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

A

Permit Number HS001695

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* 20821 Southwest 128th Street, City Crete, NE Zip 68333
(no rural route)

Legal Description Lot 2 a Part of Lot 3 described in Inst. 2017-49140 Reetz Addition Lancaster County NE
Sec 6 T7N R6E

1/4	1/4	Section	Township	Range	Subdivison	Addition	Block	Lot
								2 & 3

PID 01062018674000 *Approx. Address (If to be determined)

B. Owner

Name Mike Pershing Signature Michael Pershing
Address 10901 South 60th City/State/Zip Lincoln, NE 68516
Home Phone 402-540-0670 Work Phone

C. Certified Installer

Name: Steve Rhodes Signature Scott Mueller
Address 1315 N 26th Rd City/State/Zip Syracuse NE 68446
Work Phone 402-430-8946

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
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 Date fwd ACTION ☐ Approved ☐ Disapproved Signature
Comments

2. **Supt. Bldg. Insp. or Village Clerk**
Comments Date rec'd Date fwd ACTION ☐ Approved ☐ Disapproved Signature

3. **City or County Engineer**
Comments Date rec'd Date fwd ACTION ☐ Approved ☐ Disapproved Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 6-26-18 Amount Paid $405.00
Received By JAH Cash/Check No 2695

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. HS001695

System Type: Lagoon

Situs: No Site Address Specified

Issued: 7/2/2018

Expires: 7/2/2019

Description: REETZ ADDITION, Lot 2, & PT LOT 3 DESC IN INST#2017-49140

Owner: PESCHONG, MICHAEL & SARAH
10901 S 60 ST
LINCOLN, NE 68516

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

VODICKA CONSTRUCTION, INC
2530 S 154TH ST
WALTON, NE 68461

SCANNED

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

A

Permit Number HS001695

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* 20821 Southwest 128th Street, City Crete, NE Zip 68333
(no rural route)

Legal Description Lot 2 & Part of Lot 3 described in Inst. 2017-4914 Reetz Addition Lancaster Cnty NAD

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

PID 01062018074000 *Approx. Address (If to be determined)

B. Owner

Name Mike Peschong Signature Michael Peschong
Address 10901 South 60th City/State/Zip Lincoln, Ne 68516
Home Phone 402-540-0670 Work Phone

C. Certified Installer

Name: [illegible] Signature Scott Meadows
Address 1315 N 26th Rd City/State/Zip Syracuse NE 68446
Work Phone 402-430-8946

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
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 7/2/18
Date frwd 7/2/18
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 6-29-18
Date frwd 6-29-18
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 6-29-18
Date frwd 6-29-18
ACTION ☒ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By Doug Rudd
Date 12/7/18

Business Office Use Only
Date Received 6-21-18 Amount Paid $405.00
Received By JAC Cash/Check No. 2695

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

Exhibit 5

Permit Number: H5001695

Onsite Wastewater Treatment System

Inspection Sheet

Date 12/7/18 Legal Description Reetz Addn Lot 2

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 20821 SW 128th 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 855 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 190' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E2 Flow

No. of Absorption Laterals 2 Width 4.5 Facta No. of Drop Boxes Distribution Box 1

Leveling Method Used

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 NA Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial DS Date 12/7/18
Follow-Up Date
Follow-Up Date ~~12/7/18~~
Installation Final Written Approval
By Jerry Brunick
Date 12/7/18

Field Note Drawing (See Reverse Side):

Updated 4/15

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 _____ City _____ NE, Zip _____
(no rural route)

Owner Mike Pasahong Address 20921 SW 128th

Date of Tests 4-28 to 4-29 Weather: Precipitation N/A Temperature 70s

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop 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	36	4-29	9:00	4-29	14:00	4-29	14:00	6	4-29	14:30	30	1	30
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	3/4	45
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	1/2	30
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Scott Nussbaum
Phone: 402-430-2946
Address Syracuse, NE

Sum of Percolation Rates: 105
Average of Rates: 35
Rate Used for Calculation: 30-40 mpi

