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

A

Permit Number HS001661

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)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 2550 Firth Rd City Cortland, NE Zip 68358
(no rural route)

Legal Description 30 7 7 6th Principal Meridian 5SW
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 14-30-300-002-000 *Approx. Address (If to be determined)

B. Owner

Name Jordan Backelman Signature

Address 2828 W 56th City/State/Zip Lincoln, NE 68504

Home Phone Work Phone

C. Certified Installer

Name: Marcus Hochstein Signature

Address 625 S. 4th PO Box 142 City/State/Zip Eagle, NE 68347

Work Phone (402)-730-7749

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 21.47
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

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 5-14-18 Amount Paid $405.00
Received By JMO Cash/Check No. 1748

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

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

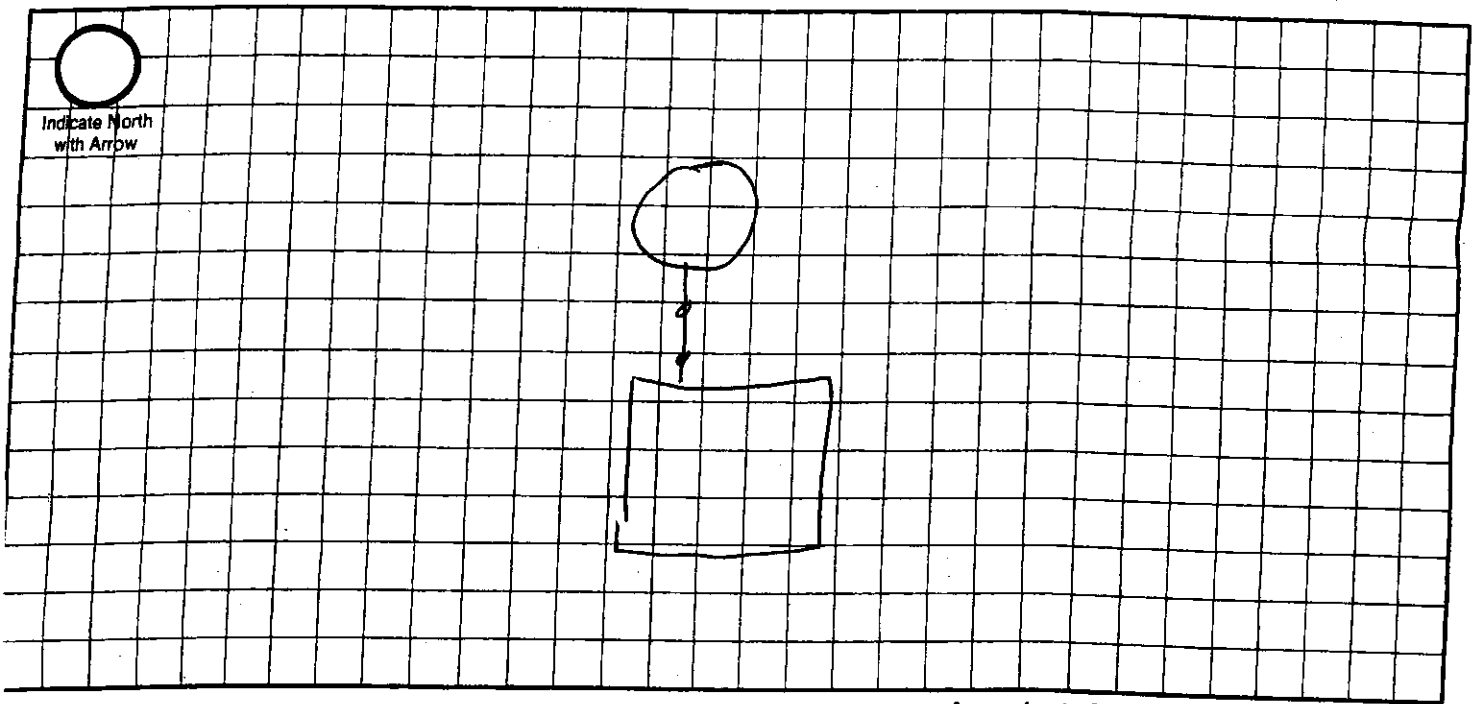
C

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) 2550 Firth Rd City Cortland NE, Zip 68358

