SCANNED

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

A

Permit Number H5001773

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* _____ City Roca, NE Zip _____

Legal Description (no rural route) Block 1 Lot 4 addition Silverhawk Estates Sec 16 T8N R7E

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

PID 1916101004000 *Approx. Address (If to be determined) _____

B. Owner

Name Jim Fahr Signature [signature]

Address 3718 Touzalin City/State/Zip Lincoln, NE

Home Phone (402) 217-7029 Work Phone _____

C. Certified Installer

Name: [illegible] Signature [signature]

Address 1345 N 26th Rd City/State/Zip Syracuse NE 68446

Work Phone 402-430-2946

D. Engineer

☒ Check and complete if engineer designed system P.E. License Number: _____

Designer Name Custom Design Specialist Firm Matt Franson Work Phone (402) 429-4470

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 4 Whirlpool Bathtub? ☒ Yes ☐ No Total Acres 3.1

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 _____ ACTION ☐ Approved ☐ Disapproved
Date frwd _____ Signature _____
Comments _____

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

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

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
Date Received 11-27-18 Amount Paid $1100.00
Received By [illegible] Cash/Check No. 201758

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

Form A Updated: 4/15

SCANNED

rth-Lancaster County Health Department (LLCHD)
ironmental Public Health Division
9 "N" Street • Lincoln, NE 68510-1514
ne: 402-441-8022

Permit Number:

Onsite Wastewater Treatment System

Soil Evaluation Report

5 Holes @ Mottled

PLEASE PRINT OR TYPE

m Location

Deerhurst Estates City Lodi NE, Zip
(no rural route)

Address

7-20-18 to 7-21-18 Weather: Precipitation N/A Temperature 82°

Percolation Test Data Table

C. Observation/Dwelling	D.	E. Time	F.	G. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr	H.	I.	J.	K.	L. Results	M.	N.
Start		End		Start		Initial Water Lev (in.)	End		Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (MIN/in - MPI)
Date (Mo/Da)	Time (HrMin)	Date (Mo/Da)	Time (HrMin)	Date (Mo/Da)	Time (HrMin)		Date (Mo/Da)	Time (HrMin)			
7-20	15:00	7-21	9:00	7-21	9:10	6	7-21	9:50	30	5/8	48
(	)	(	)	(	)	6	(	)	(	5/8	48
(	)	(	)	(	)	6	(	)	(	4/16	56.25
(	)	(	)	(	)	6	(	)	(	4/16	56.25
						6					
						6					
						6					
						6					

nducting Percolation Test

Scott Meyer
402-430-2948
Syracuse, NE

Sum of Percolation Rates: 208.5
Average of Rates: 52.125
Rate Used for Calculations: 53.60

Depth: 15"

DO NOT WRITE BELOW THIS LINE

Action

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. HS001773

System Type: Standard

Situs: No Site Address Specified

Issued: 11/28/2018

Expires: 11/28/2019

Description: SILVERHAWK ESTATES ADDITION, BLOCK 1, Lot 4

Owner: FAHR, JAMES F & STEPHANIE S
3810 E ST
LINCOLN, NE 68510

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

XTREAM GENERAL CONTRACTING
8008 EASTWOOD CT
LINCOLN, NE 68506

SCANNED

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

A

Permit Number HS001773

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

Legal Description Block 1 Lot 4 addition Silverhawk Estates 16N R7E Section 10
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 1916101004000 *Approx. Address (If to be determined) _____

B. Owner

Name Jim Fahr Signature [signature]
Address 3718 Touzalin City/State/Zip Lincoln, NE
Home Phone (402) 217-7029 Work Phone _____

C. Certified Installer

Name: [illegible] Signature [signature]
Address 1345 N 26th Rd City/State/Zip Syracuse NE 68446
Work Phone 402-430-2946

D. Engineer

☑ Check and complete if engineer designed system P.E. License Number: _____
Designer Name Custom Design Specialist Firm Matt Franson Work Phone (402) 429-4470

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 4 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 3.01
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 7/12/19
Comments _____
Date rec'd 11/28/18
Date frwd 11/29/18
ACTION ☒ Approved ☐ Disapproved
Signature [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 [signature]
Date 7/16/19

Business Office Use Only
Date Received 11-27-18 Amount Paid $420.00
Received By [signature] Cash/Check No. 201758

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

Form A Updated: 4/15

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

Exhibit 5

Permit Number: HS001723

Onsite Wastewater Treatment System

Inspection Sheet

6

Date 7/16/19 Legal Description ____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 5861 Silverhawk 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 1,440 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 320' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ flow

No. of Absorption Laterals 4 Width 4.5 factor No. of Drop Boxes ____ Distribution Box 1

Leveling Method Used Laser

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 N/A Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial RS Date 7/12/19

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Rowe

Date 7/16/19

Field Note Drawing (See Reverse Side):

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

D

Permit Number:

Onsite Wastewater Treatment System

As Built Plans & Specifications

Date 7-11-19 Legal Description _____ 1/4 1/4 Section Township Range

Onsite System Location

Address (no rural route) 5801 Silverhawk Ct. City Lincoln NE, Zip _____

Owner _____ Address _____

A. Sewer Pipe

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 85 ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line NA ft.
   stream NA ft.
   pressure line NA ft.
   property line 60 ft.

