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

A

Permit Number HSO01848

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* 10733 S 176th City Bennet, NE Zip 68317
(no rural route)

Legal Description NE 35 9 8 E of 6th PM 11
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 32-35-200-007-000 *Approx. Address (If to be determined)

B. Owner

Name John Bruss Signature
Address 10405 S. 176th City/State/Zip Bennet, NE 68317
Home Phone Work Phone 440-9101

C. Certified Installer

Name: Scott Weatherhogg Signature
Address 405 Washington City/State/Zip Douglas, NE 68344
Work Phone 402-799-2100

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 2 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 29.3
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
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 4-23-14 Amount Paid $420.00
Received By MC Cash/Check No. 7064

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

Form A Updated: 4/15

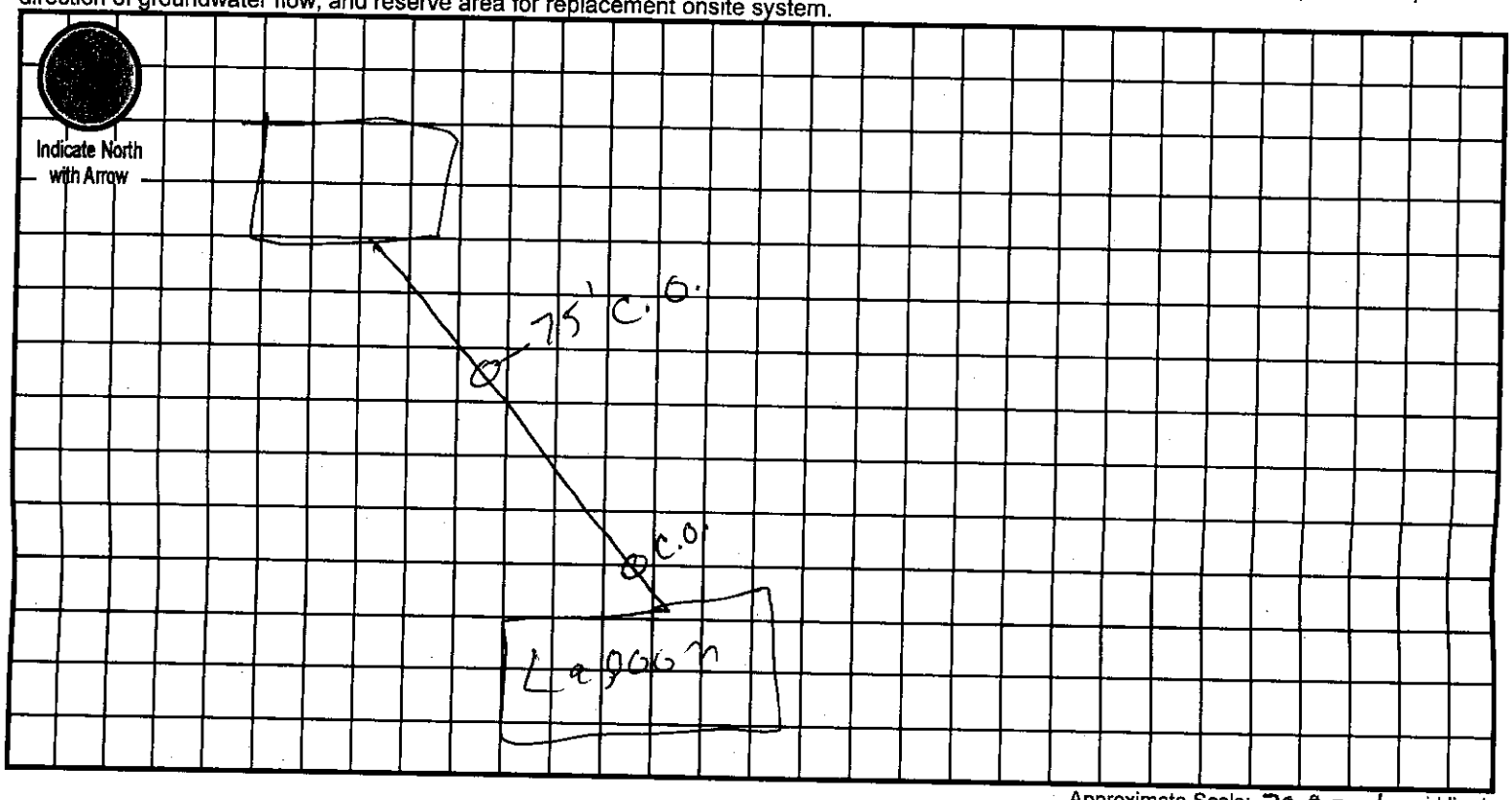
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

C

Permit Number

Onsite Wastewater Treatment System
Preliminary Plan Specification

Draw a plot plan showing onsite system sewer lines, tank, drop or distribution boxes, drainfields, percolation test holes, well, residence, direction of groundwater flow, and reserve area for replacement onsite system.



