MAY 29 2018

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

A

Permit Number HS001675

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 13505 SW 100th St (no rural route) City Crete, NE Zip 68333

Legal Description NE (1/4) 9 (1/4) 8N (Section) 5E (Township) (Range) (Subdivison) (Addition) 27 (Block) (Lot)

PID 02-09-200-005-000

B. Owner

Name Gary Tuxhorn Signature Gary Tuxhorn

Address 4233 W Billy Ct City/State/Zip Lincoln, NE 68524

Home Phone 816-516-0262 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd Jakoubek

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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 20.5

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
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 5-29-18 Amount Paid $405.00
Received By JAH Cash/Check No. 9394

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

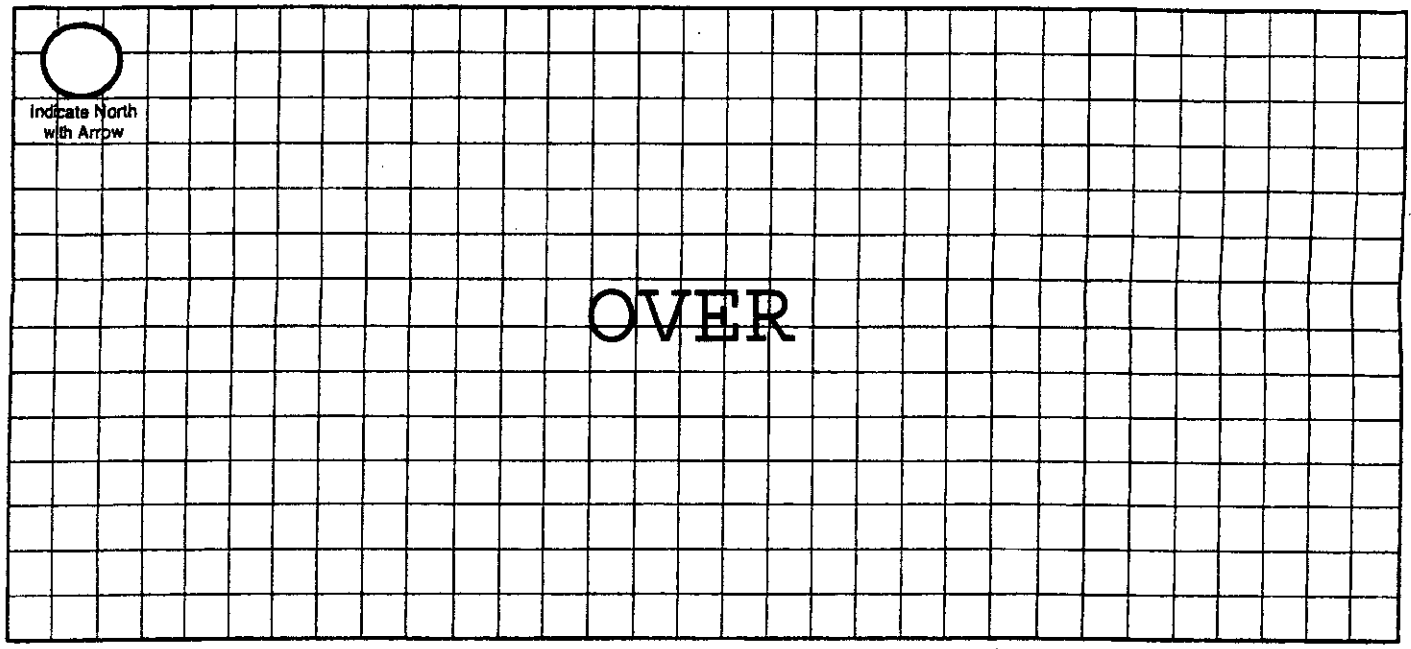
C

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) 13505 SW 100th St City Crete NE, Zip 68333

