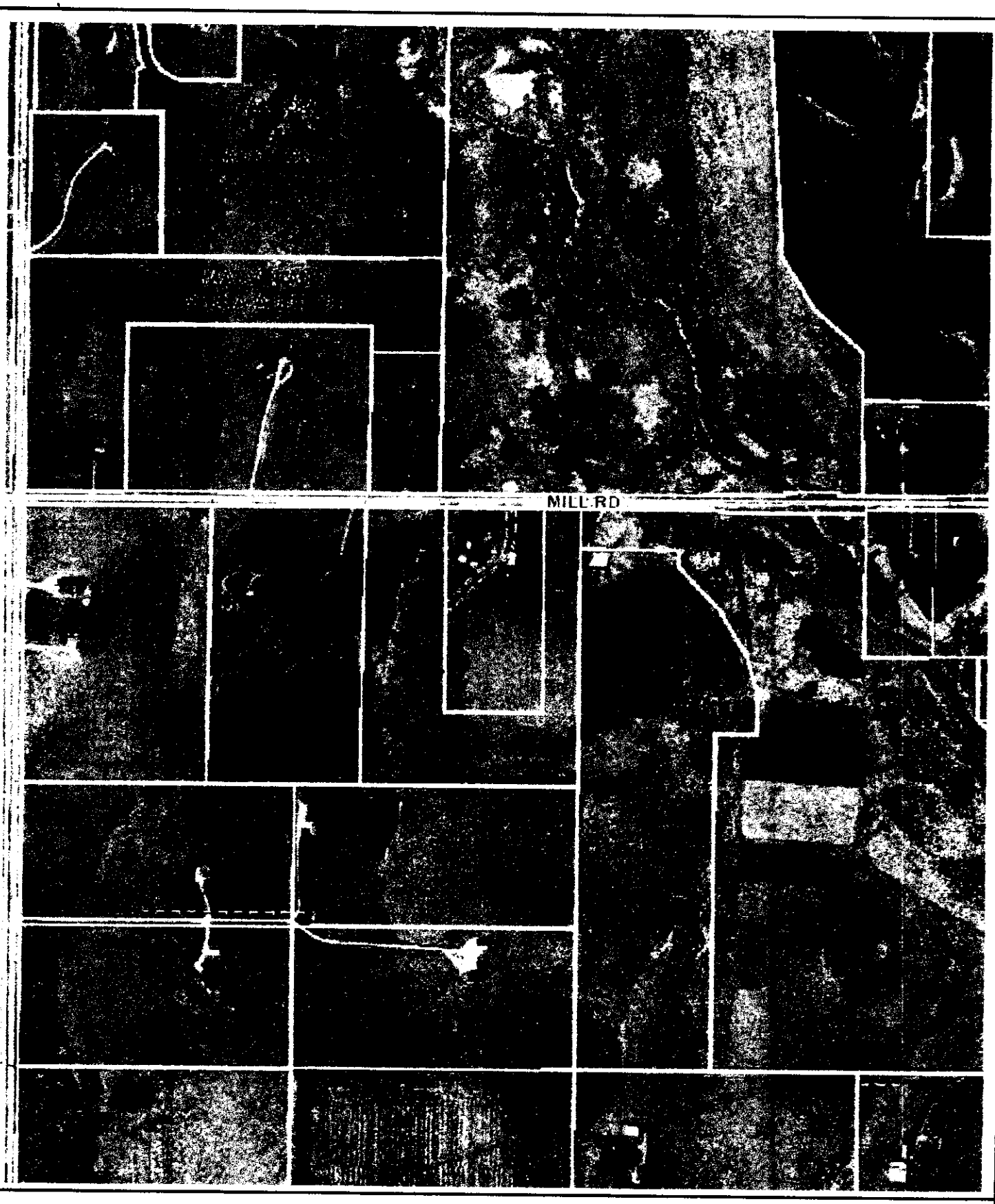
Soil type (NRCS Maps/Other) AKSARBEN SILTY CLAY LOAM
Groundwater Depth 62'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date



