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

A

Permit Number
#S001643

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 11345 Whispering Creek Dr (no rural route) City Walton, NE Zip 68461

Legal Description N1/2 (1/4) 18 (Section) 9N (Township) 8E (Range) Whispering Creek Add (Subdivison) 4 (Addition) 4 (Block) (Lot)

PID 22-18-204-004-000

B. Owner

Name Roger Bumgarner Signature

Address 7222 S 97th St City/State/Zip Lincoln, NE 68526

Home Phone 402-580-7955 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:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 3.12
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 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 4-18-18 Amount Paid $405.00
Received By JAD Cash/Check No. CC 7152

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: 402-441-8022

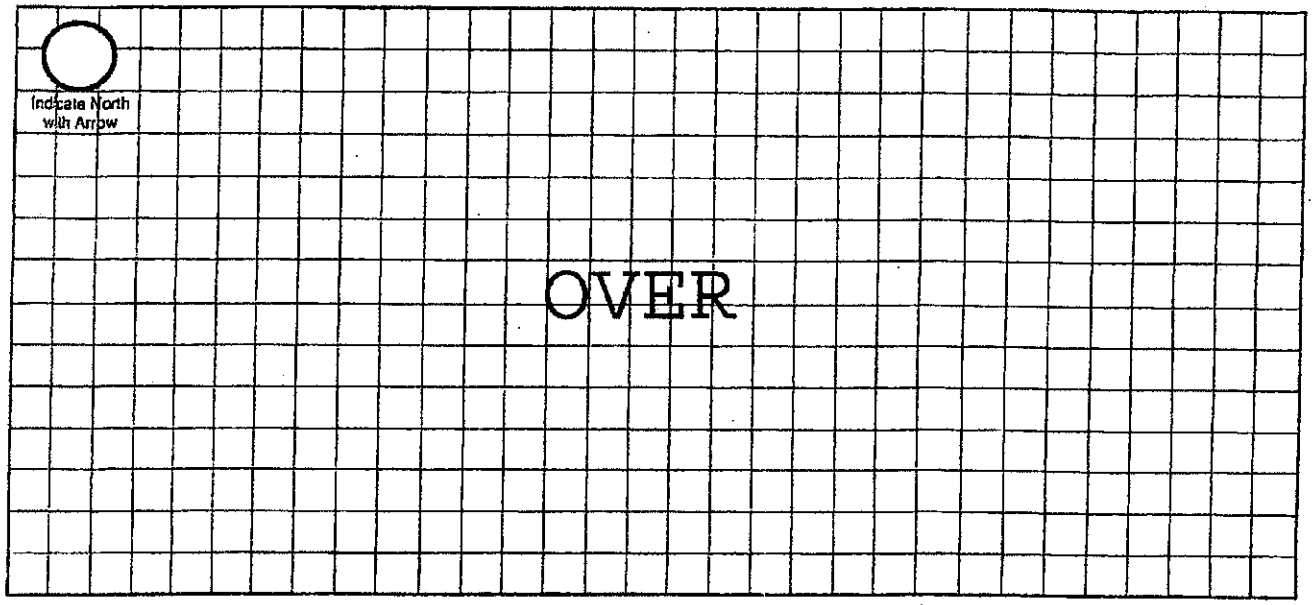
C

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) 11345 Whispering Creek Dr City Walton NE, Zip 68461

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____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_____