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

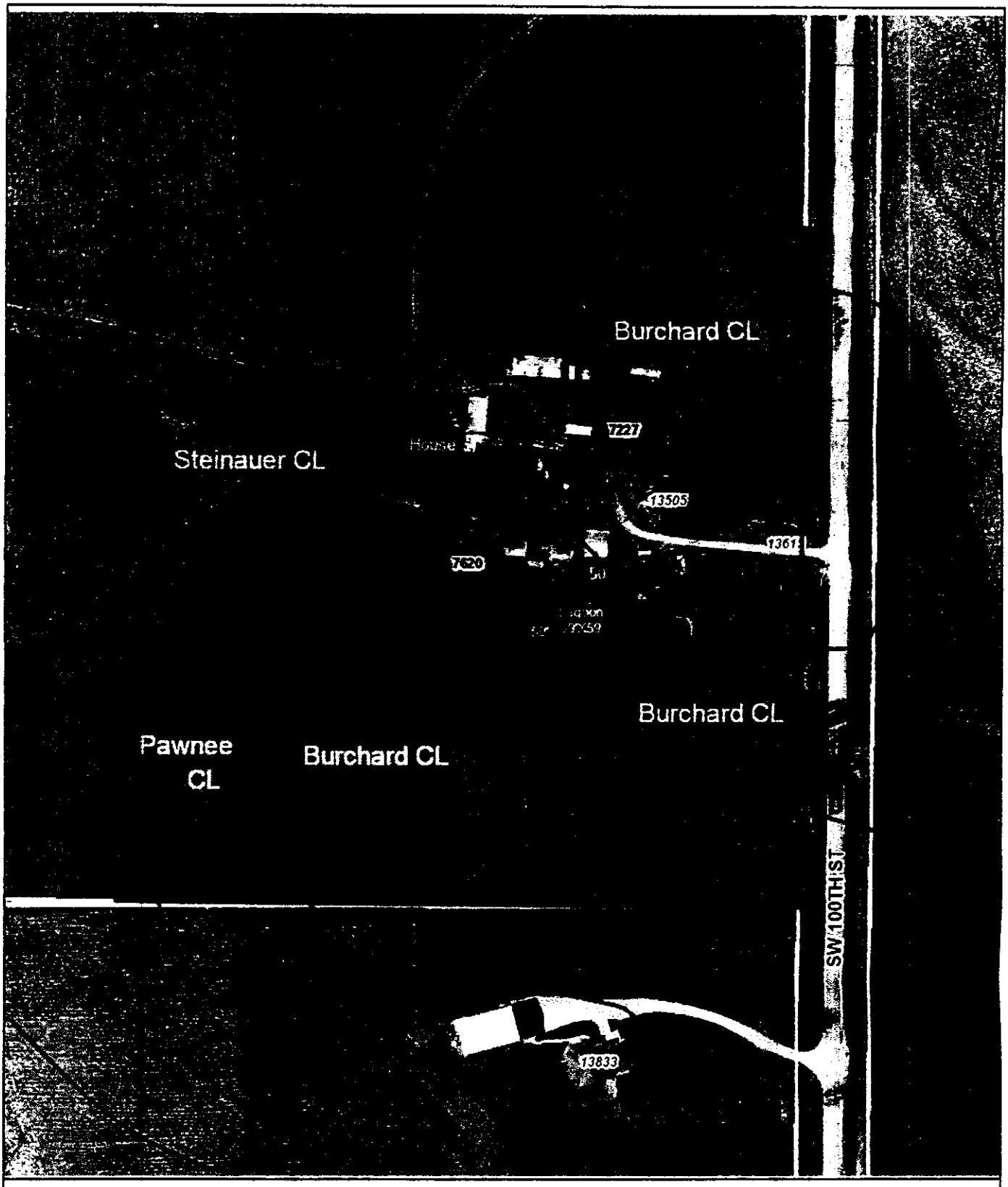
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☒	50 ☒	N/A ☒	30 ☒	50 ☒	100 ☒	200 ☒	☒

F. Required Signatures

Home Building Contractor Gary Taylor Date 28 May 2018

Installer Kevin L Johnson Date 5/29/18

Onsite Form C 12-06



Lancaster County/City of Lincoln GIS Map

N
W E
S

Gary Tuxhorn 816-516-0262 13505 SW 100th St, Crete, NE 68333

Customer Intials GT

Printed: May 28, 2018

DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email ags@lincoln.ne.gov and you will be directed to the appropriate department.

