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

A

Permit Number: #5001641

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 16360 S. 162nd St. (no rural route) City Walton NE, Zip 68461

Legal Description Lot 5 IT SW 1/4 1/4 Section 9N Township 8E Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name James K. and Camie L. Bremer Signature Camie L Bremer

Address 16350 S. 162nd St. City/State/Zip Walton, NE 68461

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Harper Well Leonard Harper Company Name Harper Well

Address PO Box 15 City/State/Zip ~~Panama~~ Adams NE

☒ Check if contractor designed system Work Phone 402 432-2204

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub 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. 2832

1. **Health Department** Date rec'd _____ Date fwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date fwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date fwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By _____

Date _____

Business Office Use Only
Date Rec'd 4-12-18
Amt Paid $405.00
Rec'd By JAD Cash/Check No. 3354

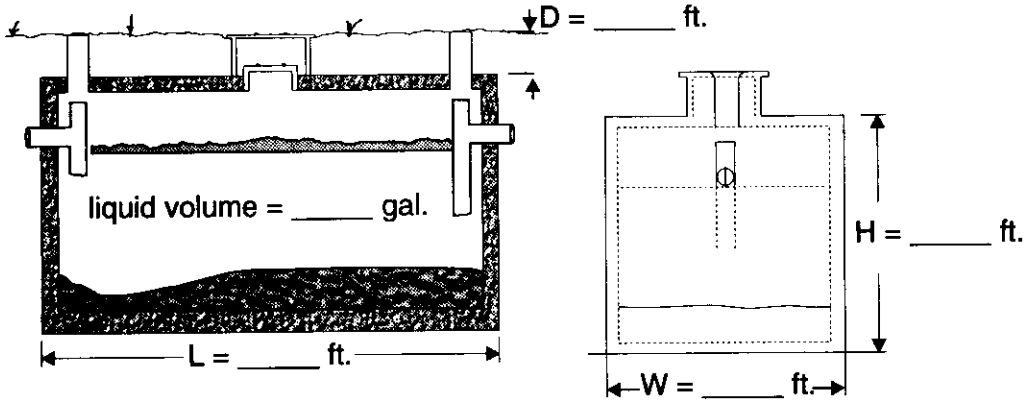
FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

405

KEY

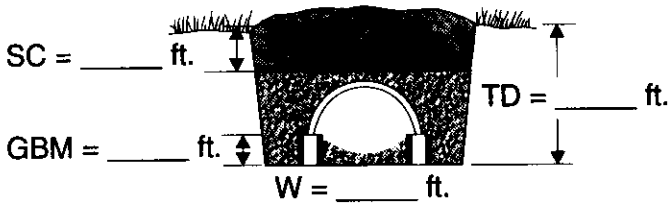
SC = Soil Cover	GBM = Gravel Below Half Moon	
TD = Trench Depth	L = Tank Length	H = Tank Height
W = Width	GBP = Gravel Pipe Below	D = Depth of Cover

F. SEPTIC TANK DIMENSIONS

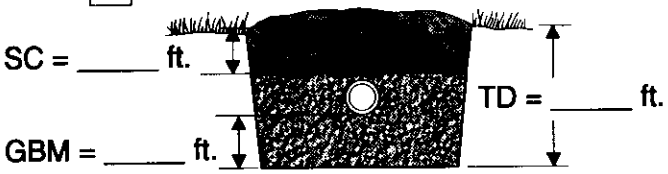


G. Check the Box for the Appropriate Absorbtion Field and Complete the Blanks

☐ HALF-MOON IN GRAVEL



☐ PIPE IN GRAVEL



☐ OTHER: Include Drawing

H. Complete ADJACENT Lot Worksheet for All Wells and Water Lines

NORTHWEST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	NORTH Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	NORTHEAST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____
WEST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	PROPOSED SEPTIC SYSTEM INSTALLATION	EAST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____
SOUTHWEST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	SOUTH Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	SOUTHEAST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____

Procedures

Forms A, B and C must be completed and submitted to the Lincoln-Lancaster County Health Department (LLCHD) to obtain an individual sewage disposal permit as required by LMC 24.38 or Lancaster County Resolution No. 2832.

