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

A

Permit Number H5001766

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 3605 W Branched Oak Rd (no rural route) City Raymond, NE Zip 68428

Legal Description NW 32 11N 6E 21
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 13-32-100-006-000

B. Owner

Name Jerrid Halvorsen Signature

Address 3605 W Branched Oak Rd City/State/Zip Raymond, NE 68428

Home Phone 402-730-8314 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

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 1 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 2
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 11-09-16 Amount Paid $420.00
Received By JKO Cash/Check No. 9444

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

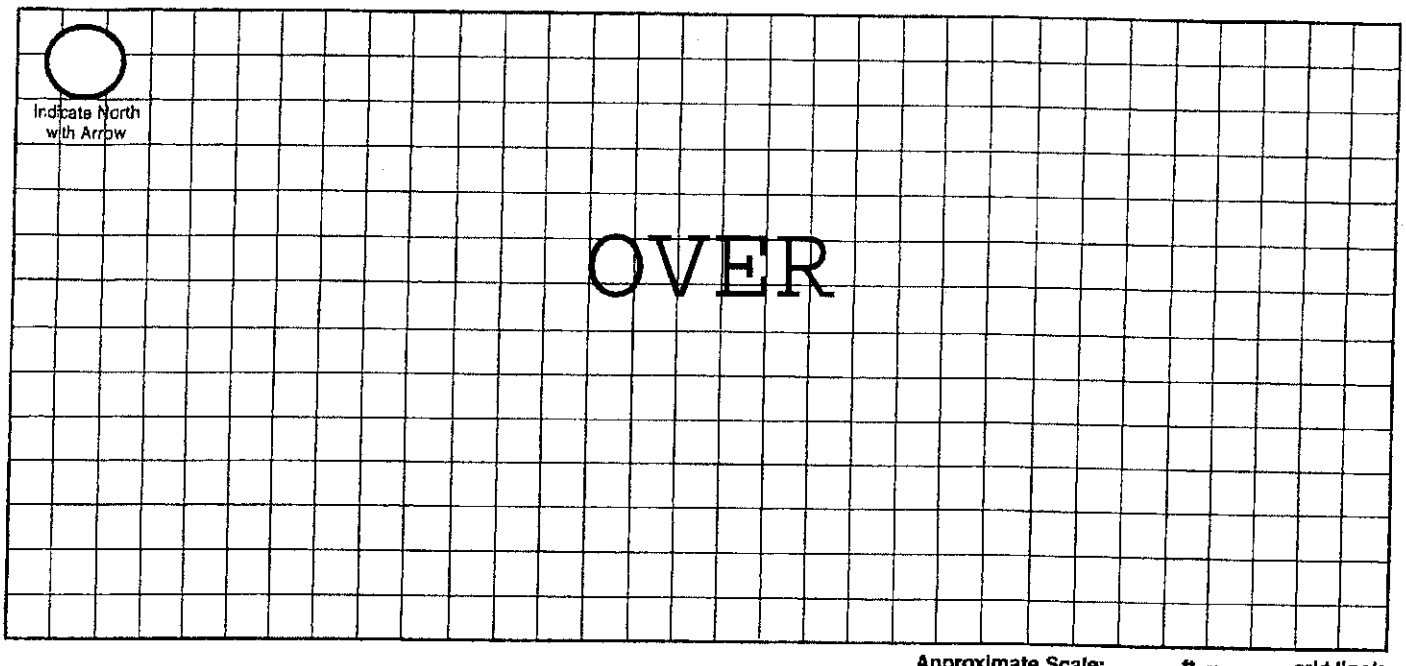
C

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) 3605 W Branched Oak Rd City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Septic Tank Cap. 1,000 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 58 (min/inch = mpi) No. of Bedrooms 1 Soil Type SCL Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 450 sq.ft.

