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

A

Permit Number HS 001596

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 2211 Raymond Rd. (no rural route) City Oak (Raymond), NE Zip 68428

Legal Description ____ ____ 11 6 ____ ____ ____ 3

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

PID 12-01-200-001-000

B. Owner

Name Nick Zobel Signature ____

Address 2211 Raymond Rd. City/State/Zip Oak, NE 68428

Home Phone 402 440 9172 Work Phone ____

C. Certified Installer

Name: Steven C Lewis Signature ____

Address 4810 W. Claire Ave City/State/Zip Lincoln, NE 68523

Work Phone 402 310 9160

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 6 Whirlpool Bathtub? ☒ Yes ☐ No Total Acres ____

Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify ____ Design flow in gallons per day 700

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 4-28-18 Amount Paid $405.00
Received By JAO Cash/Check No CC8442

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

Form A Updated: 1/13

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 2211 Raymond Rd (no rural route) City Oak (Raymond) NE, Zip 68428

Owner Nick Zobel Address 2211 Raymond Rd Oak, NE 68428

Date of Tests Dec 8 to Dec 9 Weather: Precipitation 0.00" Temperature 26° F

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		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	12/8	3:00	12/9	3:00	12/9	3:00	6	12/9	3:30	30	1	30
2	1	1	3:00	1	1	1	1	6	1"	1	1	3/4	40
3	1	1	3:00	1	1	1	1	6	1	1	1	1	30
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 310 9160
Address 4810 W. Claire Ave
Lincoln NE. 68523

Sum of Percolation Rates: 100
Average of Rates: 33.3
Rate Used for Calculation: 40

Soil type (NRCS Maps/Other) 7684 Silty clay loam

Groundwater Depth

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

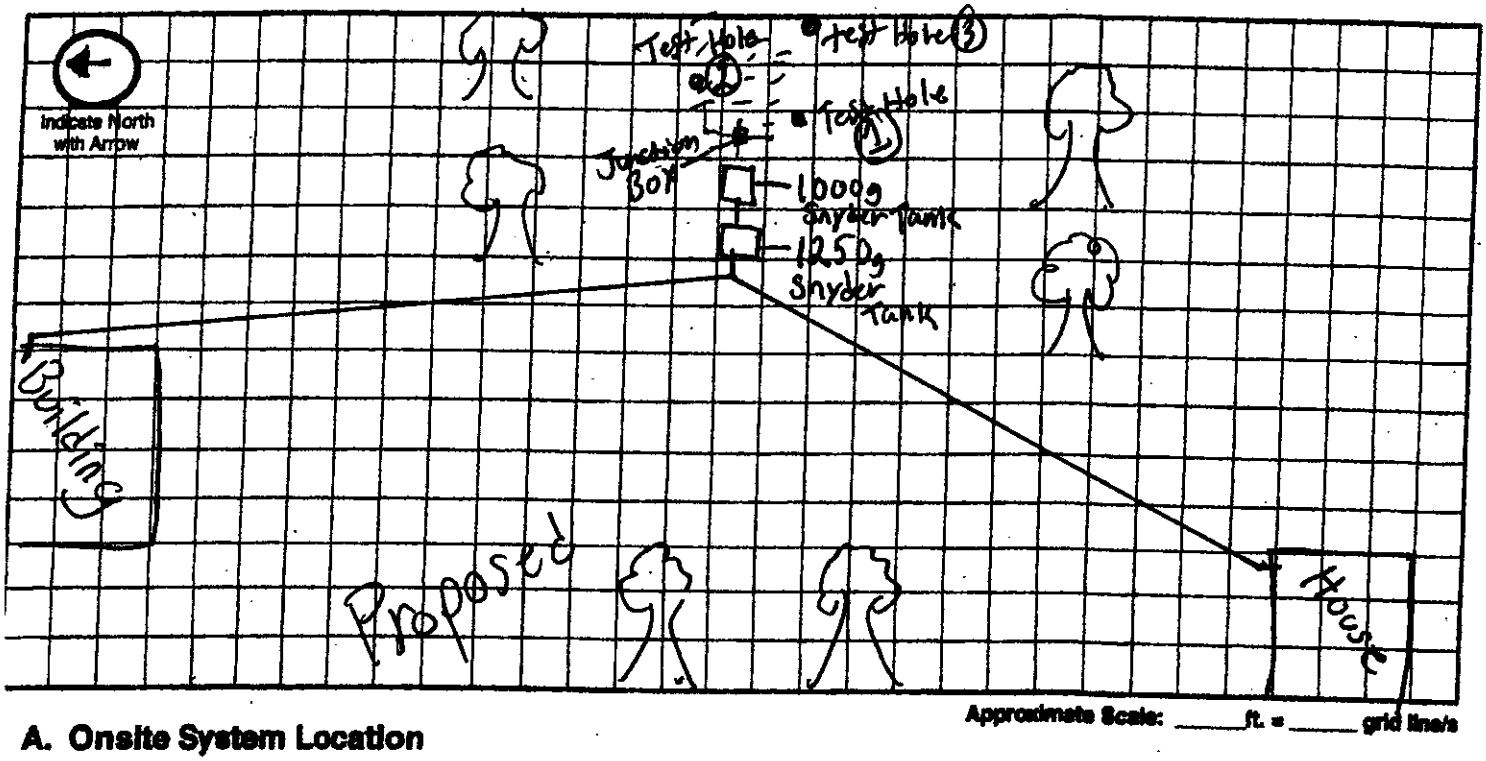
C

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) _____ City Oak (Raymond) NE, Zip 6