The following steps should be followed in sequence.

1. Determine the soil absorption capacity of the site. (Complete Form B).
2. Have your sewage disposal system engineer/installer survey the site to determine the proper location of the system. The location of building/s, well/s, property lines, percolation test holes, proposed system and laterals must be considered. (Complete Form C) Remember to include a plot plan and that ***both your installer and your home building contractor must sign Form C.***
3. Obtain site clearance. (Complete Form A) If the building site is (a) within the 3-mile jurisdiction of Lincoln, or (b) in the county, but not within the 1-mile jurisdiction of an incorporated city or village, then submit your completed forms to LLCHD. If the building site is within the 1-mile jurisdiction of Hickman or Waverly, or an incorporated village, then you will need to first take Form A to the City of Village Clerk for approval. The clerk will return Form A to you, and you can then submit your completed Form A to LLCHD.
4. Submit completed Forms A, B and C to the LLCHD, Environmental Health Division. A filing (permit) fee of $150 must be submitted at the same time. Make checks payable to the Lincoln-Lancaster County Health Department.
5. When the application for a permit has been approved and the permit issued by LLCHD, construction of the system may begin. The system must be constructed in accordance with the approved plans and specifications, and with the appropriate ordinance or resolution.
6. The installed system requires a final approval. The LLCHD must be notified when the installation is ready for final inspection.

No part of the system may be covered until inspected and approved by the LLCHD.

Inspection Phone No.

441-8022

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS001641

System Type: Lagoon

Situs: 6360 S 162ND ST, BENNET, NE 68461

Issued: 4/17/2018

Expires: 4/17/2019

Description: S14, T9, R8, Acres 6th Principal Meridian, LOT 51 SW

Owner: BREMER, JAMES K & CAMIE L
6350 S 162 ST
WALTON, NE 68461

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

LEONARD HARPER
PO BOX 15
ADAMS, NE

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

A

Permit Number: HS001641

Sewage Disposal System

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Legal Description Lot 5 IT SW 1/4 NW 1/4 Section 9N Township 8E Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

22-14-300-005-000

B. Owner

Name James K. and Camie L. Bremer Signature Camie L Bremer

Address 16350 S. 162nd St. City/State/Zip Walton, NE 68461

☐ Check if owner designed system Home Phone _____ Work Phone _____

C. Contractor

Name Harper Well Leonard Harper Company Name Harper Well

Address PO Box 15 City/State/Zip ~~Pleasant~~ Adams NE

☒ Check if contractor designed system Work Phone 402 432-2004

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub 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. 2832

1. **Health Department** Date rec'd 4/12/18 Date frwd 4/13/18 ACTION ☒ Approved ☐ Disapproved Signature _____
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____

Contacted & OK 3/4/19

Installation Final Written Approval

By _____

Date 6/26/18

Business Office Use Only

Date Rec'd 4-12-18
Amt Paid $405.00
Rec'd By JAD Cash/Check No. 3354

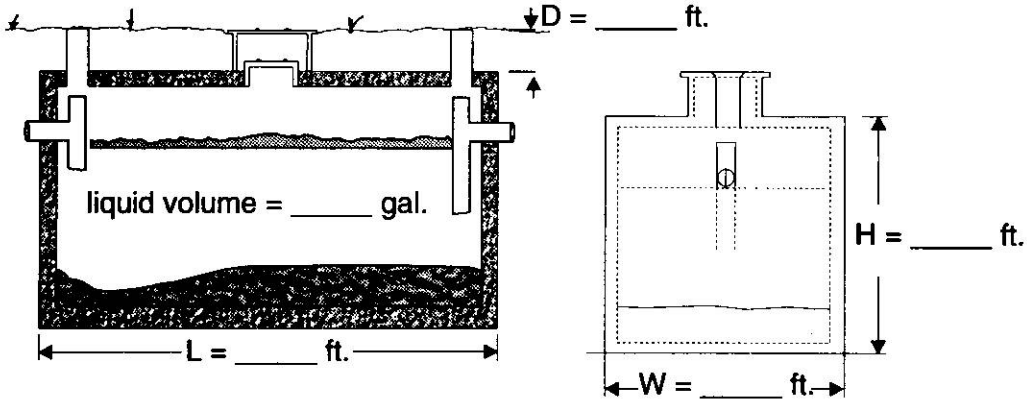
FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