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 65 (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_____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 ☐	☐
agoon (ft)	100 ☑	500 ☑	50 ☑	N/A ☐	30 ☑	50 ☑	100 ☑	200 ☑	☐

F. Required Signatures

Home Building Contractor _____ Date 5-11-18

Installer Date

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. HS001661

System Type: Lagoon

Situs: 2550 FIRTH RD, CORTLAND, NE 68358

Issued: 5/17/2018

Expires: 5/17/2019

Description: S30, T7, R7, 6th Principal Meridian, LOT 5 SW

Owner: BOCKELMAN, JORDAN
2828 N 56 ST
LINCOLN, NE 68504

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

MARCUS HOCHSTEIN
625 S 4TH PO BOX 142
EAGLE, NE 68347

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

A

Permit Number
HS001661

JUN 2 9 2018

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)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 2550 Firth Rd (no rural route) City Cortland, NE Zip 68358

Legal Description 30 7 7 6th Principal Meridian 554

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

PID 14-30-300-002-000 *Approx. Address (If to be determined)

B. Owner

Name Jordan Bachelman Signature

Address 2928 N 56th City/State/Zip Lincoln NE 68504

Home Phone Work Phone

C. Certified Installer

Name: Marcus Hochstein Signature

Address 625 S. 4th PO Box 142 City/State/Zip Eagle, NE 68347

Work Phone 402-770-7749

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 21.47
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

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 Amount Paid
Received By Cash/Check No.

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

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

JUN 2 9 2018

Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 2550 Fifth Rd (no rural route) City Cortland NE, Zip 68358

Owner Jordan Bachelman Address 2828 N 56th Lincoln, NE 68504

Date of Tests 5-27 to 5-28 Weather: Precipitation 0 Temperature 87-94°F

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				Water Level Drop G. H. I. J. K. 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	40	5-27	5:00	5-28	9:44	5-28	1:14	6	5-28	1:44	30 min	1/2	60
2	"	"	"	"	"	"	"	6	"	"	"	5/8	48
3	"	"	"	"	"	"	"	6	"	"	"	1/2	60
4	"	"	"	"	"	"	"	6	"	"	"	1/2	60
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Marcus Hackbarth
Phone: 402-770-7745
Address PO Box 142
Eagle, NE 68347

Sum of Percolation Rates: 228
Average of Rates: 57
Rate Used for Calculation: 57

Soil type (NRCS Maps/Other) Wymore Silty clay Loam
Groundwater Depth 78"

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

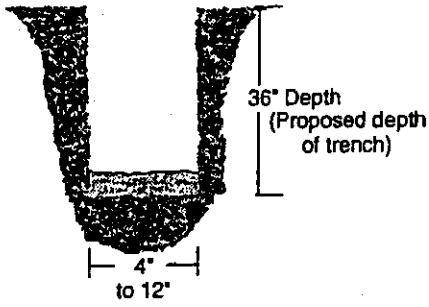
Signature of Reviewing Official _____ Date _____

READ THOROUGHLY

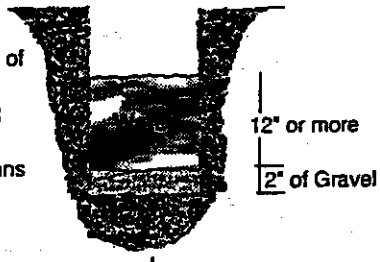
DIAGRAM OF PERCOLATION TEST PROCEDURE

Finished Grade or Natural Ground Level

I. Size, Number, and Location or Test Holes
   - A. Dig six or more holes spaced uniformly over proposed lateral field site.
   - B. Scratch smeared spots on sides of hole.
   - C. Remove loose material from hole.
   - D. Add 2" of gravel to hole.