B. Proposed Septic Tank/s

Septic Tank Capa 2250 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 40 (min/inch = mpi) No. of Bedrooms 6 Soil Type 7684 Land Slope 3-6 %

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

Total length of laterals 370' 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 _____

SCANNED

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

A

Permit Number
HS 001596

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 2211 Raymond Rd. (no rural route) City Oak (Raymond) NE Zip 68428

Legal Description: 1 / 11 / 6 / 3

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

PID 12-01-200-001-000

B. Owner

Name Nick Zobel Signature

Address 2211 Raymond Rd. City/State/Zip Oak, NE 68428

Home Phone 402 440 9172 Work Phone

C. Certified Installer

Name: Steven C Lewis Signature

Address 4810 W. Claire Ave City/State/Zip Lincoln, NE 68523

Work Phone 402 310 9160

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 6 Whirlpool Bathtub? ☒ Yes ☐ No Total Acres 77.79

Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 700

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 1/11/18

Date frwd 1/11/18

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 9/2/18

Business Office Use Only

Date Received 1-08-18 Amount Paid $405.00

Received By JAO Cash/Check No. CC0047

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

Form A Updated: 1/13

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

Received Time Aug. 20. 2018 9:22PM No. 0456

Permit Number:

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) 12-01-200-001-000

Owner: Nick Zobel Address 2211 Raymond Rd. Raymond NE, 68428

A. Wastewater Piping

1. Material: PVC sdr-26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 220 ft.

B. Septic Tank

1. Material Plastic
2. Capacity: 1250 & 1000 gal
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well over 100 ft.
   Pressure line N/A ft
   Property Line over 100 ft.
   Foundation over 100 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. west

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: Polystyrene Sentitic Bundles 12" x 3
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 80 ft. 140 ft. 150 ft.
4. Drainfield size: 665 sq. ft. 150 sq ft
5. Distance to:
   Well over 100 ft.
   Pressure line N/A ft.
   Property line over 100 ft.
   Depth of Groundwater over 12'

Sent Copies Cust.

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

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: _____

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

Received Time Aug. 20. 2018 9:22PM No. 0456

GAGNER CONSTRUCTION
4810 W. CLAIRE AVE.
LINCOLN, NE 68523

RE: 2211 Raymond Rd.

ATT: NATE

Received Time Aug. 20. 2018 12:26PM No. 0454

GAGNER CONSTRUCTION
4810 W. CLAIRE AVE.
LINCOLN, NE 68523

RE: 2211 Raymond Rd.

ATT: Nate

Received Time Aug. 20. 2018 12:26PM No. 0454

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

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 17 Aug 2018 Legal Description 1/4 1/4 1 11 6 Section Township Range Lot 3

Onsite System Location

Address (no rural route) 2211 Raymond Rd. City Raymond NE, Zip 68428

Owner Nick Zobel Address

A. Sewer Pipe

1. Material: SDR26 PVC
   Diameter: 4 in.
2. Distance above basement floor: NA in.
   or distance below basement floor: 36 in.
3. Distance between dwelling and septic tank: 310 ft.
4. Number of clean-outs: 5
5. Distances to: well or suction line over 100 ft.
   stream NA ft.
   pressure line NA ft.
   property line over 100 ft.

B. Septic Tank

☐ Label with Manufacturer, address and gallon capacity

1. Material: Plastic Snyder
   Number of compartments: 2
2. Capacity: 2250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 36 in.
5. Inlet: ☒ baffle ☐ tee ☐ 6" dia. inspection pipe
6. Outlet: ☒ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: 10 in.
8. Distances to: Well or suction line over 100 ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line over 100 ft.

C. ☐ Distribution Box ☐ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: Plastic
   Number available outlets: 3
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 8 ft.

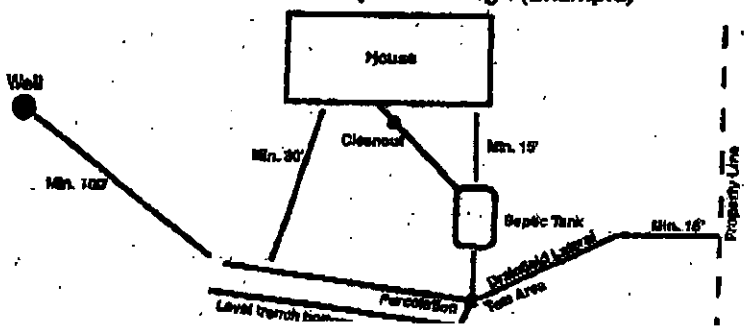
D. Drainfield Absorption

☒ Trench ☐ Bed ☐ Level Bottom

1. Type: ☐ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width: 4.5 Sq Ft. EZ Flow
   Number of distribution lines in bed 370'
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☒ other Polystyrene Synthetic Bundles
2. Drainfield Laterals: Number 3
   Length of each line: 80 ft. 140 ft.
   150 ft. ft., ft.
3. Drainfield dimensions: Width ft.
   Distribution Pipe Slope 0 in/100 ft.
   Average depth 18 in
4. Filter material: None
   Depth of material in.
5. Distances to: Well or suction line over 100 ft.
   Pressure line NA ft.
   Property line over 100 ft.
   House or building over 100 ft.
   Lake or Stream NA ft.

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

Onsite Wastewater System Design (Example)



Locate North with Arrow

Form D 12 06

Received Time Aug. 20. 2018 12:26PM No. 0454