405

KEY

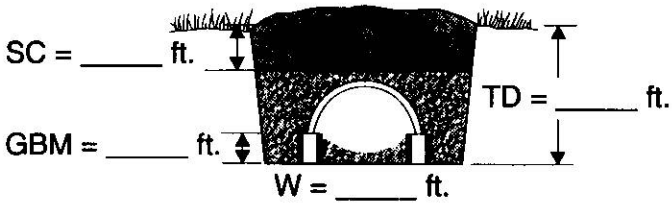
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D = Depth of Cover

F. SEPTIC TANK DIMENSIONS

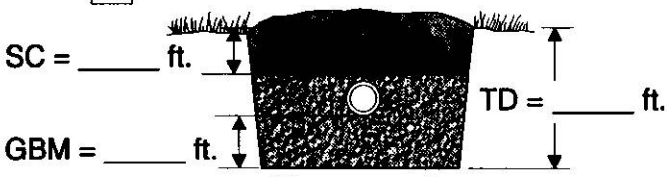


G. Check the Box for the Appropriate Absorbtion Field and Complete the Blanks

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☐ PIPE IN GRAVEL



☐ OTHER: Include Drawing

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WEST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____	PROPOSED SEPTIC SYSTEM INSTALLATION	EAST Distance in Feet **From Tank Field** WELL:_____ WATER LINES:_____
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2. Have your sewage disposal system engineer/installer survey the site to determine the proper location of the system. The location of building/s, well/s, property lines, percolation test holes, proposed system and laterals must be considered. (Complete Form C) Remember to include a plot plan and that ***both your installer and your home building contractor must sign Form C.***
3. Obtain site clearance. (Complete Form A) If the building site is (a) within the 3-mile jurisdiction of Lincoln, or (b) in the county, but not within the 1-mile jurisdiction of an incorporated city or village, then submit your completed forms to LLCHD. If the building site is within the 1-mile jurisdiction of Hickman or Waverly, or an incorporated village, then you will need to first take Form A to the City of Village Clerk for approval. The clerk will return Form A to you, and you can then submit your completed Form A to LLCHD.
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6. The installed system requires a final approval. The LLCHD must be notified when the installation is ready for final inspection.

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Inspection Phone No.

441-8022

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

Exhibit 6

Permit Number: H S001641

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 9/10/19

Legal Description ____ ¼ ____ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 6360 S 162nd City ____

Owner ____ Address ____

Mark One: ☑ Dwelling ☐ Non-dwelling

☑ New System ☐ Repair

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): ____

Lagoon constructed so not to receive surface water — Yes ✓ No ___
Lagoon floor is level — Yes ✓ No ___
Lagoon is equipped with a depth gage/concrete slab — Yes ✓ No ___
Influent line is at least 4 inches and slopes no less than 1/8 inch — Yes ✓ No ___
Clean outs located every 75 feet and one located 1 foot about highest water level — Yes ✓ No ___
Inside slope not steeper than three horizontal to one vertical — Yes ✓ No ___
Minimum width of the top of the dike shall be 4 feet — Yes ✓ No ___
Fence installed — Yes ✓ No ___
Top of the Dike 78' Bottom of Lagoon 42' Design Flow 450 gpd

6/25/19 Yes (circled) No ✓ — Fence Complete sized to 5 bd. as per Leonard Harper

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

Surface Water distance from Water Mark	Private Drinking Water Wells	Public Drinking Water Supply Wells		All Other Water Wells	Property Lines	Trees and Brush	Neighbor's Foundation		All Other Setbacks
50 ft ☑	100 ft ☑	Non-Community	100ft ☐	100ft ☐	50ft ☐	50ft ☐	Class 1	200ft ☐	☐
Rural Water		Community	* ☐				Class 2	200ft ☐	
							Class 3	100ft ☐	