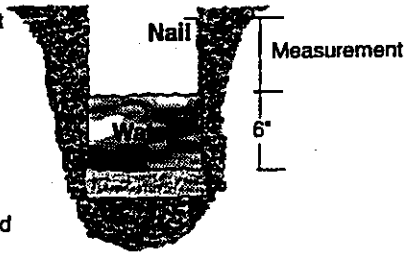


II. Saturation of Soil (Pre-soak)
   - A. Fill hole with 12" or more of water.
   - B. MAINTAIN THIS WATER LEVEL FOR 4 HOURS.
   - C. Record on Form B columns a thru f.



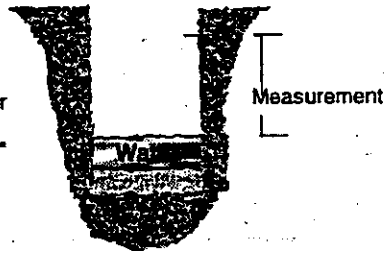
24 Hours Later

III. Percolation-rate Measurement **(refer to instructions 5a, 5b, or 5c.)**
   - A. Add 6" of water.
   - B. Measure from fixed reference point (nail) to water.
   - C. Record measurement and time on front of Form B.



½ hour later
(30 minutes)

   - D. 30 minutes later remeasure and record time.
   - E. If water will be too low for another reading 30 minutes later, adjust to 6" of water and remeasure and record time.



   - F. Continue for 3½ hours taking readings every 30 minutes.
   - G. Last 30 minute reading is used in filling out Form B. Record date, time, intervals and water level drops in column g thru m.

Instructions

1. **Number and location of tests.** Percolation tests shall be made in 6 or more separate test holes which shall be spaced uniformly over the proposed lateral field site.
2. **Type of test hole.** Dig or bore a hole 3 feet deep with a diameter of 4 to 12 inches. (To save time, labor and the volume of water required per test, a 4-inch auger hole is recommended).
3. **Preparation of the test hole.** Scratch or roughen any smeared spots on the sides of the hole with a knife blade or sharp pointed instrument to provide a natural soil interface into which water may percolate. Remove all loose material from the hole. Add 2 inches of gravel to protect the bottom from scouring when water is poured into the hole.
4. **Saturation and swelling of the soil.** Fill the hole with clear water to a depth of 12 inches or more above the gravel and maintain this water level at least 4 hours and preferably overnight. The accuracy and true value of the percolation data depends on thorough saturation and swelling of the soil.
5. **Percolation-rate measurement.** Percolation-rate measurements shall be made 24 hours after starting the saturation and swelling procedure described above. Record results on the front of this form and complete all calculations.
   a. If water remains in the test hole after the overnight swelling period, adjust the depth to approximately 6 inches over the gravel. From a fixed reference point, measure the drop in water level over a 30 minute period to the nearest 1/8 of an inch. This drop is used to calculate the percolation rate.
   b. If no water remains in the test hole after the overnight swelling period, add clear water to bring the depth to approximately 6 inches over the gravel. From a fixed point, measure the drop in water level to the nearest 1/8 of an inch at 30-minute intervals for 4 hours. Refill to the 6 inch level over the gravel as often as necessary. The drop that occurs during the final 30 minutes is used to calculate the percolation rate.
   c. In sandy soils (or other soils in which the first 6 inches of water seeps away in less than 30 minutes after the overnight swelling period) the time interval between measurements shall be 10 minutes instead of 30 minutes and the test run for 1 hour instead of 4 hours. The drop that occurs during the final 10 minutes is used to calculate the percolation rate.
6. **Record the test results and complete all calculations on the front of this form.** The average of the percolation rates calculated for all holes in the last 30 (10) minutes will normally be the rate used for calculations to size the system. ***Exceptions are the use of the greatest percolation rate when rates vary more than 20 min/in between holes or when other soil analysis indicates potential percolation problems.***

LLCHD reserves the right to require additional testing based on knowledge of soil types, percolation tests results on nearby properties, or due to concerns with procedures followed. In some situations, LLCHD staff will require and perform on-site observation of percolation tests.

