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

A

Permit Number HS0017160

Existing Home

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 4710 WAgnew Rd (no rural route) City Valparaiso, NE Zip 68065

Legal Description SE (1/4) 7 (Section) 12N (Township) 6E (Range) ____ (Subdivison) ____ (Addition) ____ (Block) 4 (Lot)

PID 13-07-400-001-000

B. Owner

Name Dana Rezac Signature [signature]

Address 4710 W Agnew Rd City/State/Zip Valparaiso, NE 68065

Home Phone 402-871-7706 Work Phone ____

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature [signature]

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 154.47

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 ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

1. Health Department
Site visits ____ Date rec'd ____ Date frwd ____
Comments ____
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 10-24-18 Amount Paid $420.00
Received By JAD Cash/Check No. 954

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

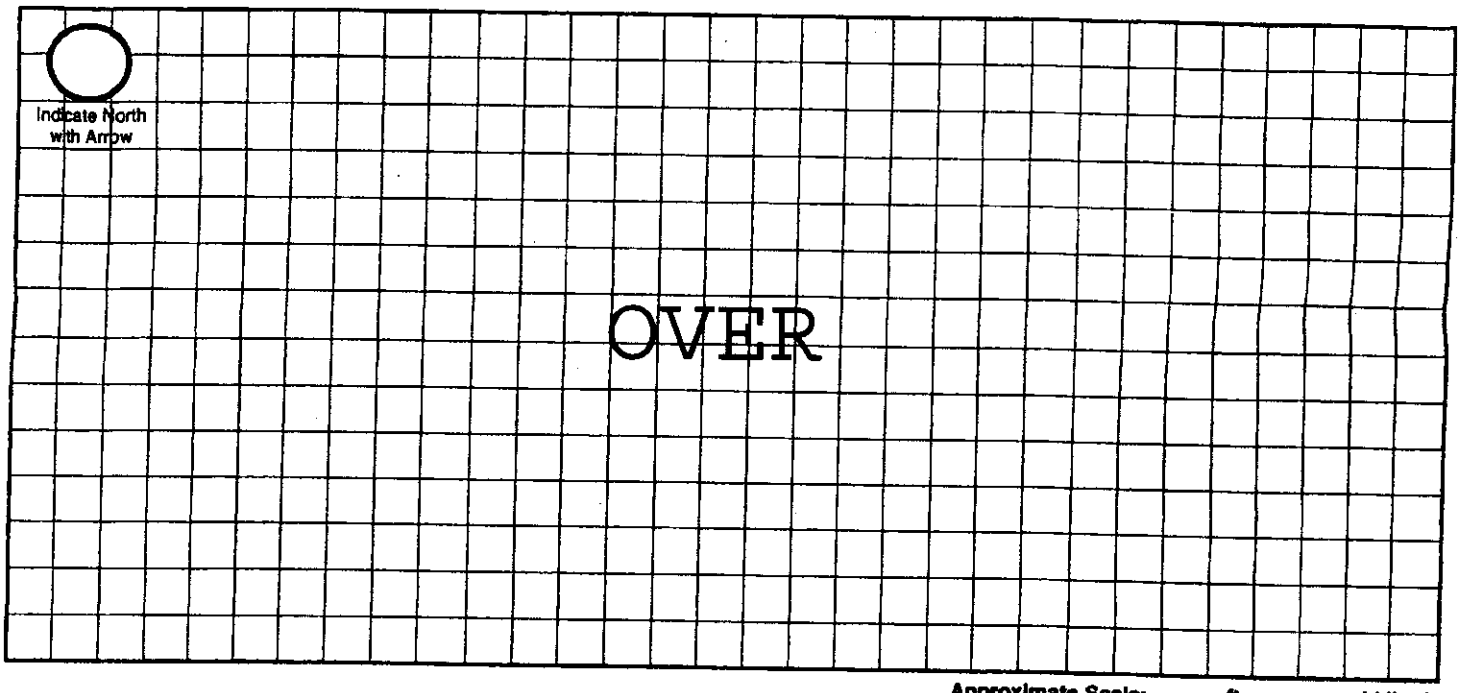
C

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) 4710 W Agnew Rd City Valparaiso NE, Zip 68065