Total length of laterals 100 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 2 Width 40" No. of drop boxes 1 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 ☐	☐

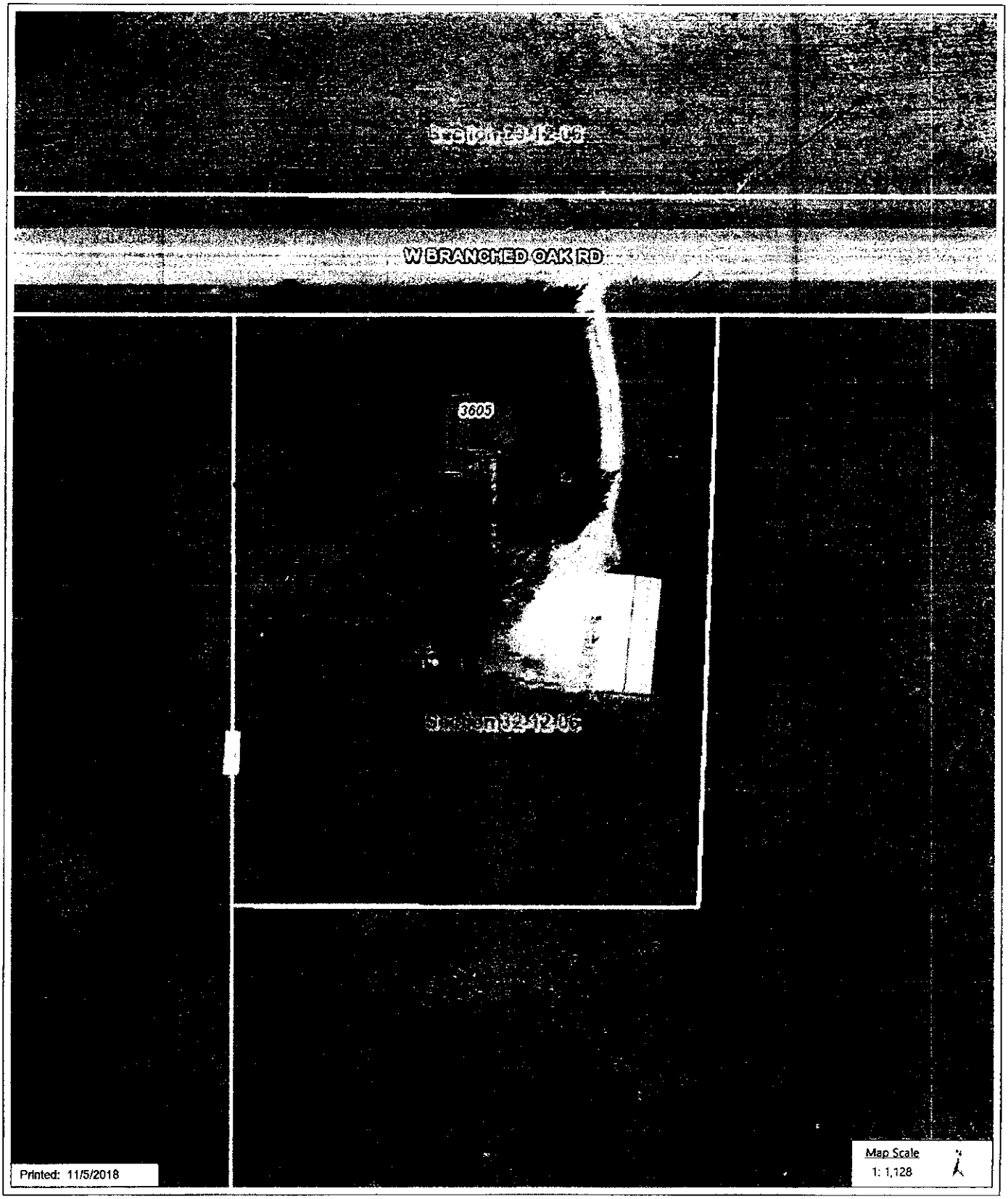
F. Required Signatures

Home Building Contractor Existing Home Date _____

Installer _____ Date 11/5/18

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.

Janet O'Neal

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Monday, November 05, 2018 3:16 PM
To: Nate C. Hartman
Cc: Doug R. Smith; Janet O'Neal
Subject: Halvorsen Permit
Attachments: Halvorsen Septic Permit.pdf

Sorry for any confusion, but....

The guys were onsite digging up the tank to tie on & found it in poor condition. The tank will also need to be replaced so I have attached a "New" permit. We will install at a later date.

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

HS001766

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):** 3605 W Branched Oak Rd, Raymond, NE 68428

   Legal Description of Property: Township: 11N Range: 6E Section: 32-NW

   Block ____ Lot 21 SubDivsion ____ Add: ____

   *Parcel ID 13 - 32 - 100 - 006 - 000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: ____)
   Number of bedrooms 1 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:** Replace failing drainfied with 100'/450sqft of EZFlow based on a percolation rate of 58 minutes per inch. (Currently has a surfacing pool of wastewater.)