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

C

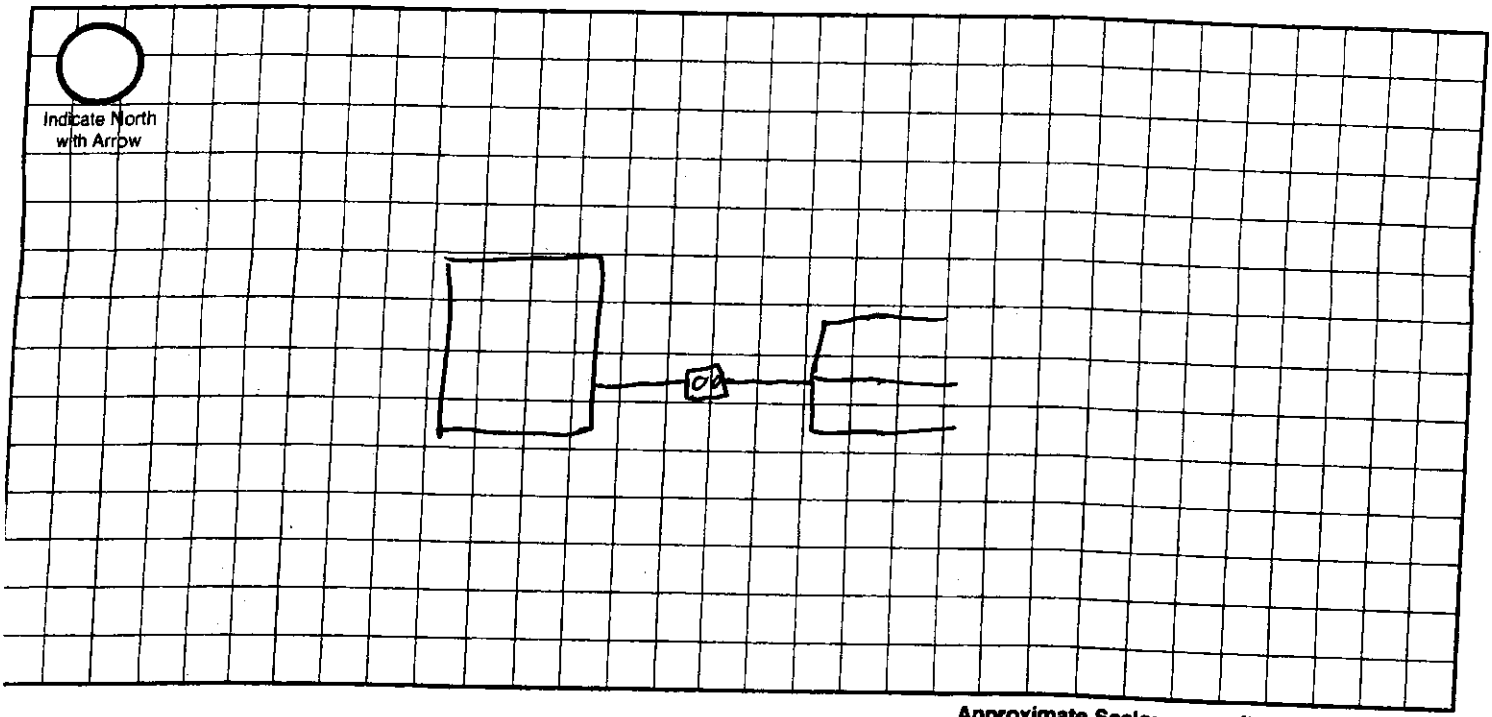
Permit Number:

JUN 2 9 2018

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) 2550 Fifth Rd City Cortland NE, Zip 68358

B. Proposed Septic Tank/s

Septic Tank Cap. 1200 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 60 (min/inch = mpi) No. of Bedrooms 5 Soil Type Wymore Silty Clay Loam Land Slope 0-3 %

☑ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1800 sq.ft.