Approximate Scale: 20 ft. = 1 grid line/s

A. Onsite System Location

Address (no rural route) 10733 S 176th City Bennet NE, Zip 68317

B. Proposed Septic Tank/s

Septic Tank Cap. _____ gals Tank Material: ❑ Concrete ❑ Plastic ❑ Other _____ ❑ Lagoon (Max. Seepage 1/8"/day)

C. Reserve Area for Replacement Onsite System

❑ Drainfield Absorption Area (percolation test required) ❑ Lagoon

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 ❑ Chambers ❑ Other _____

No. of Absorption Trenches _____ Width _____ No. of Drop Boxes _____ Distribution Box _____

No. of Absorption Beds _____ Width _____ No. of Distribution Lines per Bed _____

Installer _____ 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. HS001848

System Type: Lagoon

Situs: No Site Address Specified

Issued: 7/15/2019

Expires: 7/15/2020

Description: S35, T9, R8, 6th Principal Meridian, LOT 11 NE

Owner: BRUSS, JOHN E & LORI L
10405 S 176 ST
BENNET, NE 68317-2358

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim 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.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Interim Health Director

ALL PRO PLUMBING
405 WASHINGTON ST
DOUGLAS, NE 68344

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

SCANNED

A

Permit Number #S001848

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* 10733 S 176th (no rural route) City Bennet, NE Zip 68317

Legal Description NE 35 9 8 E of 6th PM Parcel A

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

PID 22-35-200-001-000 *Approx. Address (If to be determined)

B. Owner

Name John Bruss Signature

Address 10405 S. 176th City/State/Zip Bennet, NE 68317

Home Phone Work Phone 440-9101

C. Certified Installer

Name: Scott Weatherhogg Signature

Address 405 Washington City/State/Zip Douglas, NE 68344

Work Phone 402-799-2100

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Designer Name Firm Work Phone

E. This system will serve a

☒ Residential Dwelling Number of Bedrooms 2 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 29.3

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 11/19/19 P.S -Need Fence

Comments

Date rec'd 7/15/19

Date frwd 7/15/19

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 9/10/20

Business Office Use Only

Date Received 7-25-19 Amount Paid $420.00

Received By MC Cash/Check No. 7664

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

Form A Updated: 4/15

REC'D DEC 16 2019

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

D

Permit Number: HS001848

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) 10733 S 176th

Owner: John Bruss Address 10405 S 176th St Bennet, NE 68317

A. Wastewater Piping

1. Material: _____ Diameter: _____in.
2. Distance between dwelling and septic tank: _____ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well _____ft.
   Pressure line _____ft
   Property Line _____ft.
   Foundation _____ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lataral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

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: Scott Weadenden Date: 12/14/19

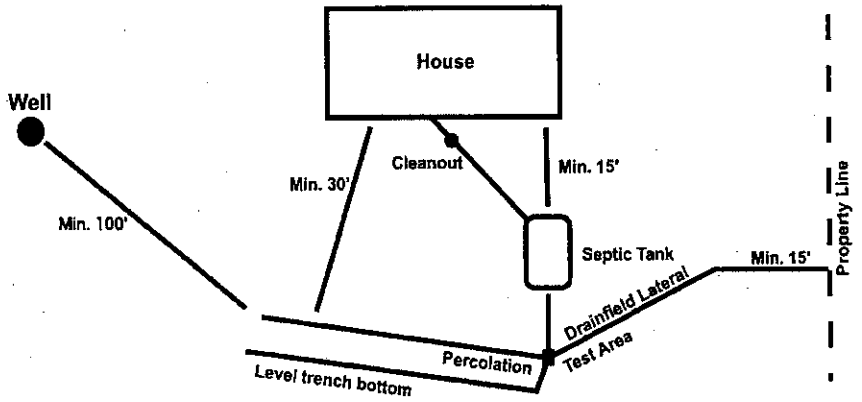
Complete As-Built drawing on the back of this form.