5. **Current Type of Lateral-** Unknow **Current Linear Ft. Of Lateral -** Unknown

   Current Tank Gallonage- 1,000

6. Print Name Jerrid Halvorsen Address 3605 W Branched Oak Rd, Raymond, NE 68428 Phone: 402-730-8314

Applicant Signature: Kevin L. Halvorsen / Raymond Contracting

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: 11/05/18 Amount ____ Check No. ____ Initials JAD

Revised 4/8/13

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 3605 W Branched Oak Rd (no rural route) City Raymond NE, Zip 68428

Owner Jerrid Halvorsen Address Same

Date of Tests 10/23/18 to 10/24/18 Weather: Precipitation 0 Temperature 54°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					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	21	10/23	12:30p	10/23	4:30p	10/24	11:00a	6	10/24	11:30a	30	1/2	60
2	28	"	"	"	"	"	"	6	"	"	"	9/16	53
3	20	"	"	"	"	"	"	6	"	"	"	1/2	60
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.

Phone: 402-783-2663 or 402-890-6009

Address 13800 NW 70th St

Raymond, NE 68428 Cert #1198

Sum of Percolation Rates: 173

Average of Rates: 58

Rate Used for Calculation: 58

Soil type (NRCS Maps/Other) Silty clay loam

Groundwater Depth >8'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official _____ Date _____

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. HS001766

System Type: Standard

Situs: 3605 W BRANCHED OAK RD, RAYMOND, NE 68428

Issued: 11/8/2018

Expires: 11/8/2019

Description: S32, T11, R6, 6th Principal Meridian, LOT 21 NW

Owner: HALVORSEN, JERRID R
3605 W BRANCHED OAK RD
RAYMOND, NE 68428

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 INC
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 H5001766

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 3605 W Branched Oak Rd (no rural route) City Raymond, NE Zip 68428

Legal Description NW (1/4) 32 (1/4 Section) 11N (Township) 6E (Range) ____ (Subdivison) ____ (Addition) 21 (Block) ____ (Lot)

PID 13-32-100-006-000

B. Owner

Name Jerrid Halvorsen Signature ____

Address 3605 W Branched Oak Rd City/State/Zip Raymond, NE 68428

Home Phone 402-730-8314 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 1 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 2

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 11/8/18

Date frwd 11/8/18

Comments ____ ACTION ☐ Approved ☐ Disapproved

Signature [signature]

2. Supt. Bldg. Insp. or Village Clerk

Comments ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved

Date frwd ____ Signature ____

3. City or County Engineer

Comments [signature] Date rec'd ____ ACTION ☐ Approved ☐ Disapproved

Date frwd ____ Signature ____

Installation Final Written Approval

By [signature]

Date 11/16/18

Business Office Use Only

Date Received 11-09-18 Amount Paid $420.00

Received By JAO Cash/Check No. 9444

White - Health Department Yellow - Engineer Pink - Building & Safety

Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Tuesday, November 13, 2018 11:35 AM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 3605 W Branched Oak Rd D-Sheet
Attachments: 3605 W Branched Oak Rd D-Sheet.pdf

3605 W Branched Oak Rd D-Sheet 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

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:

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 = 13-32-100-006-000

Address or Legal Description or Parcel Identification Number (PID) 3605 W Branched Oak Rd, Raymond, NE 68428

Owner: Jerrid Halvorsen Address Same

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 28 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1,000
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well 100 ft.+
   Pressure line N/A ft
   Property Line 50 ft.+
   Foundation 30 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: NW ft. 76

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless:
   EZFlow 1203H Bundles
2. Number of Laterals: 2
3. Length of each lateral (linear) ft. 50 ft. 50 ft. ____ ft. ____
4. Drainfield size: 450 ~~350~~ sq. ft.
5. Distance to:
   Well 100 ft.+
   Pressure line N/A ft.
   Property line 30 ft.+
   Depth of Groundwater 8