B. Septic Tank

☒ Label with Manufacturer, address and gallon capacity

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 36 in.
   Over outlet, diameter 36 in.
   Riser: ☐ above ☒ below grade 2 in.
5. Inlet: ☒ baffle ☐ tee ☐ 6" dia. inspection pipe
6. Outlet: ☒ baffle ☐ tee ☐ 6" dia. inspection pipe
7. Depth to top of tank, below unfinished grade: 18 in.
8. Distances to: Well or suction line NA ft.
   Stream NA ft.
   Pressure line NA ft.
   Property line 80 ft.

C. ☒ Distribution Box ☐ Drop Boxes

(≥ 12" inspection opening) (removable lid to inspect)

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 6 ft.

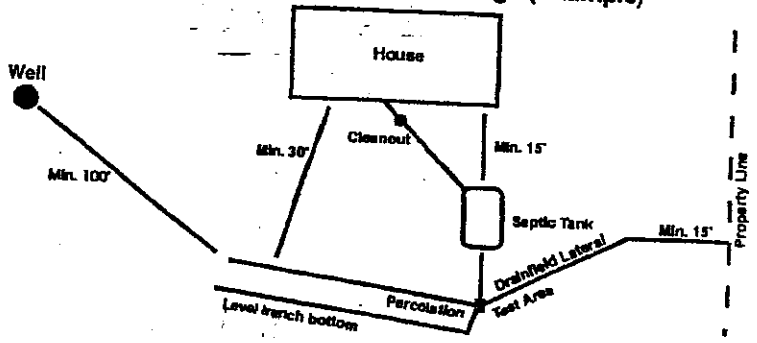
D. Drainfield Absorption

☒ Trench ☐ Bed ☐ Level Bottom

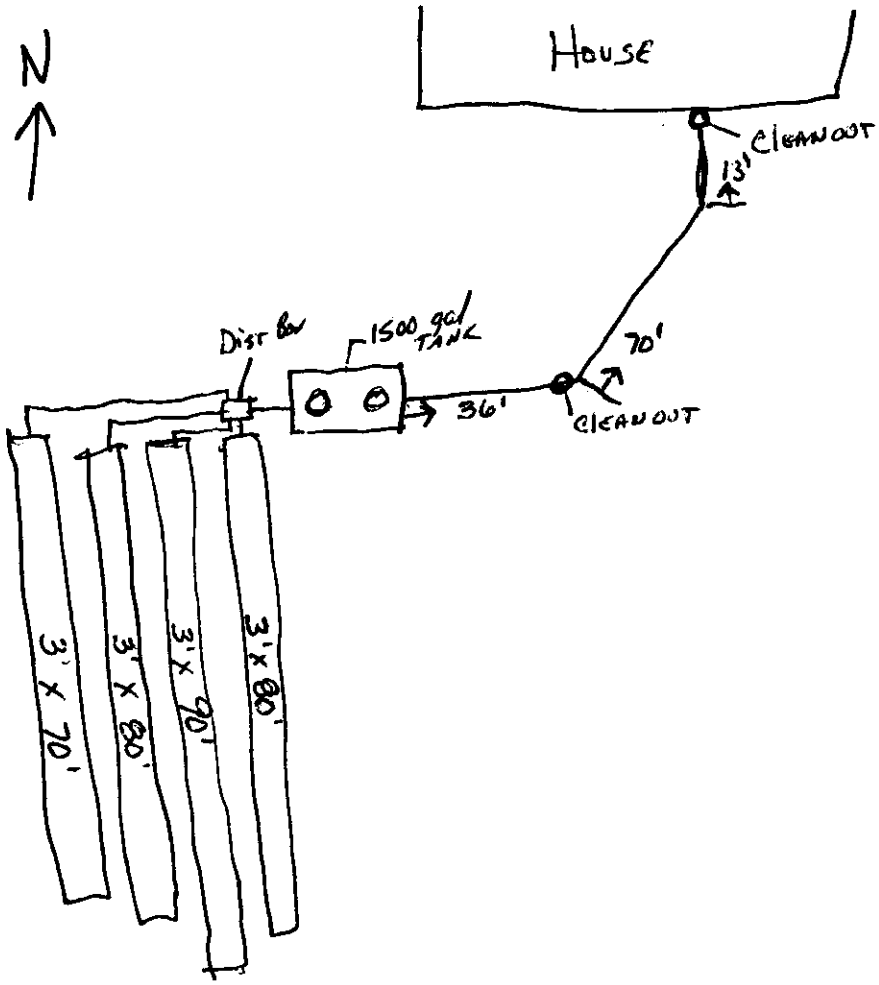
1. Type: ☐ Half rounds ☐ Perforated pipe ☐ Chambers
   Diameter or width: 36"
   Number of distribution lines in bed 4
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☒ other EZ-Flow
2. Drainfield Laterals: Number 4
   Length of each line: 80 ft. 90 ft.
   80 ft. 70 ft., _____ ft.
3. Drainfield dimensions: Width 1440 sq ft.
   Distribution Pipe Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line NA ft.
   Pressure line NA ft.
   Property line 15 ft.
   House or building 100 ft.
   Lake or Stream NA ft.

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

Onsite Wastewater System Design (Example)



icate North
ith Arrow


N
House
CLEAN OUT
13'
Dist Box
1500 gal TANK
70'
36'
CLEAN OUT
3' x 70'
3' x 80'
3' x 70'
3' x 80'