Lancaster County/City of Lincoln GIS Map

Ben Bowen

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

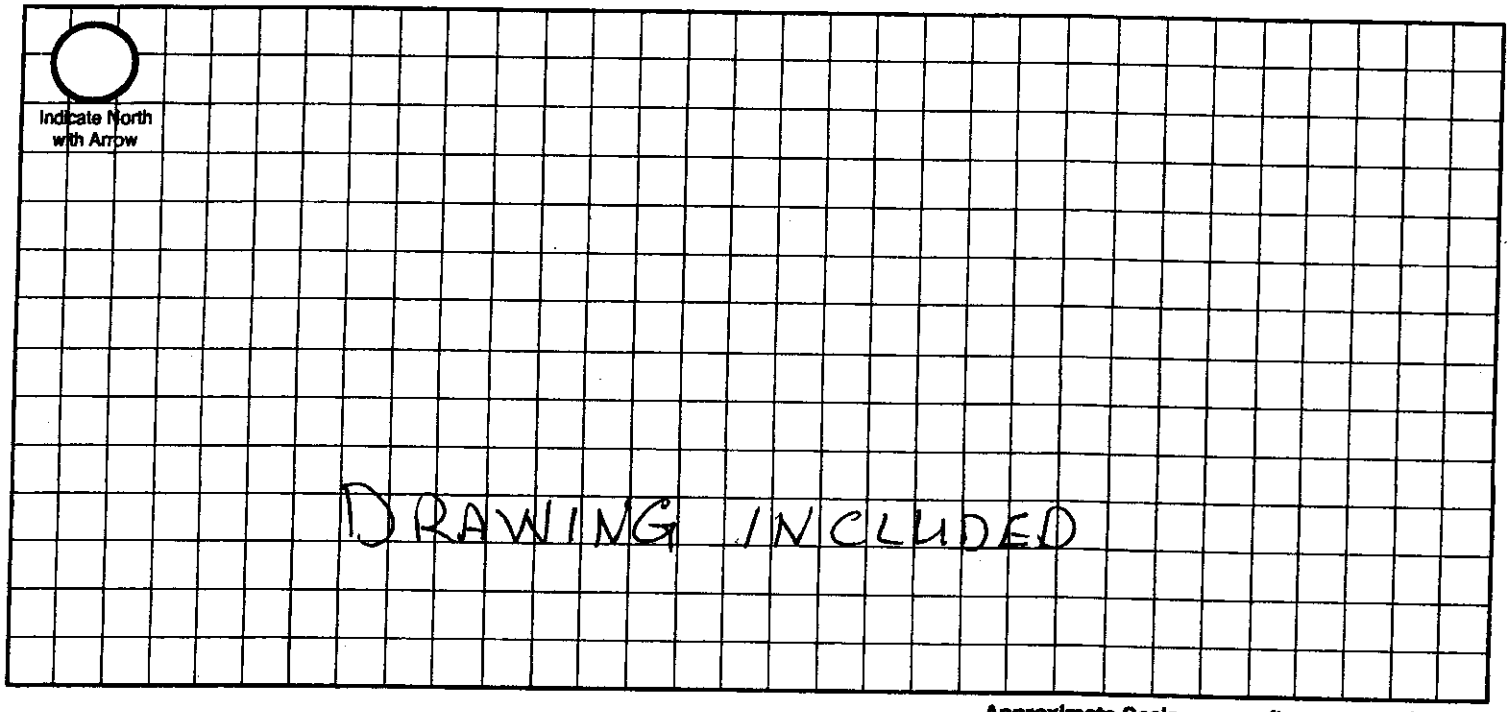
C

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) 711 Mill Road City Raymond NE, Zip 68462

B. Proposed Septic Tank/s

Septic Tank Cap 2000 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 49 (min/inch = mpi) No. of Bedrooms 3 Soil Type Aksarban silty clay loam Land Slope 6-11 %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 290 sq.ft.

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

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distrubtion Box_____

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 _____ 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. HS001554

System Type: Standard

Situs: 711 MILL RD, RURAL, NE

Issued: 10/30/2017

Expires: 10/30/2018

Description: S11, T11, R6, Acres 6th Principal Meridian, LOT 38 NW

Owner: BOUWENS, BENJAMIN D &
CHELSEA A
6737 BURLINGTON AVE
LINCOLN, NE 68507

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

WAVERLY PLUMBING & WELL CO
PO BOX 116
14150 LANCASHIRE
WAVERLY, NE 68462

SCANNED

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

OCT 1 1 2017

A

Permit Number
HS001554

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 711 Mill Rd (no rural route) City RAYMOND, NE Zip 68428

Legal Description 11 11 6 6th Principle Meridian
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 12-11-100-011 LC