Total length of laterals 400 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☑ Other

No. of absorption trenches 8 Width 36" No. of drop boxes 0 Distrubtion Box 1

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 ☑	☐
agoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

. Required Signatures

ome Building Contractor_____ Date_____

staller _____ Date 6-20-18

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

SCANNED

A

Permit Number
HS001661

JUN 29 2018

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)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 2550 Firth Rd (no rural route) City Cortland, NE Zip 68358

Legal Description 30 7 7 6th Principal Meridian 5SW

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

PID 14-30-300-002-000 *Approx. Address (If to be determined)

B. Owner

Name Jordan Bachelman Signature

Address 2828 N 56th City/State/Zip Lincoln NE 68504

Home Phone Work Phone

C. Certified Installer

Name: Marcus Hochstein Signature

Address 625 S. 4th PO Box 142 City/State/Zip Eagle, NE 68347

Work Phone 402-770-7749

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 21.47

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

1. Health Department
Site visits 7/16/18 DL
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 Doug Mroz
Date 7/16/18

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

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

Exhibit 5

Permit Number: H5001661

Onsite Wastewater Treatment System

Inspection Sheet

Date 7/16/18 Legal Description ___ ¼ ___ ¼ 30/7/7 Section/Township/Range

Onsite System Location

Address (no rural route) 2550 61st 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 1,800' Sq. Ft. Tank Size 2,000 gals

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

No. of Absorption Laterals 3 Width ___ 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 ___

Lateral #1 N/A Lateral #3 ___

Lateral #2 ___ Lateral #4 ___

Comments:

Inspections prior to Final Approval
Initial DS Date 7/16/18

Follow-Up ___ Date ___

Follow-Up ___ Date ___

Installation Final Written Approval
By Dan Shaw

Date 7/16/18

Field Note Drawing (See Reverse Side):

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

SCANNED

A

Permit Number HS001661

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)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 2550 Firth Rd City Cortland, NE Zip 68358
(no rural route)

Legal Description 30 7 7 6th Principal Meridian 5 Sw
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 14-30-300-002-000 *Approx. Address (If to be determined)

B. Owner

Name Jordan Backelman Signature

Address 2828 W 56th City/State/Zip Lincoln, NE 68504

Home Phone Work Phone

C. Certified Installer

Name: Marcus Hochstein Signature

Address 625 S. 4th PO Box 142 City/State/Zip Eagle, NE 68347

Work Phone 402-730-7749

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 21.47
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

1. Health Department
Site visits
Comments
Date rec'd 5/17/18
Date frwd 5/17/18
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

Business Office Use Only
Date Received 5-14-18 Amount Paid $405.00
Received By JMO Cash/Check No. 1748

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

Form A Updated: 4/15

Nate C. Hartman

From: RJ Hamilton
Sent: Tuesday, May 15, 2018 12:39 PM
To: Nate C. Hartman
Subject: 2550 Firth Rd.

Nate,

2550 Firth Rd with legal address of S-30-S7-R7, lot 5 SW, and PID 1430-200-002-000 is a legal buildable lot. There is no floodplain on the lot. Let me know if you need anything else.