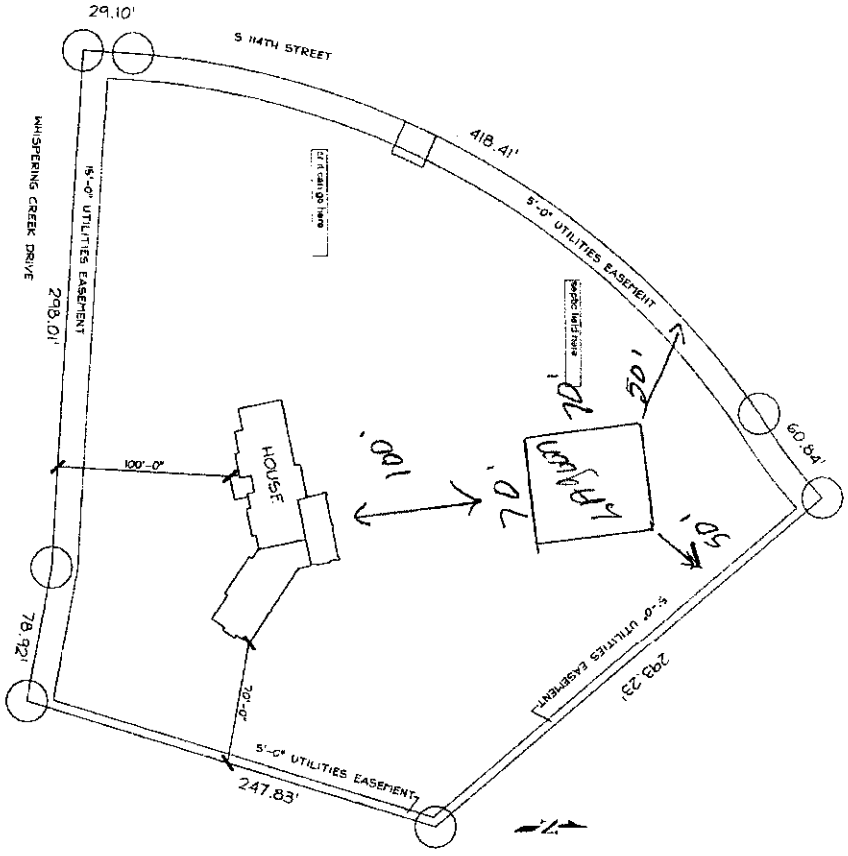
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

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 4-17-18

Installer _____ Date 4-17-18


N
29.10'
S 114TH STREET
418.41'
WHISPERING CREEK DRIVE
15'-0" UTILITIES EASEMENT
298.01'
5'-0" UTILITIES EASEMENT
60.84'
HOUSE
100'-0"
100'
70'
Asphalt
20'
50'
78.92'
70'-0"
5'-0" UTILITIES EASEMENT
283.23'
247.83'
N

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. HS001643

System Type: Lagoon

Situs: 11345 WHISPERING CREEK DR, LINCOLN, NE 68461

Issued: 4/23/2018

Expires: 4/23/2019

Description: WHISPERING CREEK ADDITION, BLOCK 4, Lot 4

Owner: BUMGARNER, ROGER & STEPHANIE
7222 S 97 ST
LINCOLN, NE 68526

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 CONTRACTING
13800 NW 70TH ST
RAYMOND, NE 68428

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

B

Permit Number: HS001643

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 11345 Whispering Creek Dr (no rural route) City Walton NE, Zip 68461

Owner Roger Bumgarner Address 7222 S 97th St, Lincoln, NE 68526

Date of Tests 6/13/18 to 6/14/18 Weather: Precipitation 0 Temperature 97 °

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	70	6/13	9:00a	6/13	1:00p	6/14	3:30p	6	6/14	4:00p	30	5/8	48
2	65	"	"	"	"	"	"	6	"	"	"	7/8	34
3	70	"	"	"	"	"	"	6	"	"	"	7/8	34
4	68	"	"	"	"	"	"	6	"	"	"	1	30
								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: 146
Average of Rates: 37
Rate Used for Calculation: 37

Soil type (NRCS Maps/Other) Wymore SCL
Groundwater Depth >12'