B. Owner

Name Ben Bowen Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Waverly Plumbing & Well Co Signature Michael P. Dietze

Address Po Box 116 City/State/Zip Waverly, NE 68462

Work Phone 402 786 5620

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
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. 02-38

1. Health Department
Site visits
Comments
Date rec'd 10/12/17
Date frwd 10/12/17
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 10-12-17
Date frwd 10-12-17
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploeger

Installation Final Written Approval
By
Date 10/8/18

Business Office Use Only
Date Received 10/11/17 Amount Paid $405.00
Received By JAC Cash/Check No. 33578

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

Form A Updated: 1/13

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Permit Number: HS001554

Onsite Wastewater Treatment System

Inspection Sheet

Date 10/8/18 Legal Description _____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 711 Mill Rd 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 1069 Sq. Ft. (990 legal) Tank Size 2000 gals

Total length of laterals 295 Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe)_____

_____

No. of Absorption Laterals 2 Width 3' No. of Drop Boxes 1 Distribution Box CO

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 9/27/18

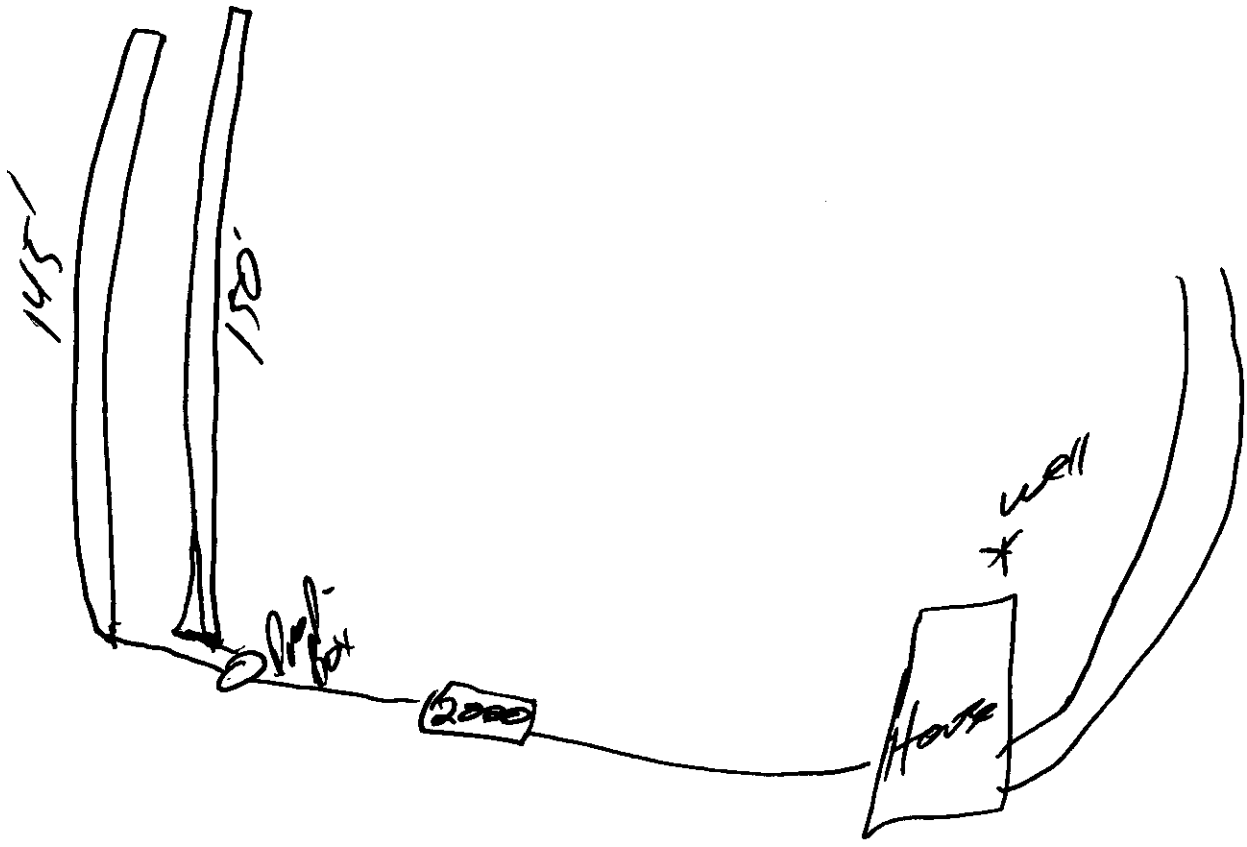
Follow-Up _____ Date _____

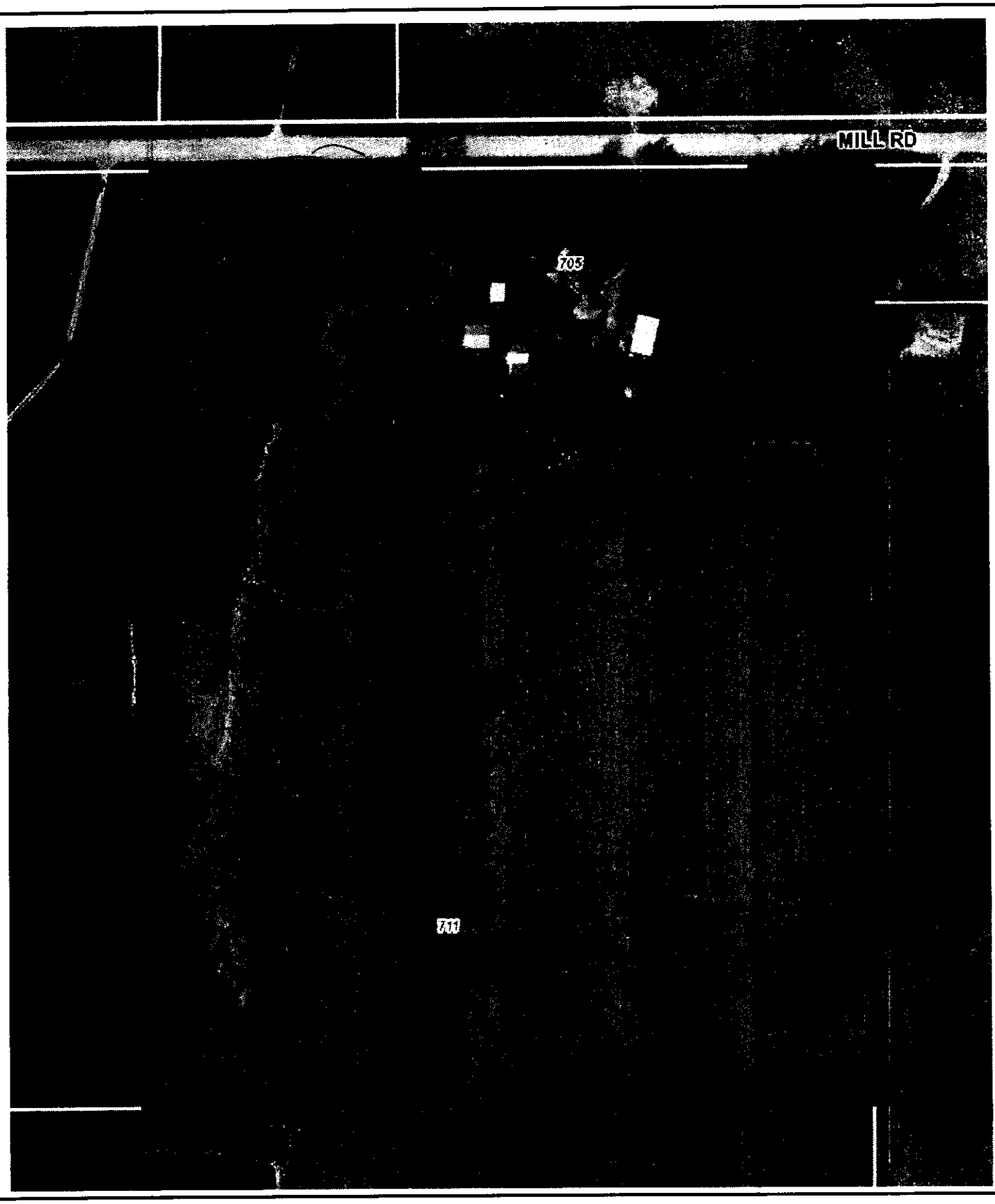
Follow-Up _____ Date _____

Installation Final Written Approval
By _____

Date 10/8/18

Field Note Drawing (See Reverse Side):