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. HS001675

System Type: Lagoon

Situs: 13505 SW 100TH ST, DENTON, NE 68333

Issued: 5/30/2018

Expires: 5/30/2019

Description: S9, T8, R5, Acres 6th Principal Meridian, LOT 27 NE

Owner: TUXHORN, GARY L
4233 W BILLY CT
LINCOLN, NE 68524

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

LLOYD JAKOUBEK
13800 NW 70TH ST
RAYMOND, NE 68428

SCANNED

MAY 29 2018

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

A

Permit Number HS001675

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

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3 acres or more required for: ☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

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Legal Description NE (1/4) 9 (1/4) 8N (Section) 5E (Township) (Range) (Subdivison) (Addition) (Block) 27 (Lot)

PID 02-09-200-005-000

B. Owner

Name Gary Tuxhorn Signature Gary Tuxhorn

Address 4233 W Billy Ct City/State/Zip Lincoln, NE 68524

Home Phone 816-516-0262 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd Jakoubek

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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 20.5

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. 02-39

1. Health Department
Site visits
Comments
Date rec'd 5/30/18
Date frwd 5/30/18
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 5/22/19

Business Office Use Only
Date Received 5-29-18 Amount Paid $405.00
Received By JAH Cash/Check No. 9394

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

D Exhibit 4

Permit Number: HS001675

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 = 02-09-200-005-000

Address or Legal Description or Parcel Identification Number (PID) 13505 SW 100th St, Crete, NE 68333

Owner: Gary Tuxhorn Address 4233 W Billy Ct, Lincoln, NE 68524

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and ~~septic tank~~ Lagoon: 300 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank ~~below~~ unfinished grade: ____ in.
4. Distance to:
   Well _____ ft
   Pressure line _____ ft
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material and inside width if chamberless: _____
2. Number of Laterals _____
3. Length of each lateral: ft._____ ft._____ ft._____ ft._____
4. Drainfield size _____
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