Thanks,

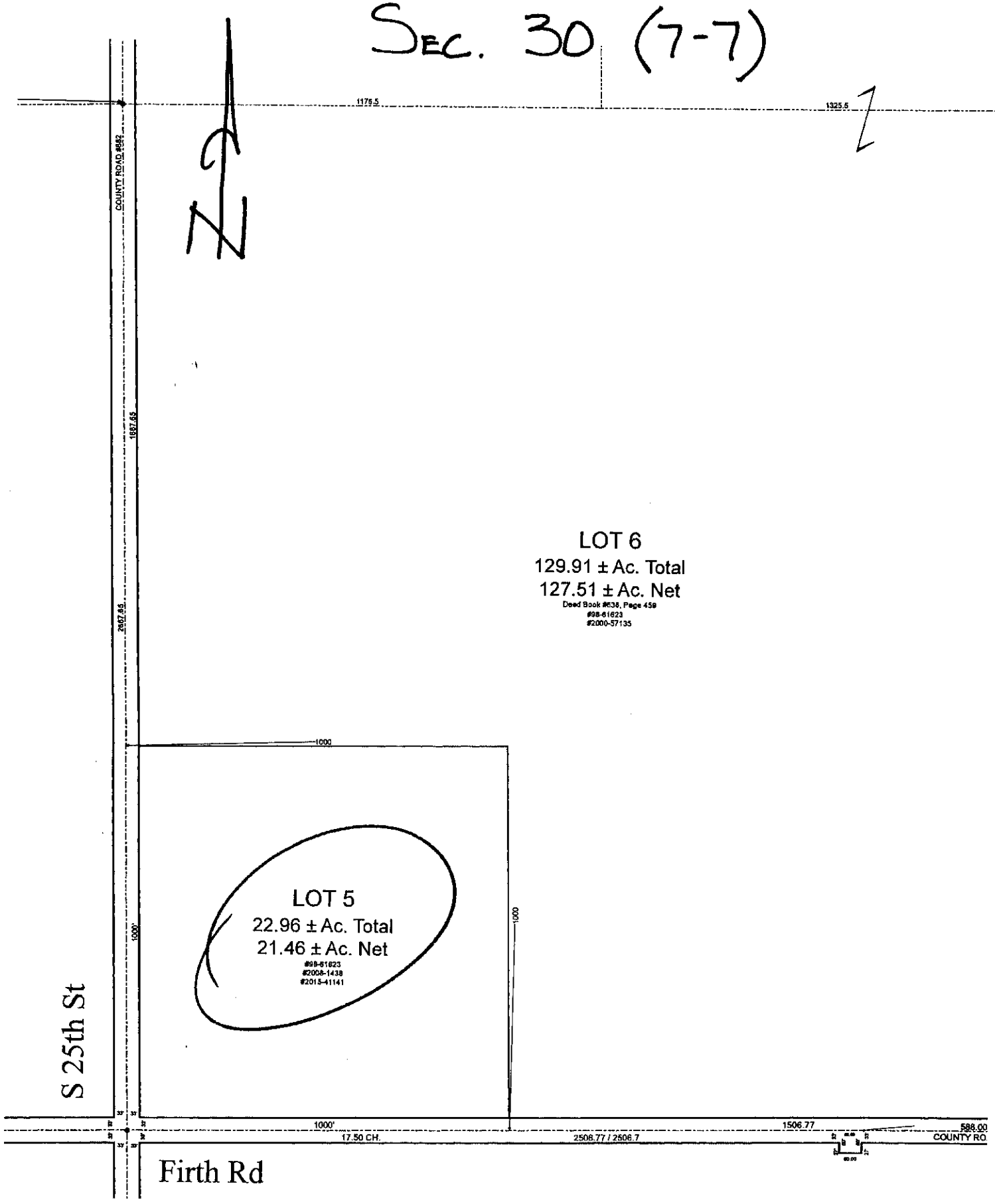
RJ Hamilton
Plans Examiner
City of Lincoln
Building and Safety Dept.
402-441-6424

Nate C. Hartman

From: Ken D. Schroeder
Sent: Tuesday, May 15, 2018 1:27 PM
To: Nate C. Hartman
Cc: Pamela L. Dingman
Subject: sewage disposal system for PID #14 30 300 002 000
Attachments: part of sec 30-7-7.pdf