145'
150'
Elec
200
House
well

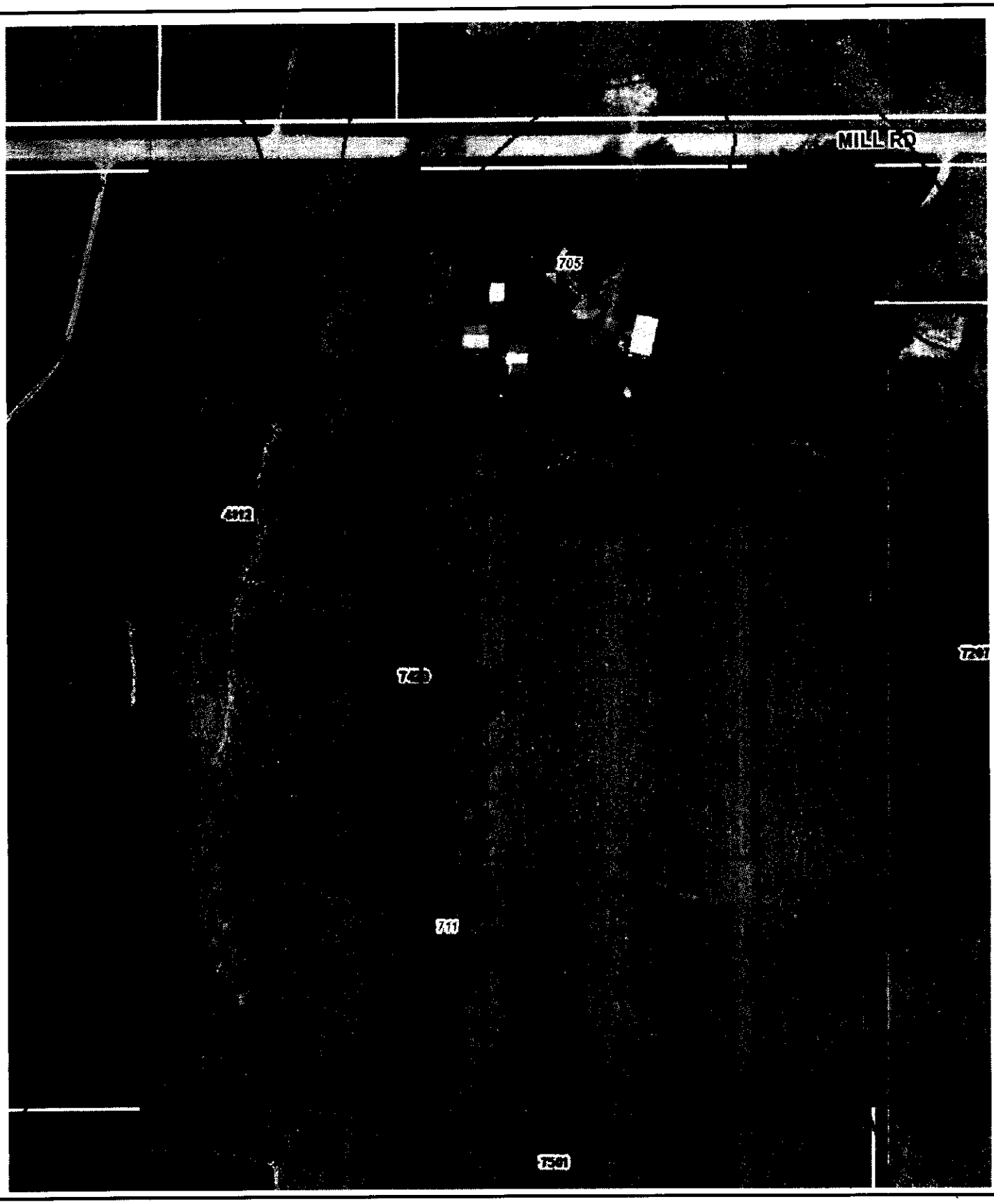


Lancaster County/City of Lincoln GIS Map

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Printed: Oct 11, 2017

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Lancaster County/City of Lincoln GIS Map

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Printed: Oct 11, 2017

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Nate C. Hartman

From: Todd A. Stutzman
Sent: Thursday, October 12, 2017 9:14 AM
To: Nate C. Hartman
Subject: Buildable lots

Nate,

711 Mill Rd. S11, T11, R6 Lot 38 NW is buildable.

Whispering Creek 1st addition Lot 4 Block 2 is buildable.

4488 W McKelvie Rd S19, T11, R6 is buildable.

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