✓ 350 Page 2

unable to make 1st call. please call 2nd 2:27 pm

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

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

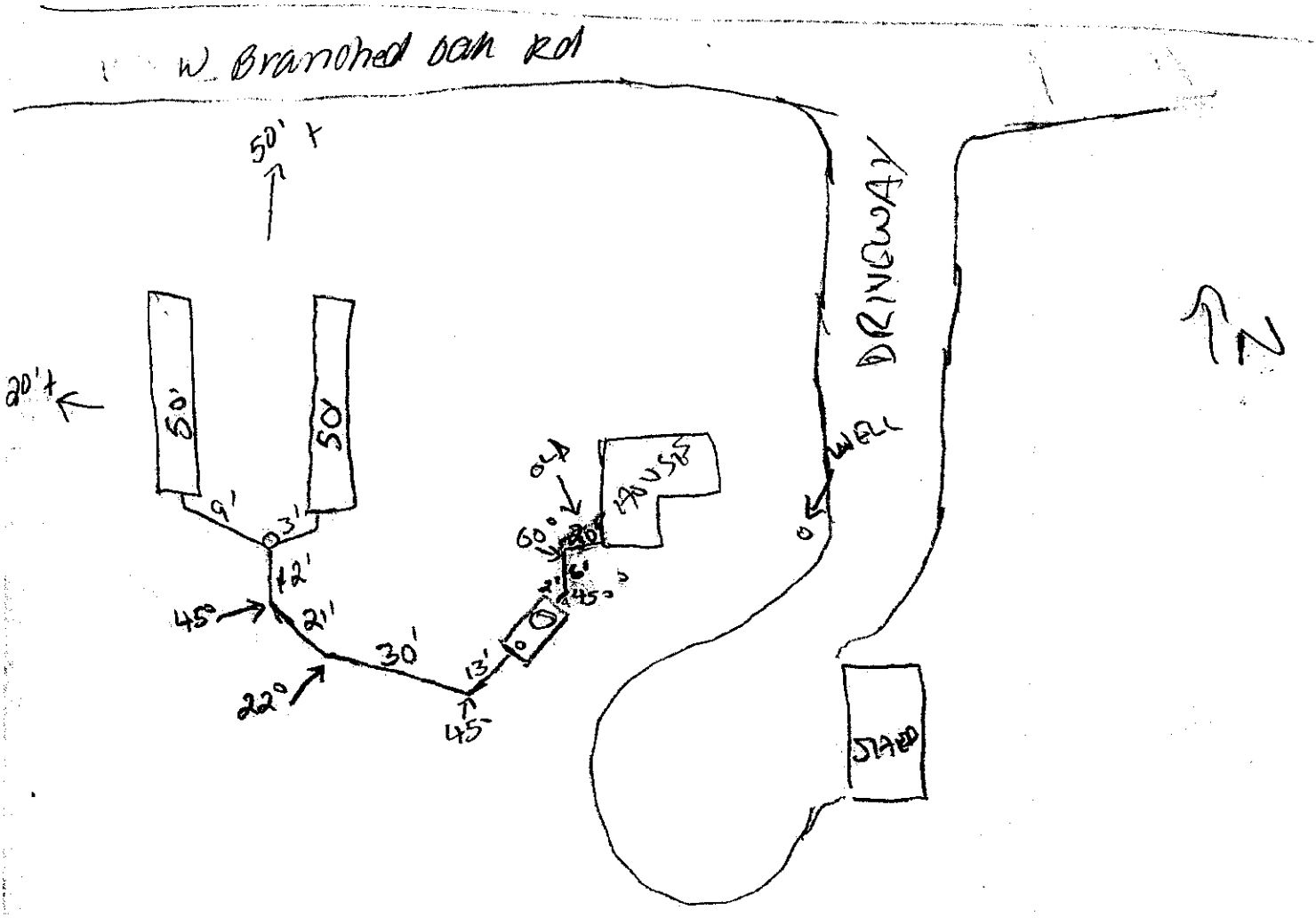
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date: 11/8/18

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

11/8/2018

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663



Doug R. Smith

From: Diane Carter <mejadaty@gmail.com>
Sent: Tuesday, November 06, 2018 10:30 PM not Paid
To: Doug R. Smith
Subject: 4 Transfer Paper
Attachments: 13200 W Branched Oak Rd Transfer Paper.pdf; 919 East Hillcrest Dr Transfer paper.pdf; 26133 S 84th Transfer paper.pdf; 6421 Rokeby Rd Transfer paper.pdf

I will contact you with the water test results when I receive them from the State Laboratory
Check is in the mail
Thanks Diane