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

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

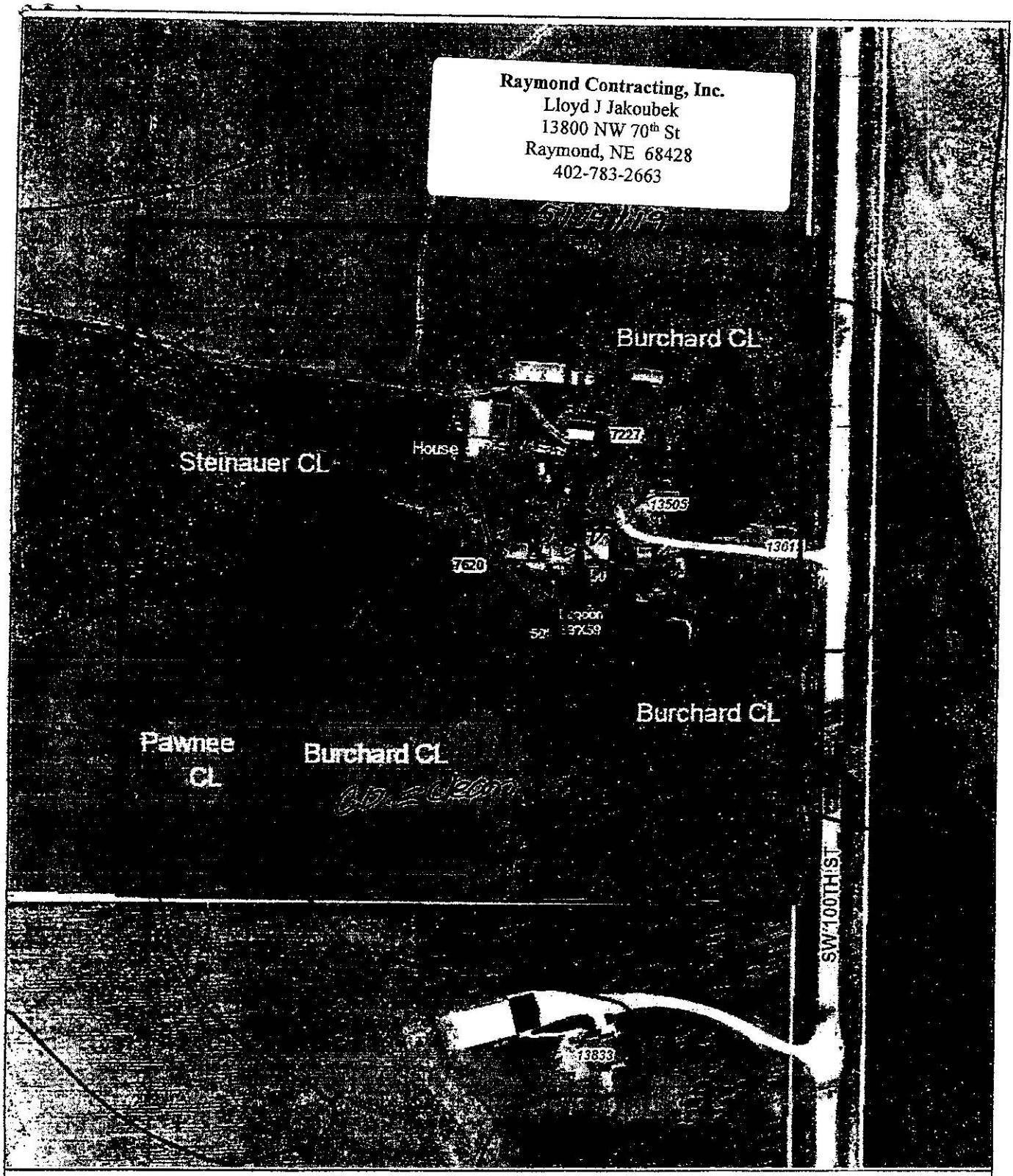
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: _____ Date: 5/14/19

allowed to have one inspection

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

Updated 4/15



Lancaster County/City of Lincoln GIS Map

N
W E
S

Gary Tuxhorn 816-516-0262 13505 SW 100th St, Crete, NE 68333

Well & house

Customer Intials GT

Printed: May 28, 2018

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DY

Fence Installed ✓ NA

5/22/19

Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Thursday, May 16, 2019 2:04 PM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 13505 SW 100th St D-Sheet
Attachments: 13505 SW 100th St D-Sheet.pdf