* Lane needs Gate, Lock & Signage 4/22/20 DH

Updated 2/18

Onsite Wastewater System Design (Example)

Indicate North
w/ Arrow Here:



*Note-If Lagoon, show all applicable dimensions

House
Water
270'
60'
60'
Lagoon

Nate C. Hartman

From: Todd A. Stutzman
Sent: Friday, July 12, 2019 11:55 AM
To: Nate C. Hartman
Subject: 10733 S 176th St

Nate,

The lot located in S35, T9, R8 Lot 14 NE is a buildable lot.

Todd Stutzman
Plan Examiner II
402-441-7097
555 S 10th Street, Room 203
Lincoln, NE 68508

Doug R. Smith

From: Doug R. Smith
Sent: Wednesday, May 08, 2019 1:28 PM
To: Ron E. Rehtus
Cc: Doug R. Smith
Subject: 190044-FP-Farmstead Split--10405 South 176th

Ron,
This property meets LLCHD requirements for Farmstead Split. The property will be subject to more stringent Property Transfer Code requirements if the property is sold. The possible location of the existing well within the 50' front yard setback is not an issue from the LLCHD standpoint.

Doug Smith, REHS, CP-FS
Senior Environmental Health Specialist
3131 "O" Street, Lincoln, NE 68510
O: 402-441-8031 F: 402-441-3890

Doug R. Smith

From:	Ron E. Rehtus
Sent:	Tuesday, May 07, 2019 11:03 AM
To:	Ken D. Schroeder; Doug R. Smith; Sean Stewart; Dennis Ribeiro
Cc:	Kathleen M. Chadwick; Jill Schuerman; Building & Safety Inspect-Enforce; Tom J. Cajka
Subject:	MSV19026 - 10405 South 176th Street - Farmstead Split >10 acres - COUNTY
Attachments:	190044-FP-Farmstead Split-Sheet 1.pdf; 190044-FP-Farmstead Split-Sheet 2.pdf; 190044-FP-Farmstead Split-Sheet 3.pdf; Application Forms 5-07-2019.pdf

Gentlemen,

Here is a farmstead split-off for 10.01 acres, referred to as Parcel "B" on the attached survey drawings.

Could you please review it, perform your necessary inspections, and provide me your approval/comments at your earliest convenience? Doug and Ken, it appears that the well is in the 50' front yard setback. Any issues with that, where LLCHD and County Engineer is concerned?

This review is requested due to a request for a >10 acre farmstead split-off through our department.

Owner/Contact: John and Lori Bruss
Phone: 402-440-9101 (Please call this number for scheduling inspections.)
E-mail: Not provided.

Applicant: Jill Schuerman with Civil Design Group, Inc.
Phone: 402-434-8494
E-mail: jschuerman@civildg.com

Surveyor: Civil Design Group, Inc.
Contact Information: 402-434-8494
E-mail: jschuerman@civildg.com

This property's legal address is 10405 South 176th Street.

Sean, I have left a hard copy of these documents in your mailbox.

