HS001580

Phone: 402-441-6645

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)

E PRINT OR TYPE

nsite System Location

s* 14580 (no rural route) S. 59th City Lincoln, NE Zip

Description 1/4 16 1/4 8 Section 7 Township Range Silvercheek Estates Subdivison 5 Addition Block 1 Lot

*Approx. Address (If to be determined)

Owner

Andrey Rybak Signature

ss City/State/Zip

Phone Work Phone

Certified Installer

e: Sean Mueller Signature

ess 1345 W 26th Rd City/State/Zip Syracuse NE 68446

k Phone 402-430-2946

Engineer ☐ Check and complete if engineer designed system P.E. License Number:

igner Name Firm Work Phone

This system will serve a

Residential Dwelling Number of Bedrooms 5 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

proval Process

Health Department

e visits Date rec'd Date frwd

mments

Supt. Bldg. Insp. or Village Clerk

mments Date rec'd Date frwd

City or County Engineer

mments Date rec'd Date frwd

stallation Final Written Approval

y

ate

ACTION ☐ Approved ☐ Disapproved Signature

ACTION ☐ Approved ☐ Disapproved Signature

ACTION ☐ Approved ☐ Disapproved Signature

Business Office Use Only

Date Received 12/4/17 Amount Paid $405.00

Received By JAO Cash/Check No. CC7194

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

Form A Updated: 4/15

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. HS001580

System Type: Lagoon

Situs: 14580 S 59 ST, RURAL, NE

Issued: 12/6/2017

Expires: 12/6/2018

Description: SILVERHAWK ESTATES ADDITION, BLOCK 5, Lot 1

Owner: BCLINC LLC
ATTN: CRAIG GIES 4400 LOWELL AVE
LINCOLN, NE 68506

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

SCOTT MUELLER
1345 N 26TH RD
SYRACUSE, NE 68446

SCANNED

HS 001580

Phone: 402-441-

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

(Form C)

6 1

Block Lot

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

Exhibit 5

Permit Number: HS001580

Onsite Wastewater Treatment System

Inspection Sheet

Date 11/4/18 Legal Description Silverhawk Estates Blk 5 Lot 1
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 14580 S. 59th 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

1,375 required
Total square feet of drainfield 1,450 Sq. Ft. Tank Size 2,000 gals

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

No. of Absorption Laterals 3 Width 3.625 factor 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 _____ NA

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial _____ Date unknown – Summer 2018

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Thiele

Date 11/4/18

Field Note Drawing (See Reverse Side):

4/9

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 14580 So 59th (no rural route) City Lincoln NE, Zip

Owner Andrew Rybarik Address

Date of Tests 11-12 to 11-13 Weather: Precipitation N/A Temperature 40's

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	36	11-12	9:00	11-13	13:00	11-13	13:00	6	13:00	13:30	30MIN	1	30
2								6				3/4	45
3								6				3/4	45
4								6				1	30
5								6				3/4	45
6								6				1	30
								6					
								6					

Person Conducting Percolation Test

Name: Scott Mueller

Phone: 402-430-2946

Address Syracuse NE

Soil type (NRCS Maps/Other)

Groundwater Depth 12'

Sum of Percolation Rates: 225

Average of Rates: 38

Rate Used for Calculation: ~~Lot~~ mpi 38

per phone call with Scott Mueller 4/1/18

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Nate C. Hartman

From: RJ Hamilton
Sent: Monday, December 04, 2017 10:55 AM
To: Nate C. Hartman
Subject: Lot in Silverhawk Estates

Nate,
Todd wanted me to send you this email. The property of Lot 1, Block 5, Silverhawk Estates Addition (14580 S. 59th St.) is a buildable lot in our jurisdiction.

Thanks

RJ Hamilton
Plans Examiner
City of Lincoln
Building and Safety Dept.
402-441-6424