*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: ____

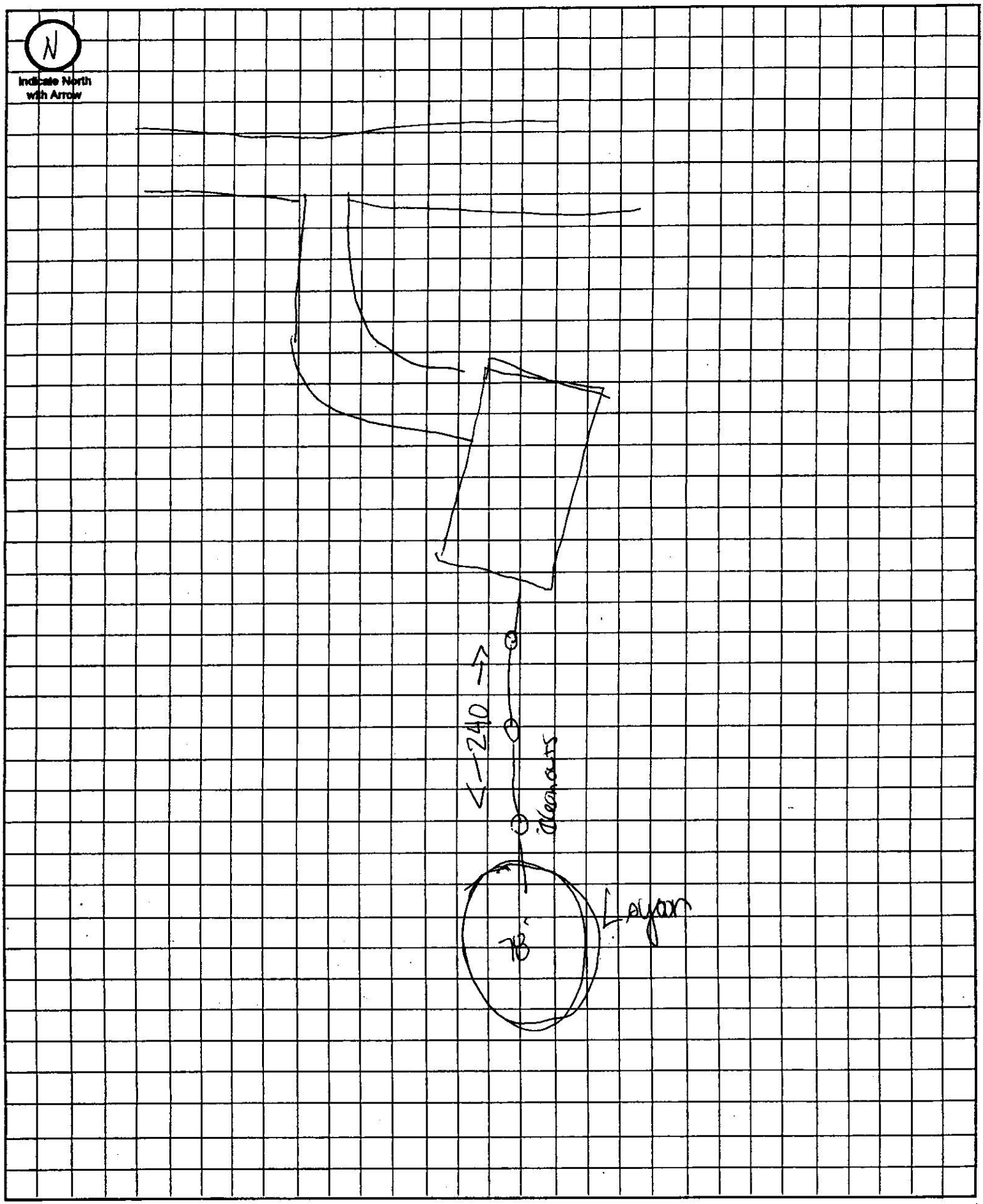
Dike North side N/A

Comments:

Inspections prior to Final Approval
Initial DJ Date 4/10/19
Follow-Up DJ Date 6/25/19
Follow-Up ____ Date ____
Installation Final Written Approval
By [redacted]
Date 6/26/19