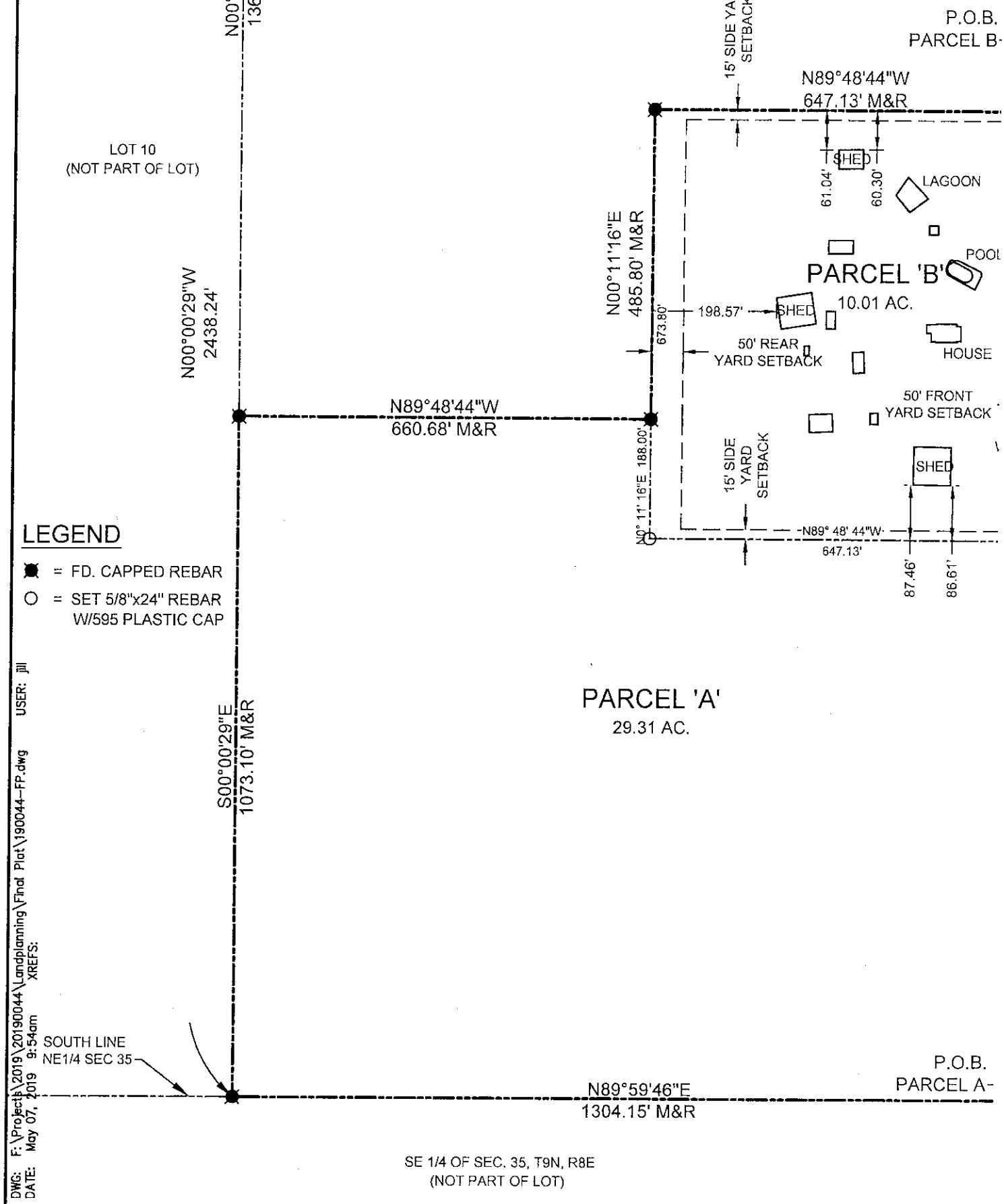
First page of the documents shows locations of the house, well, and septic lagoon.

Please let me know if any of you have any questions/concerns. Thank you!

Ron Rehtus
Zoning Coordinator
Building and Safety Department
Lincoln/Lancaster County
555 South 10th Street, Suite 203
Lincoln, NE 68508
Direct Phone: 402-441-8622

CITY OF LINCOLN NEBRASKA

https://lincoln.ne.gov/city/build/



drawn by:	jds
checked by:	-
project no.:	2019-0044
date:	05/02/2019

FARMSTEAD SPLIT
JOHN & LORI BRUSS PROPERTY
LANCASTER COUNTY, NEBRASKA

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Ph. 4
www
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6th P.M., Lancaster County, Nebraska, and more particularly described as follows:

Beginning at the Northeast corner of said Lot 11, said point being located on the Westerly 33.0' Right-of-Way line of S in a Southerly direction on the East line of said Lot 11 and on the Westerly 33.00' Right-of-Way line of said South 176 assumed bearing of S 00°11'16" W, for a distance of 673.80';

Thence N 89°48'44" W, for a distance of 647.13';

Thence N 00°11'16" E, for a distance of 673.80' to the Northwest corner of said Lot 11;

Thence S 89°48'44" E on the North line of said Lot 11, for a distance of 647.13' to the POINT OF BEGINNING and cor of 10.01 acres, more or less.