HS001675 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

SCANNED

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

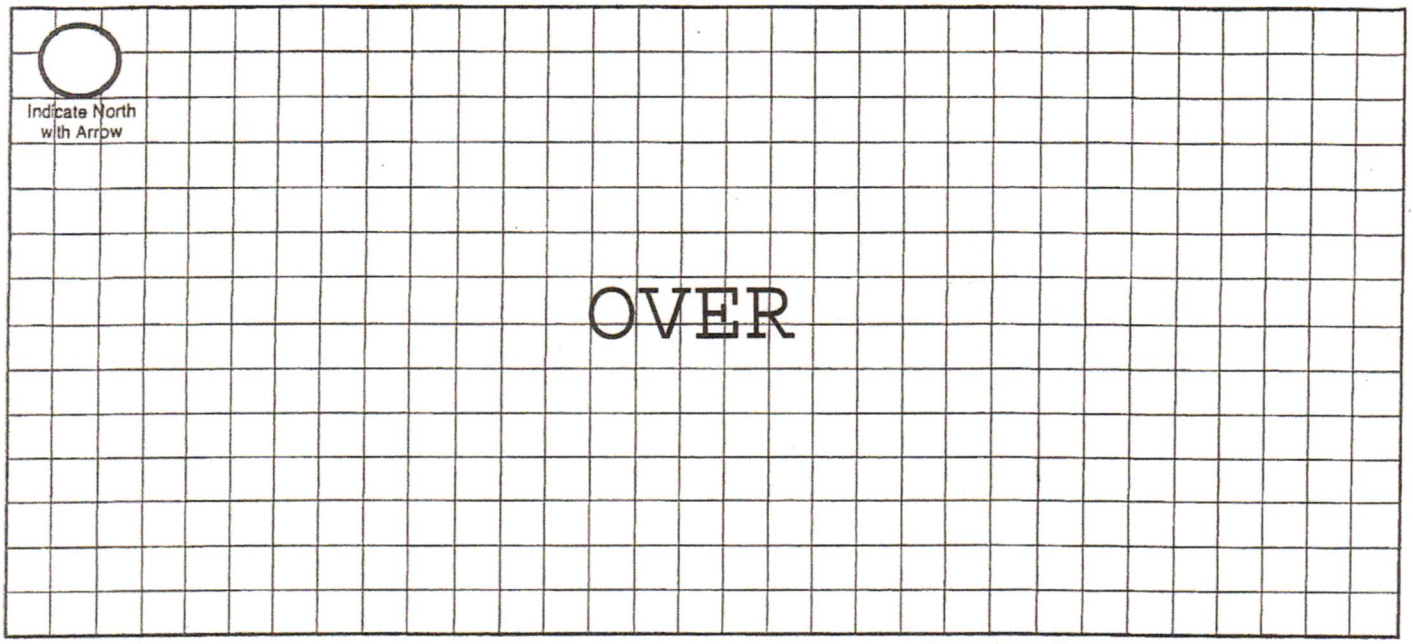
C

Permit Number:

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Approximate Scale: _____ft. = _____ grid line/s

A. Onsite System Location

Address (no rural route) 13505 SW 100th St City Crete NE, Zip 68333

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 (percoloation 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.