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

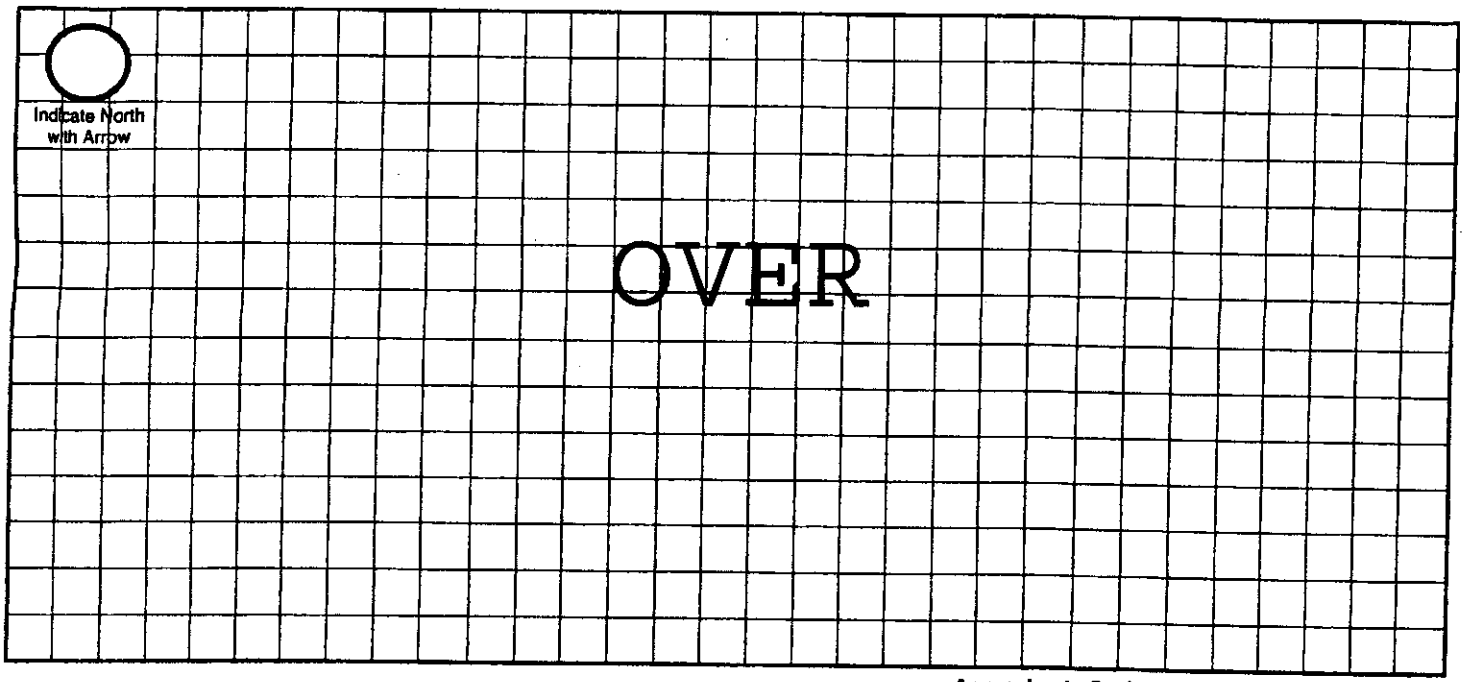
C

Permit Number: HS001643

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) 11345 Whispering Creek Dr City Walton NE, Zip 68461

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 (percoloation test required) ☒ Lagoon

D. Drainfield Absorption System

Percolation Rate 37 (min/inch = mpi) No. of Bedrooms 5 Soil Type_____ Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,400 sq.ft.

Total length of laterals 420 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 4 Width 3.333' No. of drop boxes 1 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