Updated 4/15

As Built Drawing



Approximate Scale: _____ ft. = _____ grid line/s

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 4/9/19

System Location (Indicate correct number and street)

Address _____ City Walton NE, Zip 68461
(no rural route)

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: 1' in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line NA ft.
   stream NA ft.
   pressure line NA ft.
   property line 150' ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

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

D. Absorption Field

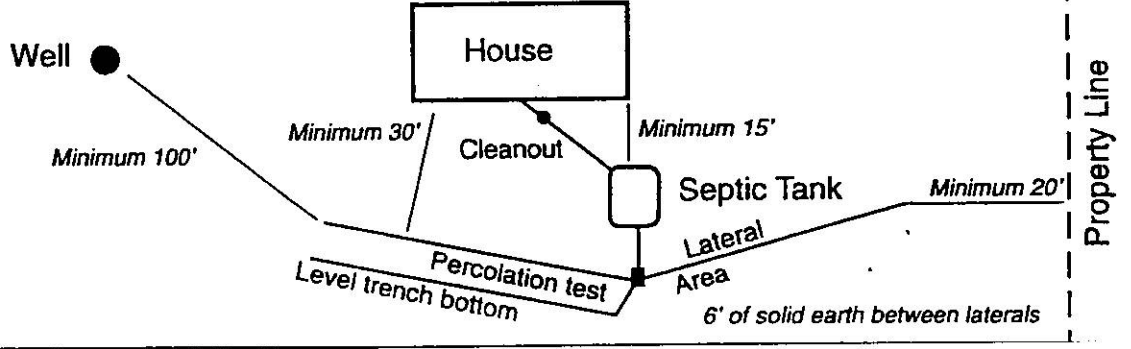
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Complete "As Built" drawing on back of this form.

Indicate North with Arrow

Individual Sewage System Design (Example)



Nate C. Hartman

From: RJ Hamilton
Sent: Monday, April 16, 2018 3:29 PM
To: Nate C. Hartman
Subject: 6360 S. 162nd

Nate,

6360 S. 162nd St. is a buildable lot. The legal description is S14-T9-R8, Lot 51. This lot does not have any floodplain on it.

Thank you,

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

Nate C. Hartman

From: Ken D. Schroeder
Sent: Monday, April 16, 2018 6:16 PM
To: Nate C. Hartman
Cc: Pamela L. Dingman
Subject: sewage disposal systems for PID #03 26 100 015 000 (and) PID #22 14 300 005 000
Attachments: part of sec 14-9-8.pdf; part of sec 26-9-5.pdf