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

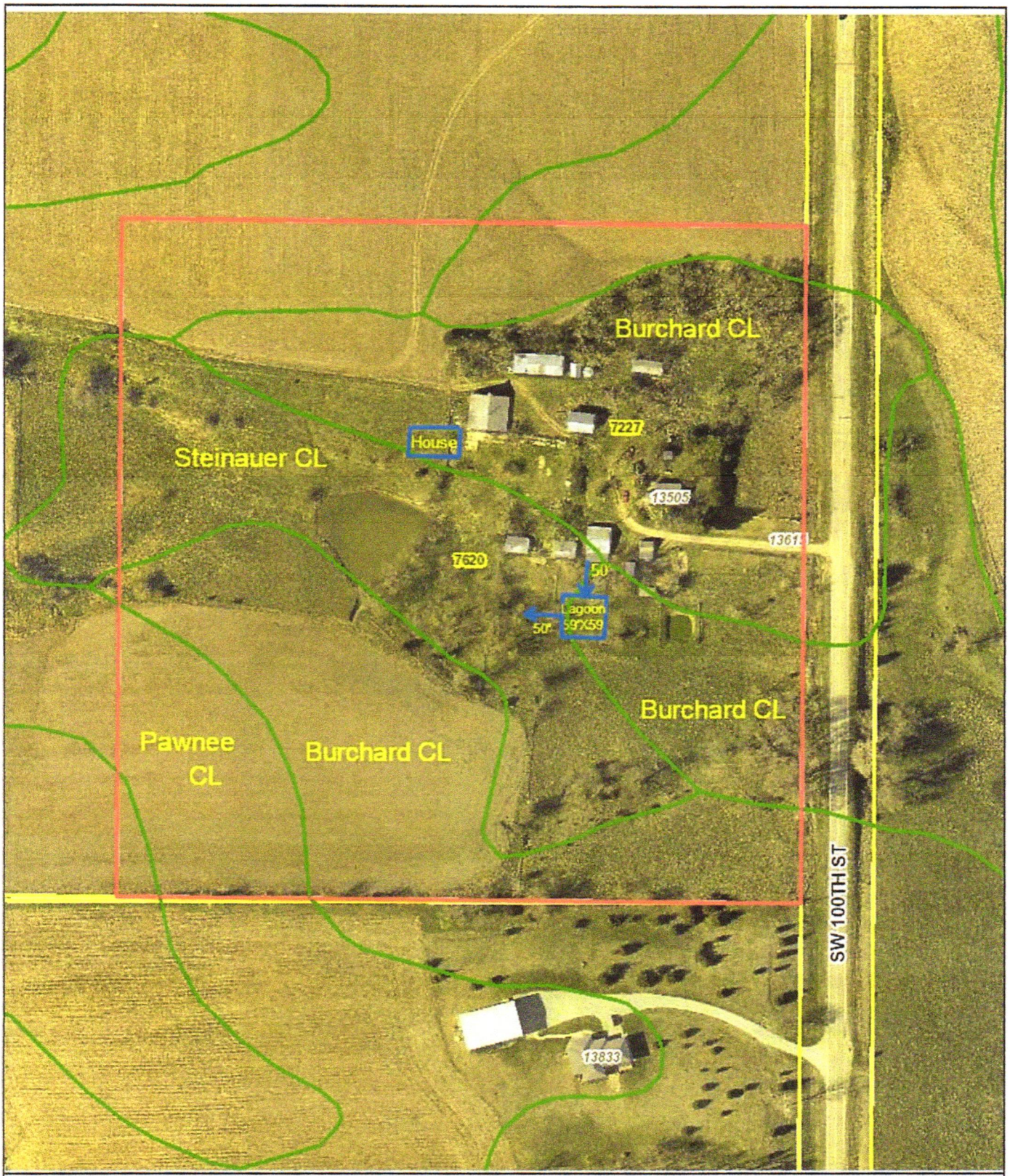
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F. Required Signatures

Home Building Contractor Gary Taylor Date 28 May 2018

Installer Kurt L. Johnson Date 5/29/18

SCANNED



Lancaster County/City of Lincoln GIS Map

N
W E
S

Gary Tuxhorn 816-516-0262 13505 SW 100th St, Crete, NE 68333

Customer Intials GT

Printed: May 28, 2018

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

SCANNED

D Exhibit 4

Permit Number: HS001675

Onsite Wastewater Treatment System
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Type of Onsite Wastewater System: ☒ Lagoon (Skip to Back Page) ☐ Subsurface Septic ☐ Mound

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Owner: Gary Tuxhorn Address 4233 W Billy Ct, Lincoln, NE 68524

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2. Distance between dwelling and ~~septic tank~~ Lagoon: 300 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank ~~below~~ unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type ☐ Perforated Pipe ☐ Chamber ☐ Gravelless ☐ Other
   Material and inside width of chamberless: _____
2. Number of Laterals _____
3. Length of each lateral: ft. _____ ft. _____ ft. _____ ft. _____
4. Drainfield size _____
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