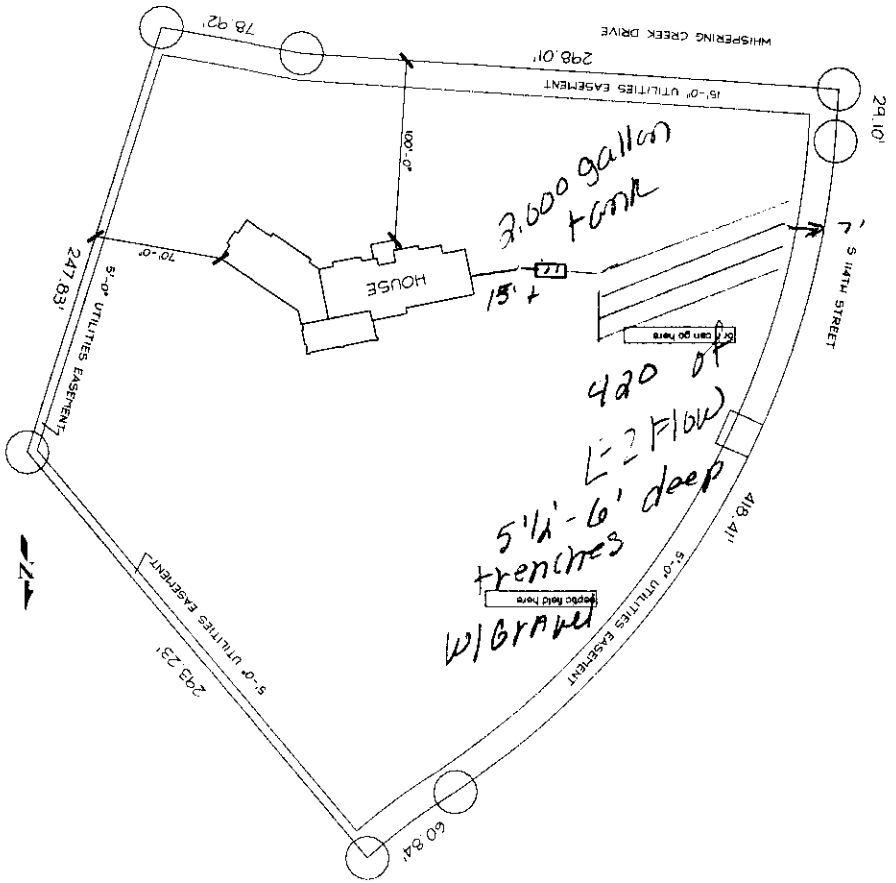
5' to 6' deep trench lined with Gravel

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 Kevin L. Johnson Date 7/17/18

Installer_____ Date_____


WHISPERING CREEK DRIVE
78.92'
298.01'
15'-0" UTILITIES EASEMENT
29.10'
100'-0"
3,600 gallon tank
HOUSE
70'-0"
247.83'
5'-0" UTILITIES EASEMENT
15' ±
7'
S 114TH STREET
Can go here
420 LF
L-2 Flow
5½'-6' deep trenches
w/Gravel
Septic field here
416.41'
5'-0" UTILITIES EASEMENT
243.23'
5'-0" UTILITIES EASEMENT
60.84'
N

SCANNED

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

A

Permit Number
#S001643

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 11345 Whispering Creek Dr (no rural route) City Walton, NE Zip 68461

Legal Description: N1/2 (1/4) 18 (1/4 Section) 9N (Township) 8E (Range) Whispering Creek Add (Subdivison) 4 (Addition) 4 (Block) (Lot)

PID 22-18-204-004-000

B. Owner

Name Roger Bumgarner Signature

Address 7222 S 97th St City/State/Zip Lincoln, NE 68526

Home Phone 402-580-7955 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:

Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 3.12
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 4/23/18
Date frwd 4/23/18
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 8/1/18

Business Office Use Only
Date Received 4-18-18 Amount Paid $405.00
Received By JAD Cash/Check No. CC 7152

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

Form A Updated: 1/13

Covered porch to Inspection

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

D Exhibit 4

Permit Number: HS001643

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 PID=22-18-204-004-000

Address or Legal Description or Parcel Identification Number (PID) 11345 Whispering Creek Dr, Walton, NE 68461

Owner: Roger Bumgarner Address 7222 S 97th St, Lincoln, NE 68526

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 56 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2,000
3. Depth to top of tank, below unfinished grade: 12-18 in.
4. Distance to:
   Well N/A ft.+
   Pressure line N/A ft
   Property Line 50 ft.+
   Foundation 30 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 40 ft. S

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: EZFlow 1203H Bundles
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 100 ft. 110 ft. 100 ft. 110
4. Drainfield size: 1,400 sq. ft. 1375 Req'd
5. Distance to:
   Well N/A ft.+
   Pressure line N/A ft.
   Property line 30 ft.+
   Depth of Groundwater >12'

Lateral trenches are 40" wide & 54" to 72" deep, lined with 12" to 18" of gravel.