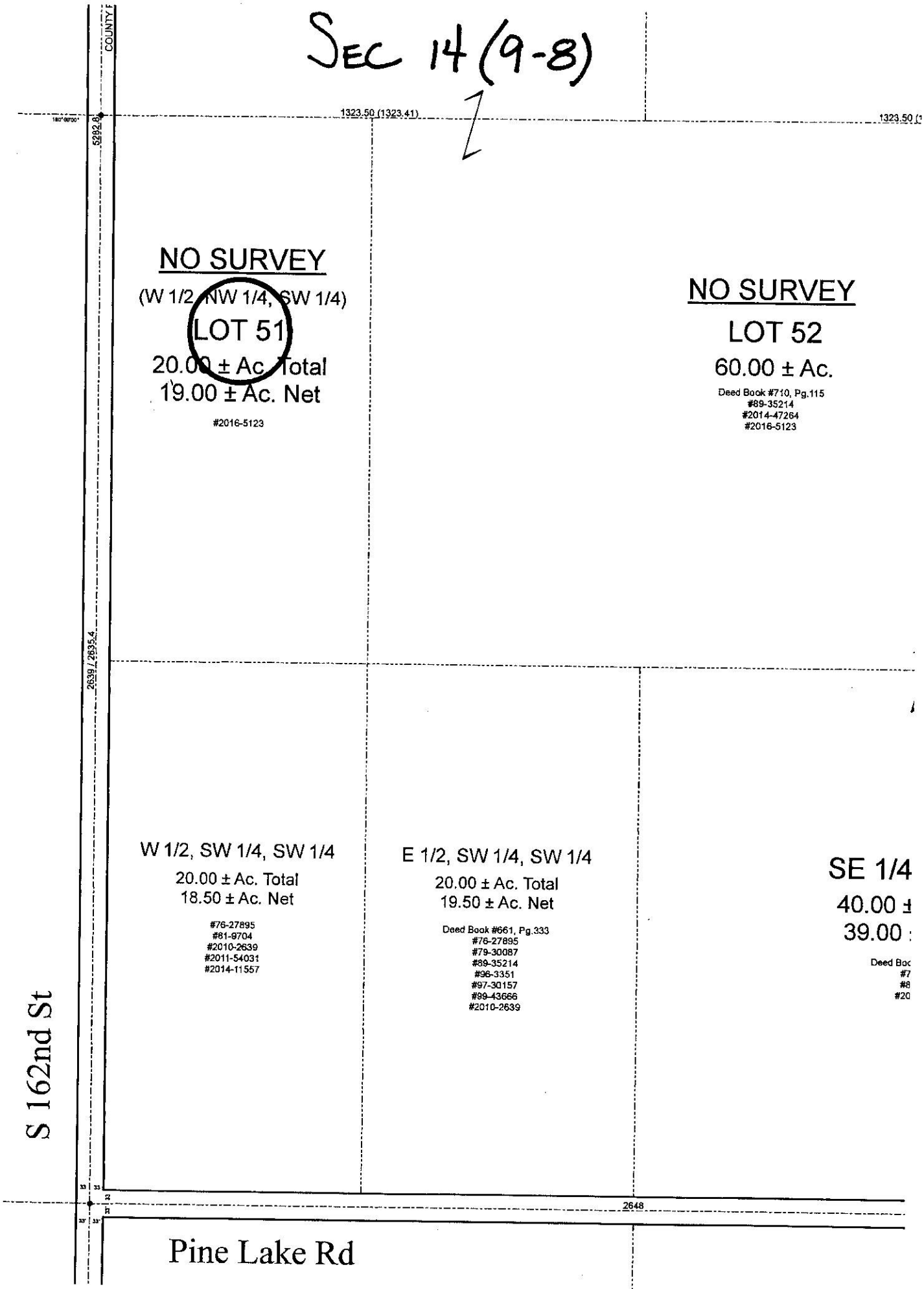
Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for Lot 32 irregular tracts located in the NW ¼ of Section 26, T9N, R5E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec.26-9-5)*

(AND)

Lancaster County Engineering Department indicates approval for a sewage disposal system for Lot 51 irregular tracts located in the SW ¼ of Section 14, T9N, R8E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec.14-9-8)*

As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.
Ken

Kenneth D. Schroeder, RLS
Lancaster County Surveyor
444 Cherrycreek Road, Bldg. "C"
Lincoln, Nebraska 68528
kschroeder@lancaster.ne.gov
Phone (402) 441-7681
Fax (402) 441-8692


SEC 14 (9-8)
COUNTY F
1323.50 (1323.41)
1323.50 (1
5282.8
2639 / 2635.4
NO SURVEY
(W 1/2, NW 1/4, SW 1/4)
LOT 51
20.00 ± Ac. Total
19.00 ± Ac. Net
#2016-5123
NO SURVEY
LOT 52
60.00 ± Ac.
Deed Book #710, Pg.115
#89-35214
#2014-47264
#2016-5123
W 1/2, SW 1/4, SW 1/4
20.00 ± Ac. Total
18.50 ± Ac. Net
#76-27895
#81-9704
#2010-2639
#2011-54031
#2014-11557
E 1/2, SW 1/4, SW 1/4
20.00 ± Ac. Total
19.50 ± Ac. Net
Deed Book #661, Pg.333
#76-27895
#79-30087
#89-35214
#96-3351
#97-30157
#99-43666
#2010-2639
SE 1/4
40.00 ±
39.00
Deed Boo
#7
#8
#20
2648
S 162nd St
Pine Lake Rd