AUG 13 2018

HS001718

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☒ALTER ☐REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 10701 S 98th Street Lincoln, NE 68526

   Legal Description of Property: Township: T9N Range: R7E Section: 35

   Block _____ Lot 7 SubDivsion _____ Add: _____

   JAO

   ***Parcel ID** 16-35-200-006-000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: _____)
   Number of bedrooms 3 Does the system have a: ☒ Garbage Grinder ☐Large Capacity Tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** Pump original 1000 gal tank smash it and tamp dirt back. Disreguard old laterals, Install 1500 gal Tank and 300 ft / 1,087.5 Sq ft Laterals. Perc Rate 38 mpi Call 402-988-8425 with any questions,

5. **Current Type of Lateral-** Concrete half-moon **Current Linear Ft. Of Lateral -** 130ft

   Current Tank Gallonage- 1000

6. Print Name Brandon Sedlacek Address 11739 E Buckeye Rd Adams, NE Phone: 402-988-8425

   Applicant Signature: Brandon Sedlacek Home owner: Randy Peterson

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received ____/____/____ REVIEW: ☐ Approved ☐ Disapproved By: _____

Comments (if any): _____

Site visits
Date ____/____/____ By _____
Date ____/____/____ By _____

Installation final written approval
Date ____/____/____ By _____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only

Received: Date: 08/13/18 Amount $220 Check No. 1707 Initials JAO

Revised 4/8/13

AUG 13 2018

SCANNED

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HS001718

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Date received 8/20/18 REVIEW: ☒ Approved ☐ Disapproved By: ____

Comments (if any): ____

Site visits
Date 1/1 By 12/9
Date 1/1 By ____

Installation final written approval
Date 10/8/18 By ____

Return application to: Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Please call prior to

Business Office Use Only

Received: Date: 08/13/18 Amount $220 Check No. 1707 Initials JAO

Revised 4/8/13

[redacted]

1070 S. 4th St.

[redacted]

Section Township Range County

Subdivision

[redacted]

OCT 05 2018

D Exhibit 4

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

Permit Number: HS007718

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) 10701 S. 98th

Owner: Randy Peterson Address 10701 S. 98th Lincoln, NE 68526

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 45 ft.

B. Septic Tank

1. Material Accurate Precast Concrete
2. Capacity: 1500 gal
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well None ft.
   Pressure line 150+ ft
   Property Line 75+ ft.
   Foundation 45 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 7 ft. W

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☒ Chamberless ☐ Other
   Material brand and inside width of Chamberless: EZ-Flow Infiltrator 36in
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 80 ft. 80 ft. 80 ft. ____
4. Drainfield size: 1,080 sq. ft. 10 ft (825 sq ft)
5. Distance to:
   Well none ft.
   Pressure line 200+ ft.
   Property line 75+ ft.
   Depth of Groundwater 9+ft

12 ft called deed

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: Brandon Seeder Date: 9-28-18

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

Updated 4/15

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

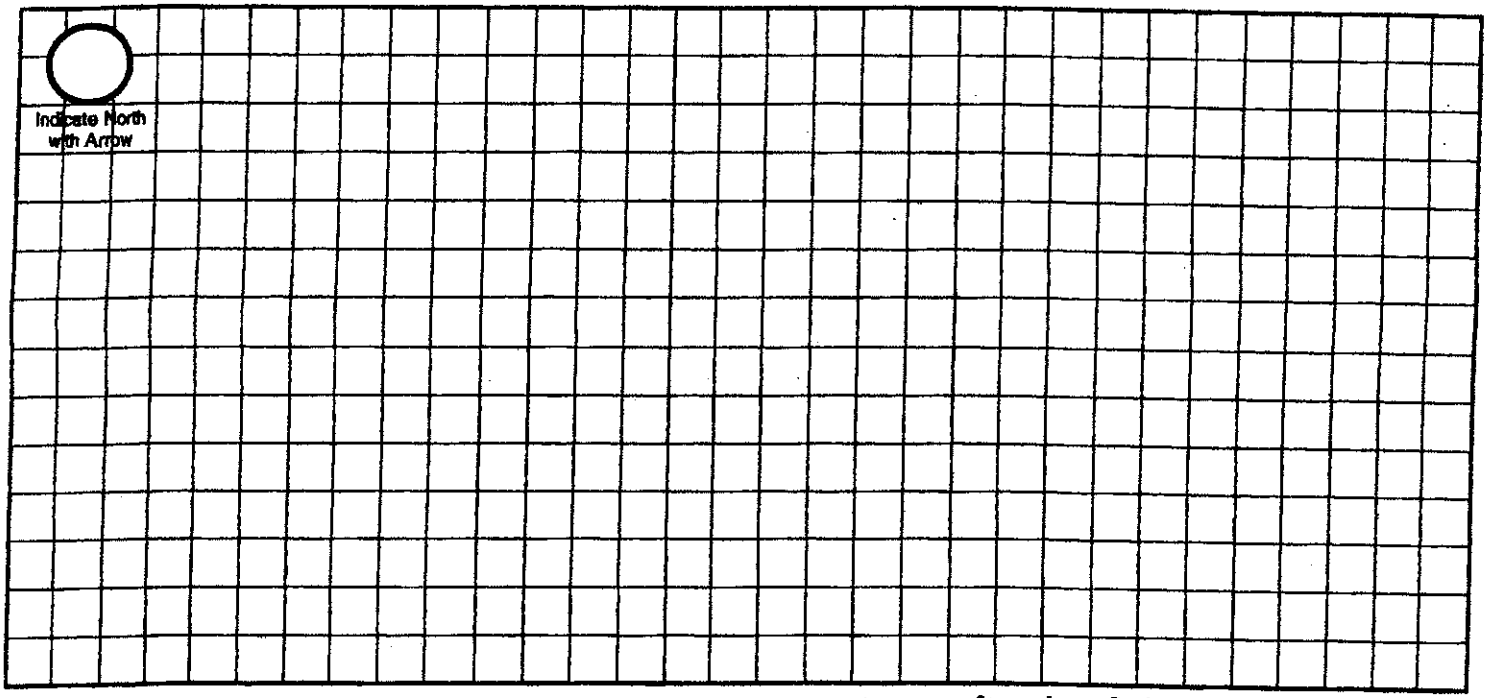
C

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) _____ City _____ NE, Zip _____

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 _____

Installer _____ Date _____

Randy Peterson
10701 S 98th
Lincoln, NE

