#S001721

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):** 9220 Leighton Ave.

   Legal Description of Property: Township: 10 Range: 7 Section: 14

   Block _____ Lot 60 SubDivsion 6th Principal Meridian Add: _____

   ***Parcel ID** 17 - 14 - 200 - 020 - 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:** Add 100' EZ Flow and Replace Junction Box

5. **Current Type of Lateral-** Concrete ½ rounds **Current Linear Ft. Of Lateral -** 200'

   Current Tank Gallonage- 1000gal

6. **Print Name** Steven C Lewis **Address** 4810 W Claire Ave. **Phone:** 402 310 9160

Applicant Signature: _____

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: 09/21/18 Amount $220.00 Check No. CC 8492 Initials JAC

Revised 4/8/13

HS001721

SCANNED

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   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

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HEALTH DEPARTMENT USE ONLY

☒ Municipal Code 24.38 ☐County Resolution Number 02-30

Date received 8/23/18 REVIEW: ☒ Approved ☐ Disapproved By: _____

Comments (if any): _____

Site visits
Date 08/28/18 By DS
Date ___/___/___ By _____

Installation final written approval
Date 08/28/18 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: 09/21/18 Amount $220.00 Check No. CC 8442 Initials _____

Revised 4/8/13

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

Exhibit 5

Permit Number: H 500172

Onsite Wastewater Treatment System

Inspection Sheet

Lot 60

Date 8/30/18 Legal Description ¼ ¼ 14 / 10 / 7 Section/Township/Range

Onsite System Location

Address (no rural route) 9220 Leighton Ave. 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 New 450 ~ 600 existing Sq. Ft. Tank Size 1,000 gals

Total length of laterals 100' New 200' existing Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E2 Flow

No. of Absorption Laterals New 1 Width 4.5 Factor No. of Drop Boxes Distribution Box 1

Leveling Method Used Laser

Added

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 ☐

100 ft. of laterals
450 Sq. Ft.

Geographical Coordinates to 6 Decimals:

Tank N/A

Lateral #1 Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial DL Date 8/30/18

Follow-Up Date

Follow-Up Date

Installation Final Written Approval
By Doug Mick

Date 8/30/18

Field Note Drawing (See Reverse Side):

Updated 4/15

Received Time Aug. 28 2018 1:31PM No. 0487

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

Permit Number:

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) 17142000 200 00

Owner: Lary Schwisow Address 9220 Leighton Ave.

A. Wastewater Piping

1. Material: SDR 26 pvc Diameter: 4 in.
2. Distance between dwelling and septic tank: _____ ft.

B. Septic Tank

1. Material Existing Concrete
2. Capacity: 1500 g
3. Depth to top of tank, below unfinished grade: 8 in.
4. Distance to:
   Well over 100 ft.
   Pressure line N/A ft
   Property Line over 100 ft.
   Foundation over 50 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 30 ft. West

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: Poly Styrene Bundles - EZ Flow - New 2018
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 100 New Line ft. 100 Exist. ft. 100 New Line ft. _____
4. Drainfield size: 1250 sq. ft.
5. Distance to:
   Well over 100 ft.
   Pressure line N/A ft.
   Property line over 100 ft.
   Depth of Groundwater over 50

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.

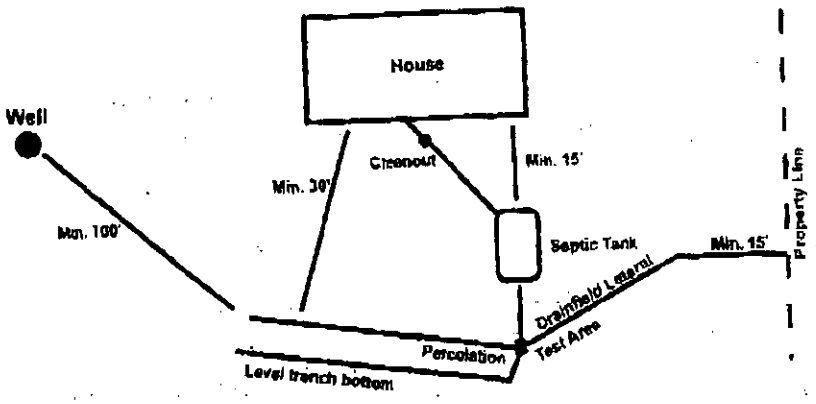
Certified Professional Signature: _____ Date: 28 Aug 2018