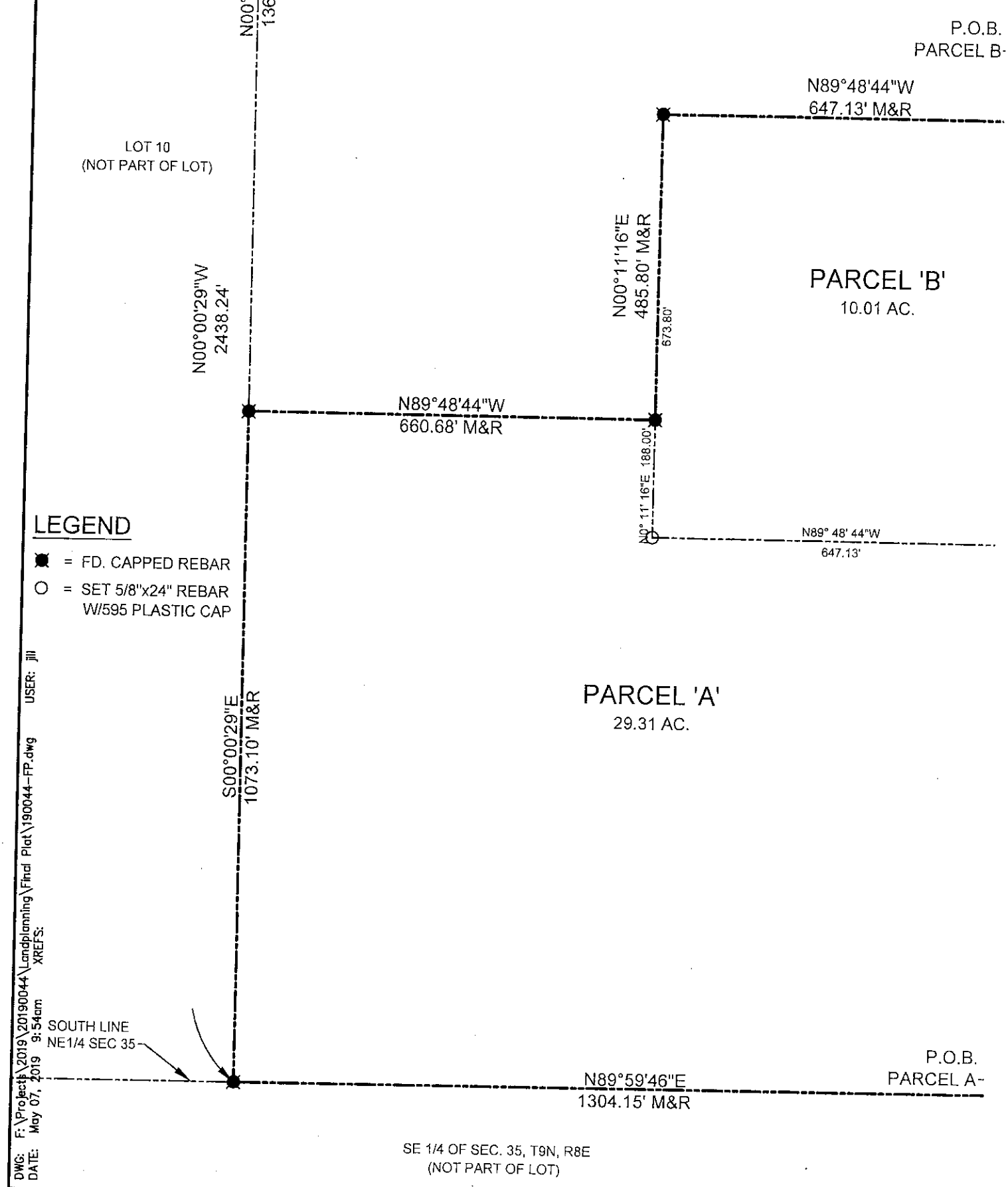
Together with and subject to any covenants, easements, and restrictions of record.

DWG: F:\Projects\2019\20190044\Landplanning\Final Plat\190044-FP.dwg USER: jill
DATE: May 07, 2019 9:55am XREFS:

drawn by:	jds
checked by:	-
project no.:	2019-0044
date:	05/02/2019

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drawn by:	jds
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project no.:	2019-0044
date:	05/07/2019

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MAY 2 19 11:32AM

Application for
MISCELLANEOUS FEES PERMIT

Permit # MSV19026

Building & Safety Department – City of Lincoln & Lancaster County

555 South 10th Street, Suite 208 * Lincoln, NE 68508-3995 * LMC Section 2.08.050
Phone # 402.441.7521 * Fax # 402.441.8214 * 24 HR Inspection Line 402.441.8413