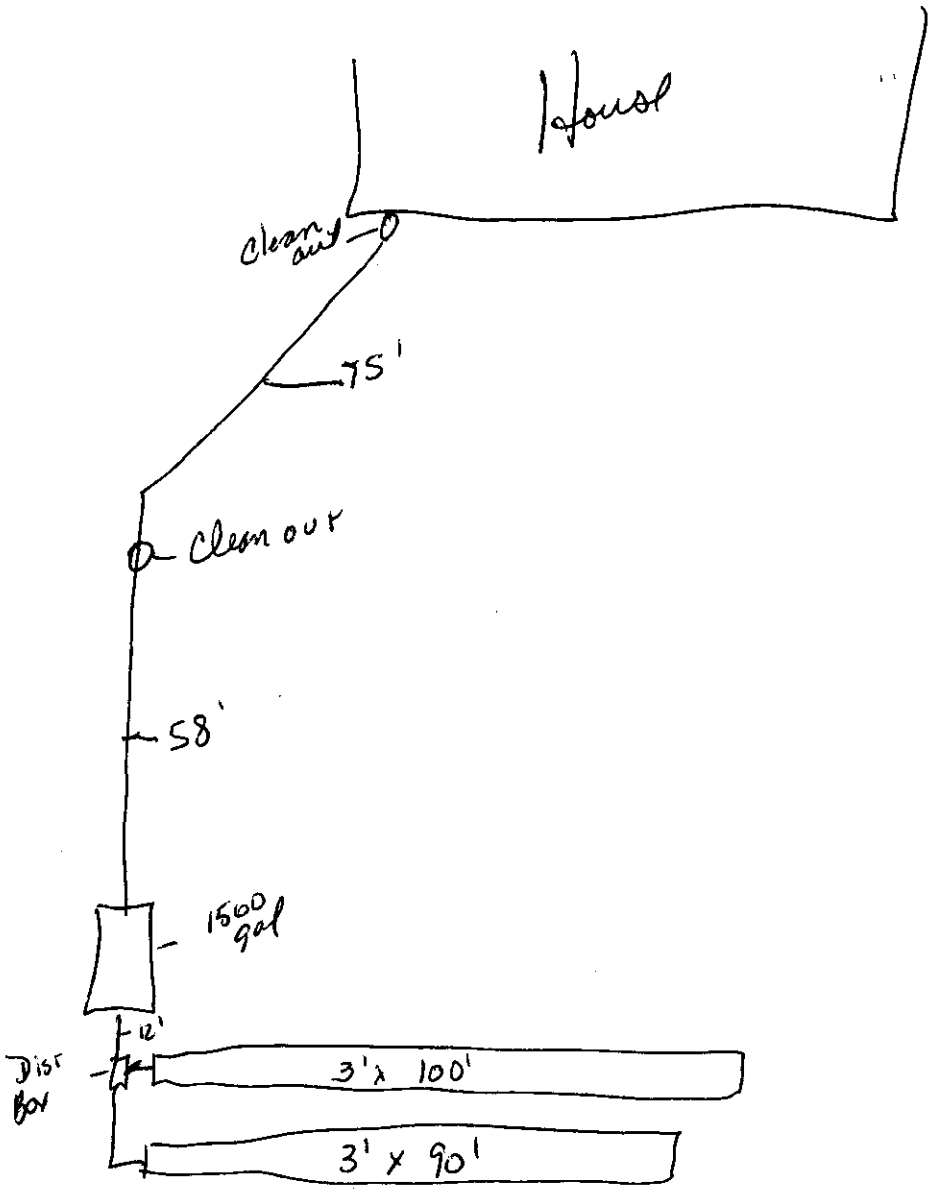
Soil type (NRCS Maps/Other) _____
Groundwater Depth _____

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official _____ Date _____


House
Clean out
75'
Clean out
58'
1500 gal
12'
Dist Box
3' x 100'
3' x 90'

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: H5001695

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) 20821 SW 128th

Owner: _____ Address _____

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 110 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1500
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well 200 ft.
   Pressure line 200 ft
   Property Line 80 ft.
   Foundation 110 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: W ft. 12

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: EZ-Flow
2. Number of Laterals: 2
3. Length of each lateral (linear): ft. 100 ft. 90 ft. _____ ft. _____
4. Drainfield size: 855 sq. ft.
5. Distance to:
   Well 240 ft.
   Pressure line 240 ft.
   Property line 40 ft.
   Depth of Groundwater 12

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

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: 12-7-18

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