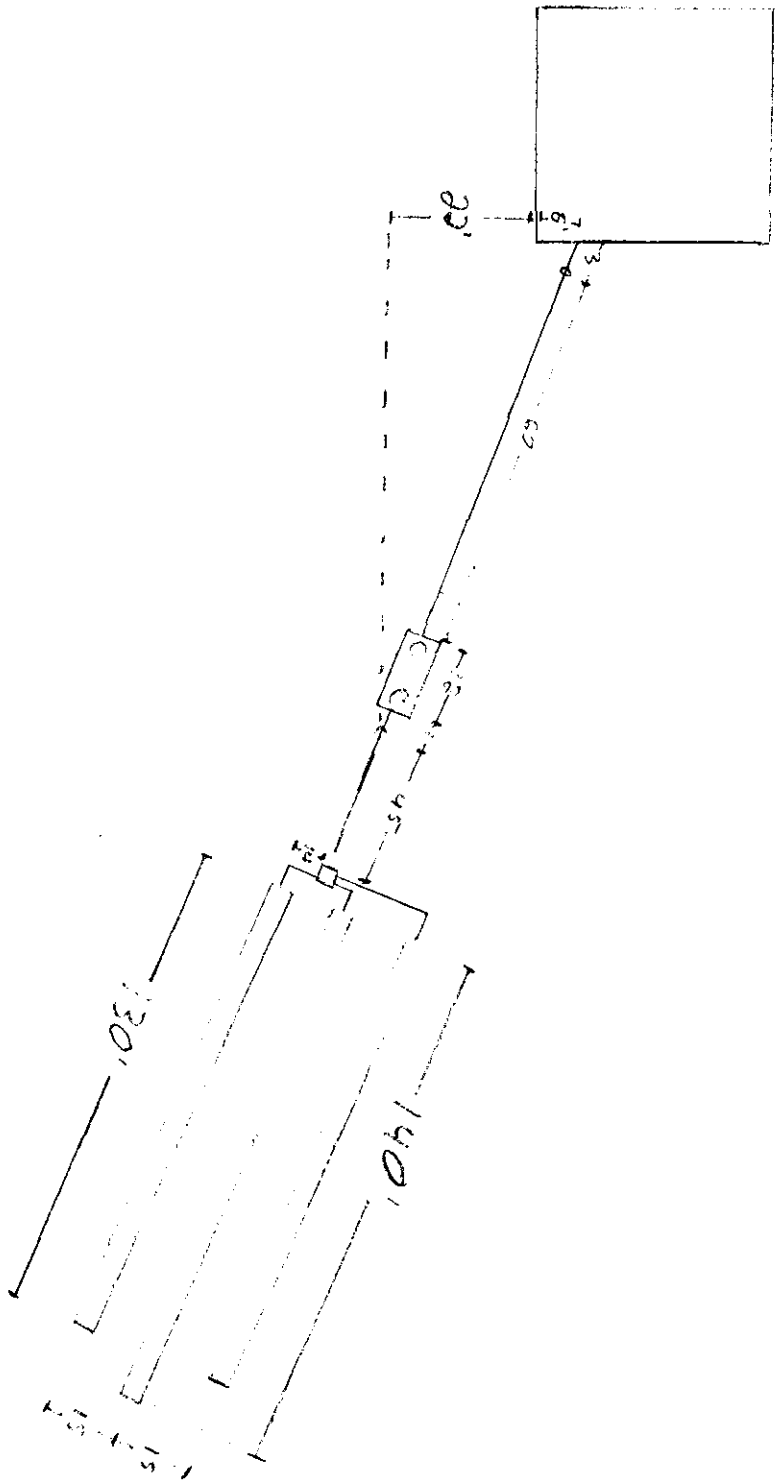
Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for Lot 5 irregular tracts located in the SW ¼ of Section 30, T7N, R7E of the 6th P.M., Lancaster County, Nebraska. *(see attached part of sec.30-7-7)*
As always, subject to confirmation of and compliance with 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. 30 (7-7)
1175.5
1325.5
COUNTY ROAD #882
2667.85
1667.85
LOT 6
129.91 ± Ac. Total
127.51 ± Ac. Net
Deed Book #638, Page 458
#98-61623
#2000-57135
1000
1000'
1000
LOT 5
22.96 ± Ac. Total
21.46 ± Ac. Net
#98-61623
#2008-1438
#2013-41141
S 25th St
1000'
17.50 CH.
2506.77 / 2506.7
1506.77
586.00
COUNTY RD.
Firth Rd

MZ Digger

JUL 23 2018



0550 Flint Rd

11 6-8

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: HS001686

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 = 12-05-301-001-000

Address or Legal Description or Parcel Identification Number (PID) 3800 W Mill Rd, Raymond, NE 684285

Owner: Ryan Brandt Address Same

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between ~~dwelling~~ Existing tank and septic tank: 59 ft.