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No (Partially)

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: [signature] Date: 7/23/18

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

Updated 4/15

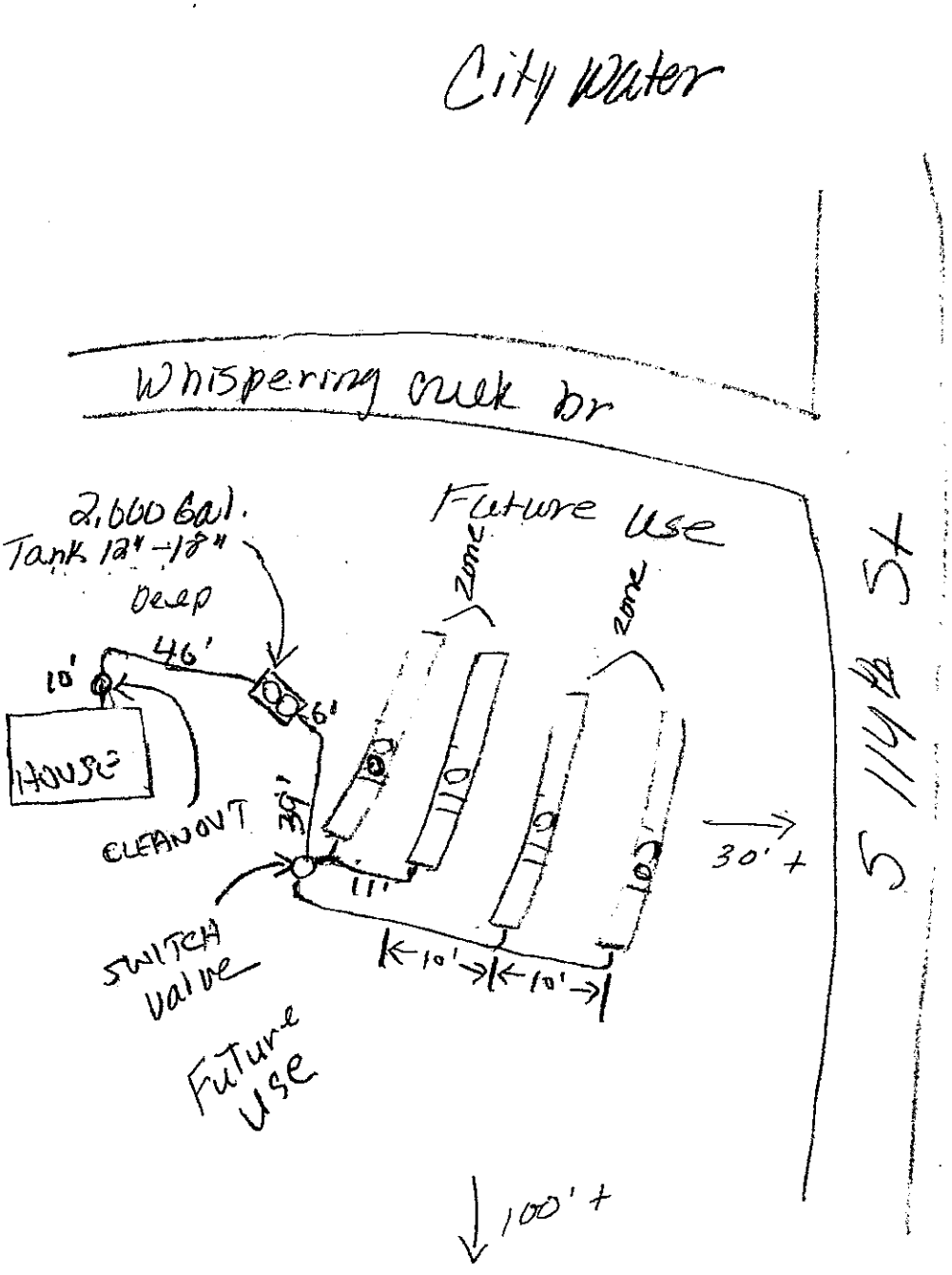
Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Friday, July 27, 2018 12:09 PM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 11345 Whispering Creek D-Sheet
Attachments: 11345 Whispering Creek Dr D-Sheet.pdf

HS001643 attached.

Thanks,

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-783-2341 (Fax)
402-890-3870 (Mobile)
jakoubek63@windstream.net



7/23/18

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663