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

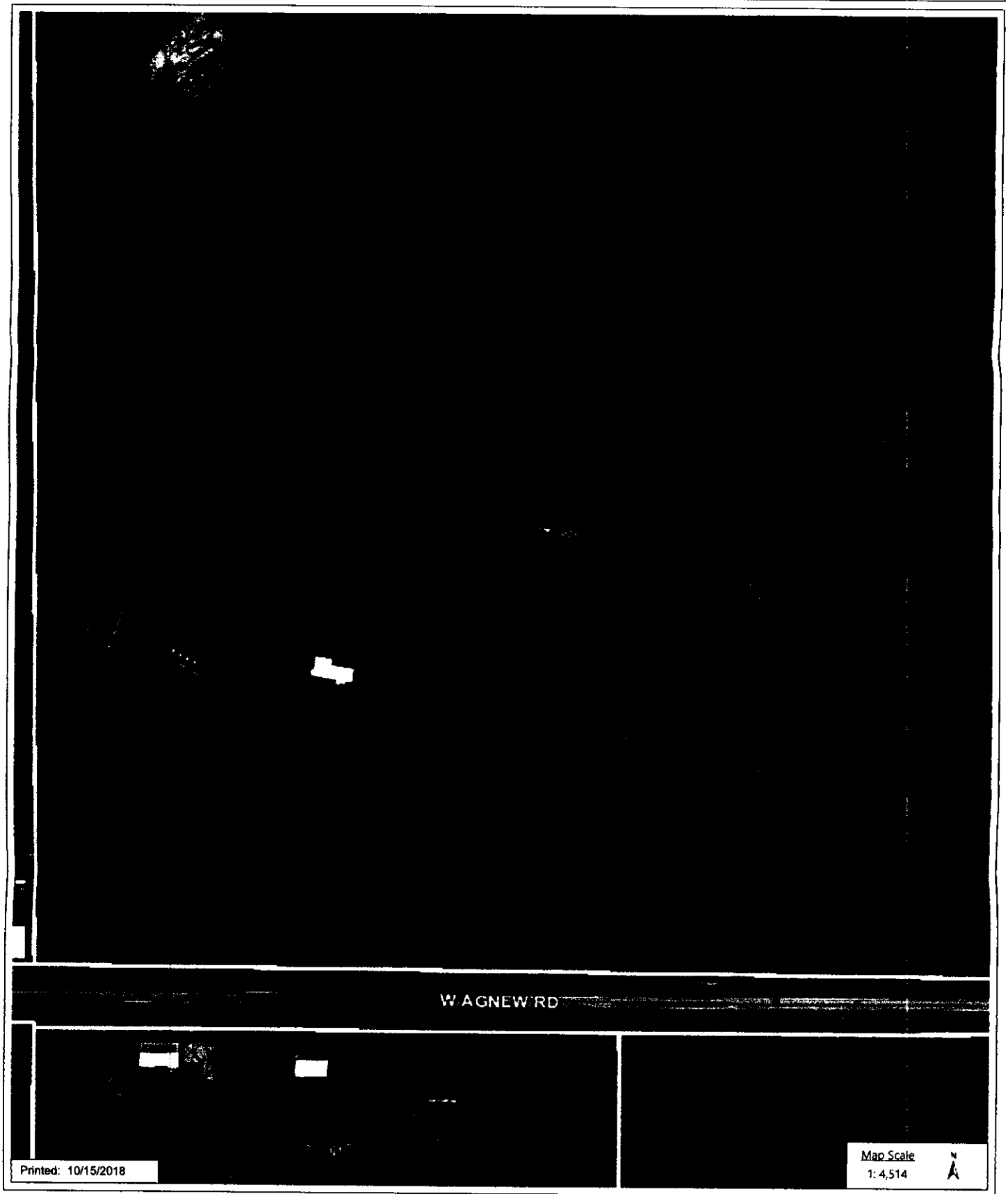
Home Building Contractor Existing Home Date _____

Installer _____ Date 10-24-18

Dana Rezac 402-871-7706 4710 W Agnew Rd, Valparaiso, NE 68065

GIS Viewer
CITY OF LINCOLN-LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



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 assessor@lancaster.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. HS001760

System Type: Lagoon

Situs: 4710 W AGNEW RD, RAYMOND, NE 68065

Issued: 10/25/2018

Expires: 10/25/2019

Description: S7, T12, R6, 6th Principal Meridian, LOT 4 SE & N1/2 SE

Owner: REZAC, LORI
7032 KENTWELL LN
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

RAYMOND CONTRACTING
13800 NW 70TH ST
RAYMOND, NE 68428

SCANNED

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

A

Permit Number
H50017160

Existing Home

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 4710 WAgnew Rd (no rural route) City Valparaiso, NE Zip 68065

Legal Description SE 7 12N 6E 4
(1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot)

PID 13-07-400-001-000

B. Owner

Name Dana Rezac Signature

Address 4710 W Agnew Rd City/State/Zip Valparaiso, NE 68065

Home Phone 402-871-7706 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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

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☒ Residential Dwelling Number of Bedrooms 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 154.47
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 ☐ Municipal Code 24.38 ☒ County Resolution No. 02-30

1. Health Department
Site visits 11/15/18 Date rec'd 10/25/18
Date frwd 10/25/18
ACTION ☒ Approved ☐ Disapproved
Signature
Comments

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 12/4/18

Business Office Use Only
Date Received 10-26-18 Amount Paid $420.00
Received By JAO Cash/Check No. 9514

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 6

Permit Number: HS001760

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 12/4/18 Legal Description ___ ¼ ___ ¼ 7/12/6 Lot 4 Section/Township/Range

Onsite System Location

Address (no rural route) 4710 Agnew City ___

Owner ___ Address ___

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Repair

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): ___

Lagoon constructed so not to receive surface water	Yes ✓ No ___
Lagoon floor is level	Yes ✓ No ___
Lagoon is equipped with a depth gage/concrete slab	Yes ✓ No ___
Influent line is at least 4 inches and slopes no less than 1/8 inch	Yes ✓ No ___
Clean outs located every 75 feet and one located 1 foot about highest water level	Yes ✓ No ___
Inside slope not steeper than three horizontal to one vertical	Yes ✓ No ___
Minimum width of the top of the dike shall be 4 feet	Yes ✓ No ___
Fence installed	Yes ✓ No ___

Top of the Dike 54' Bottom of Lagoon 23' Design Flow 300 gpd

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Surface Water distance from Water Mark	Private Drinking Water Wells	Public Drinking Water Supply Wells		All Other Water Wells	Property Lines	Trees and Brush	Neighbor's Foundation		All Other Setbacks
50 ft ☒	100 ft ☐	Non-Community	100ft ☐	100ft ☐	50ft ☐	50ft ☐	Class 1	200ft ☐	☐
		Community	* ☐				Class 2	200ft ☐	
							Class 3	100ft ☐	

*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: ___

Dike North side

Comments:

Inspections prior to Final Approval
Initial DC. Date 11/15/18

Follow-Up ___ Date ___

Follow-Up ___ Date ___

Installation Final Written Approval
By Doug Rhue
Date 12/4/18

SCANNED

Dana Rezac 402-871-7706 4710 W Agnew Rd, Valparaiso, NE 68065

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



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