Job Address: 10405 S. 176th Street Suite #: _____

Lot(s): 5 & 11, Sec 35, T9N, R8E Block: NA Subdivision: NA

FLOODPLAIN PROCESSING Request for removing property from FEMA identified floodplain ☐ LOMA ☐ LOMR ☐ LOMR-F ☐ CLOMA ☐ CLOMR	**OFFICE USE / FEE SCHEDULE** **$412.00**
FARMSTEAD ☑ Farmstead Subdivision (Split-off is over 10 acres)	**$412.00**
MISC. RESEARCH (Not associated with a permit review) Examples: ☐ Field Research/On-site Consultations for Code Assessments ☐ On-site Structural Consultation ☐ Repetitive Consultation/Research Regarding the Same Topic or Project ☐ Replacement of Drawings in Active Permit Sets ☐ Underground Storage Tanks ☐ Other _____ _____	**ESTIMATED FEES:** # Hrs. ____ X $____ = $____ **ACTUAL FEES:** (To be calculated during the review) # Hrs. ____ X $____ = $____ # Hrs. ____ X $____ = $____ **MINIMUM DEPOSIT:** **$ 50.00** **FEE TOTAL:** $412.00 pd ck mu

Description of work requested:
Farmstead Split. Please call John Bruss to arrange the house, well and lagoon inspection. John 402-440-9101

The undersigned hereby certifies that they have read and examined this application and know the same to be true and correct. All provisions of law and ordinances governing this type of work will be compiled with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

The undersigned also hereby agrees to pay all calculated fees.

PRINTED APPLICANT NAME: Civil Design Group, Inc. Cell Phone # _____

Applicant Signature: Jill D. Schuerman Date: May 2, 2019

Mailing Address: 8535 Executive Woods Drive Suite 200 City Lincoln State NE Zip 68512

Office Phone: (402) 434 -8494 Applicant Email: jschuerman@civildg.com

BUILDING & SAFETY APPROVAL: _____ **DATE:** _____

Application For Farmstead Permit (Zoning)

*** A fee will be assessed for Farmstead Permits in the City Limit and 3 Mile Limit***
If required, please fill out a Miscellaneous Fees Application

City/Three Mile ___ County X Permit # MSV 19026

The applicant is hereby requesting approval of a Farmstead on property located at:

Address: 10405 South 176th Street

Legal Description of property: Lot 11 Block _____

~~Addition~~ 35-09-08

	Yes	No
1. Residence on this property has existed for more than 5 years?	____	____
2. This property has been used for farming for more than 5 years?	____	____

Owner _____

Applicant _____

Telephone No. _____ Date _____

****

For Official Use Only

Zoning _____ Fee _____

Minimum Housing Code ____ Approved ____ Denied (Comments on back)

Minimum Zoning Requirements ____ Approved ____ Denied (Comments on back)

Residence has been the primary residence associated with a farm for at least 5 years? ____ Yes ____ No

****

Health Department Approval _____ Date _____

County Engineer Approval _____ Date _____

Building & Safety Approval _____ Date _____

Farmstead.mis

Minimum Housing Code

Comments: _____

_____

_____

_____

_____

_____

_____

_____

_____

By _____ Date _____

Minimum Zoning Requirements:

Lot Area _____ Average Lot Width _____

Frontage _____ Front Yard _____

Side Yard _____ Rear Yard _____

Height _____



Application for
MISCELLANEOUS FEES PERMIT

Permit # MSV19026

Building & Safety Department – City of Lincoln & Lancaster County

555 South 10th Street, Suite 208 * Lincoln, NE 68508-3995 * LMC Section 2.08.050
Phone # 402.441.7521 * Fax # 402.441.8214 * 24 HR Inspection Line 402.441.8413

Job Address: 10405 S. 176th Street Suite #: _____

Lot(s): 5 & 11, Sec 35, T9N, R8E Block: NA Subdivision: NA

FLOODPLAIN PROCESSING Request for removing property from FEMA identified floodplain ☐ LOMA ☐ LOMR ☐ LOMR-F ☐ CLOMA ☐ CLOMR	**OFFICE USE / FEE SCHEDULE** **$412.00**
FARMSTEAD ☑ Farmstead Subdivision (Split-off is over 10 acres)	**$412.00**
MISC. RESEARCH (Not associated with a permit review) Examples: ☐ Field Research/On-site Consultations for Code Assessments ☐ On-site Structural Consultation ☐ Repetitive Consultation/Research Regarding the Same Topic or Project ☐ Replacement of Drawings in Active Permit Sets ☐ Underground Storage Tanks ☐ Other _____ _____	**ESTIMATED FEES:** # Hrs. ____ X $_____ = $_____ **ACTUAL FEES:** (To be calculated during the review) # Hrs. ____ X $_____ = $_____ # Hrs. ____ X $_____ = $_____ **MINIMUM DEPOSIT:** **$ 50.00** **FEE TOTAL:** $412.00 pd ck mu

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Farmstead Split. Please call John Bruss to arrange the house, well and lagoon inspection. John 402-440-9101

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The undersigned also hereby agrees to pay all calculated fees.