NEW B. Septic Tank (has an existing 1,000 gallon tank

1. Material Concrete
2. Capacity: 1,000
3. Depth to top of tank, below unfinished grade: 18-24 in.
4. Distance to:
   Well 100 ft.+
   Pressure line N/A ft
   Property Line 100 ft.+
   Foundation 20 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 5 ft. S

(Drainfield Control Valve)

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. 80 ft. 70 ft. 80 ft. 70
4. Drainfield size: 1,350 sq. ft.
5. Distance to:
   Well 100 ft.+
   Pressure line N/A ft.
   Property line 700 ft.+
   Depth of Groundwater >8'

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

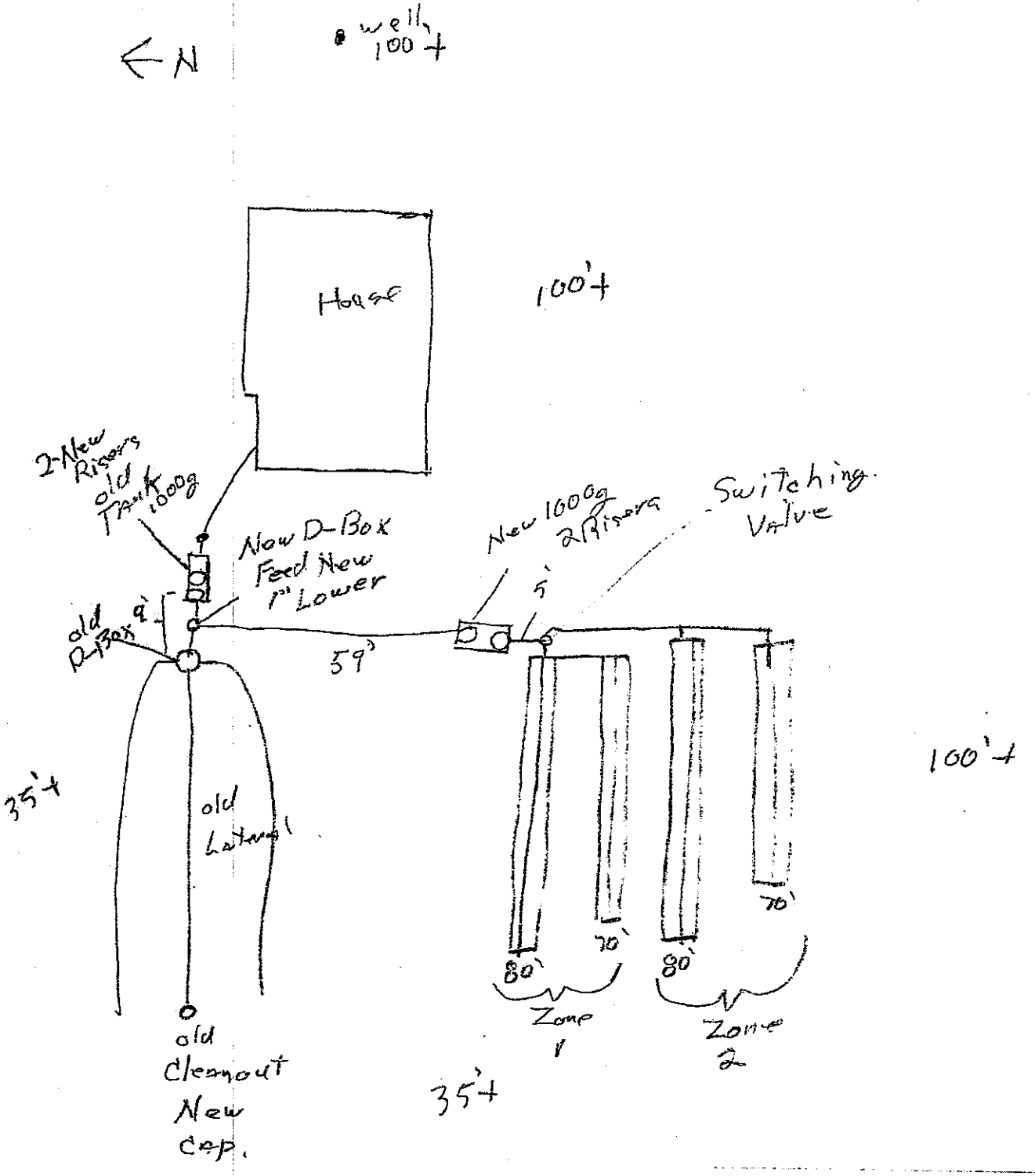
If Yes, the Certified Professional must sign below for final approval: (Partially)

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: 7/12/18

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

Updated 4/15



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

7/12/19