allowed to keep one fence installed

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

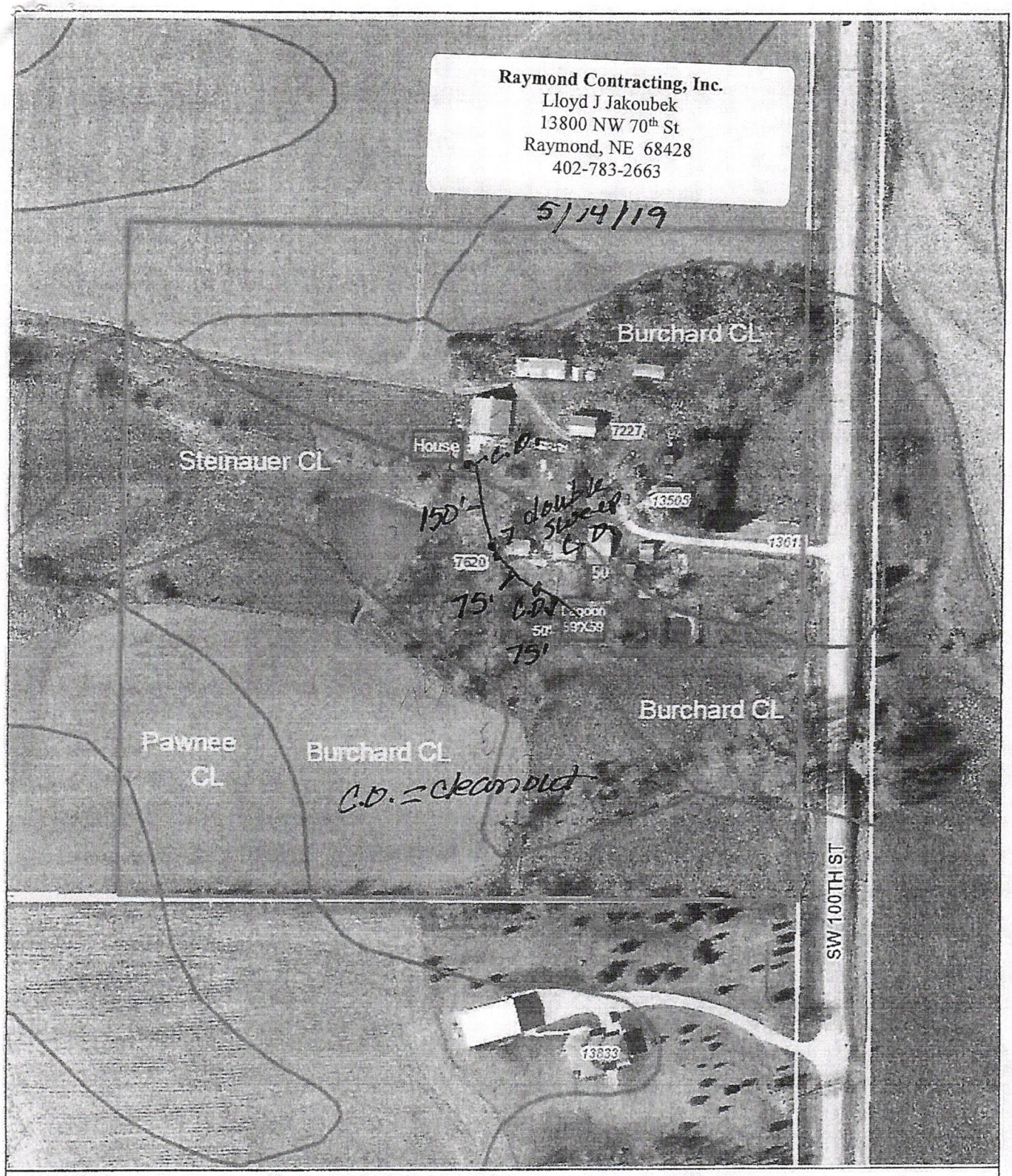
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Certified Professional Signature: _____ Date: 5/14/19

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

SCANNED ✓



Lancaster County/City of Lincoln GIS Map

Gary Tuxhorn 816-516-0262 13505 SW 100th St, Crete, NE 68333

Customer Intials GT

Printed: May 28, 2018

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well & house by

Fence Installed ✓ NA 5/22/19