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

Received Time Aug. 28. 2018 1:31PM No. 0487

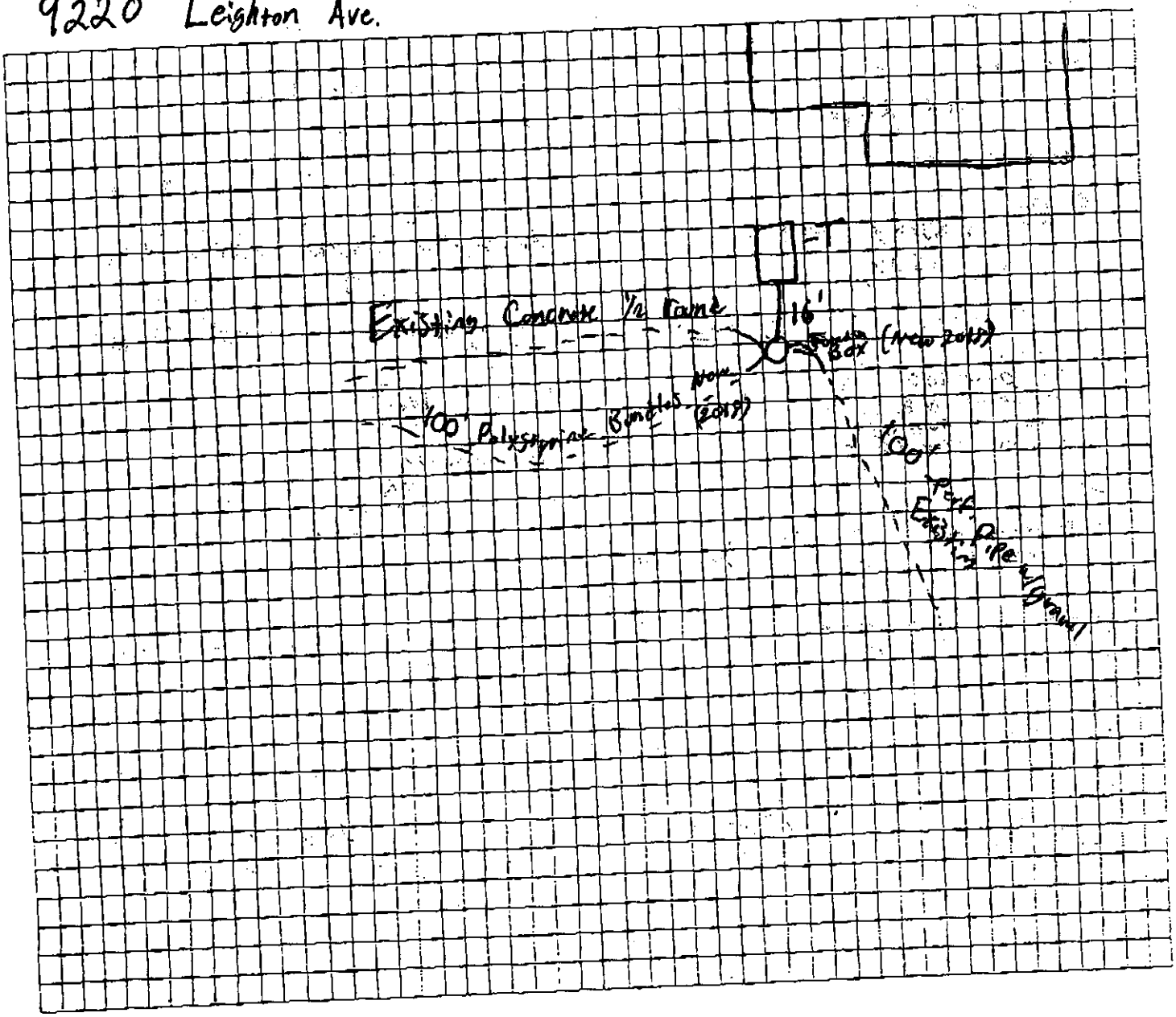
Onsite Wastewater System Design (Example)

Indicate North
w/ Arrow Here:



*Note-If Lagoon, show all applicable dimensions

9220 Leighton Ave.



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GAGNER CONSTRUCTION
4810 W. CLAIRE AVE.
LINCOLN, NE 68523

ATT: NATE

RE: 9220 Leighton Ave
Lincoln NE 68507