PRINTED APPLICANT NAME: Civil Design Group, Inc. Cell Phone # _____

Applicant Signature: Jill D. Schuerman Date: May 2, 2019

Mailing Address: 8535 Executive Woods Drive Suite 200 City Lincoln State NE Zip 68512

Office Phone: (402) 434-8494 Applicant Email: jschuerman@civildg.com

BUILDING & SAFETY APPROVAL: _____ **DATE:** _____

Minimum Housing Code

Comments: _____

_____

_____

_____

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_____

By _____ Date _____

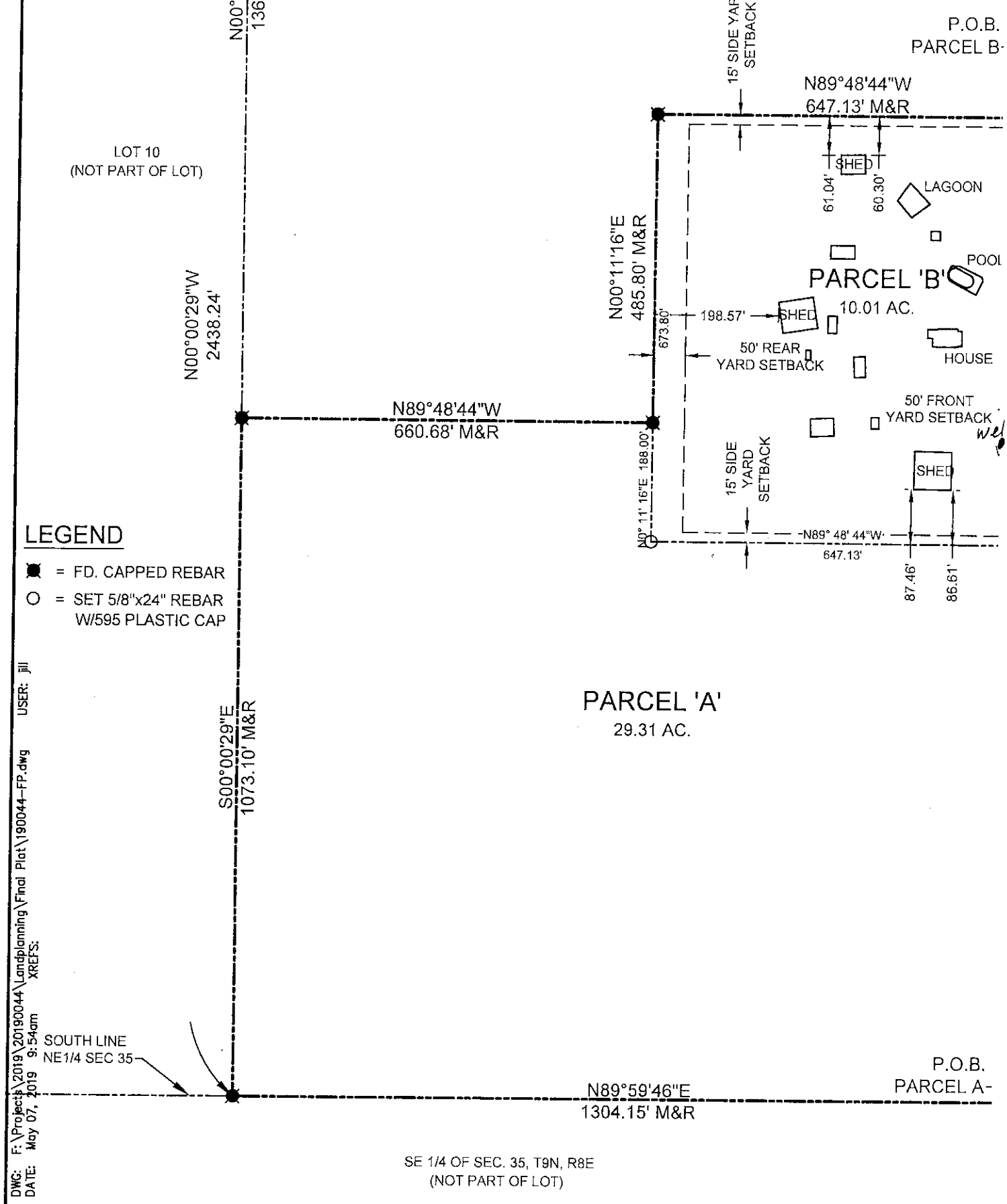
Minimum Zoning Requirements:

Lot Area _____ Average Lot Width _____

Frontage _____ Front Yard _____

Side Yard _____ Rear Yard _____

Height _____

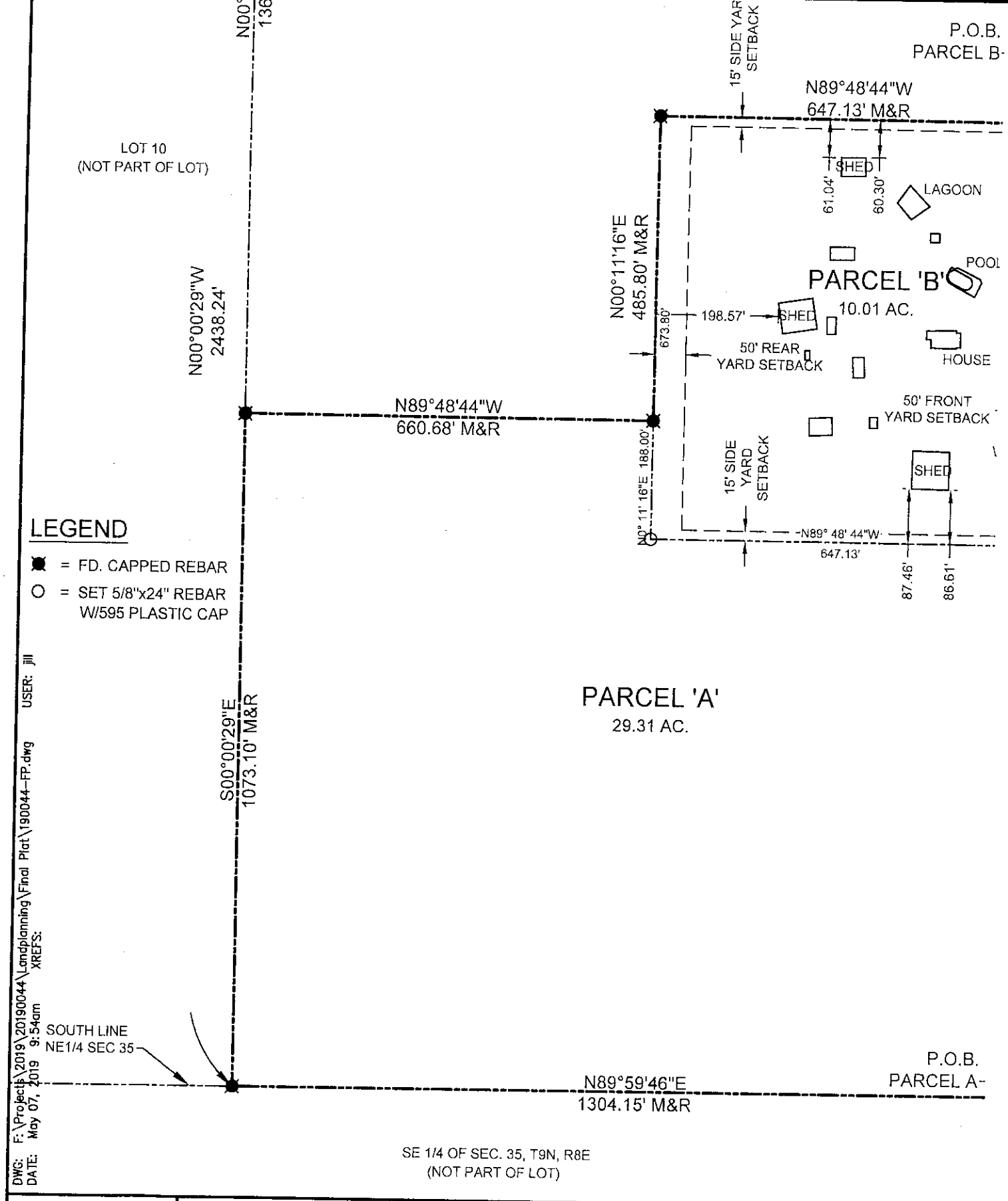


DWG: F:\Projects\2019\20190044\Landplanning\Final Plat\190044-FP.dwg USER: jill
DATE: May 07, 2019 9:54am XREFS:

drawn by:	jds
checked by:	-
project no.:	2019-0044
date:	05/02/2019

FARMSTEAD SPLIT
JOHN & LORI BRUSS PROPERTY
LANCASTER COUNTY, NEBRASKA

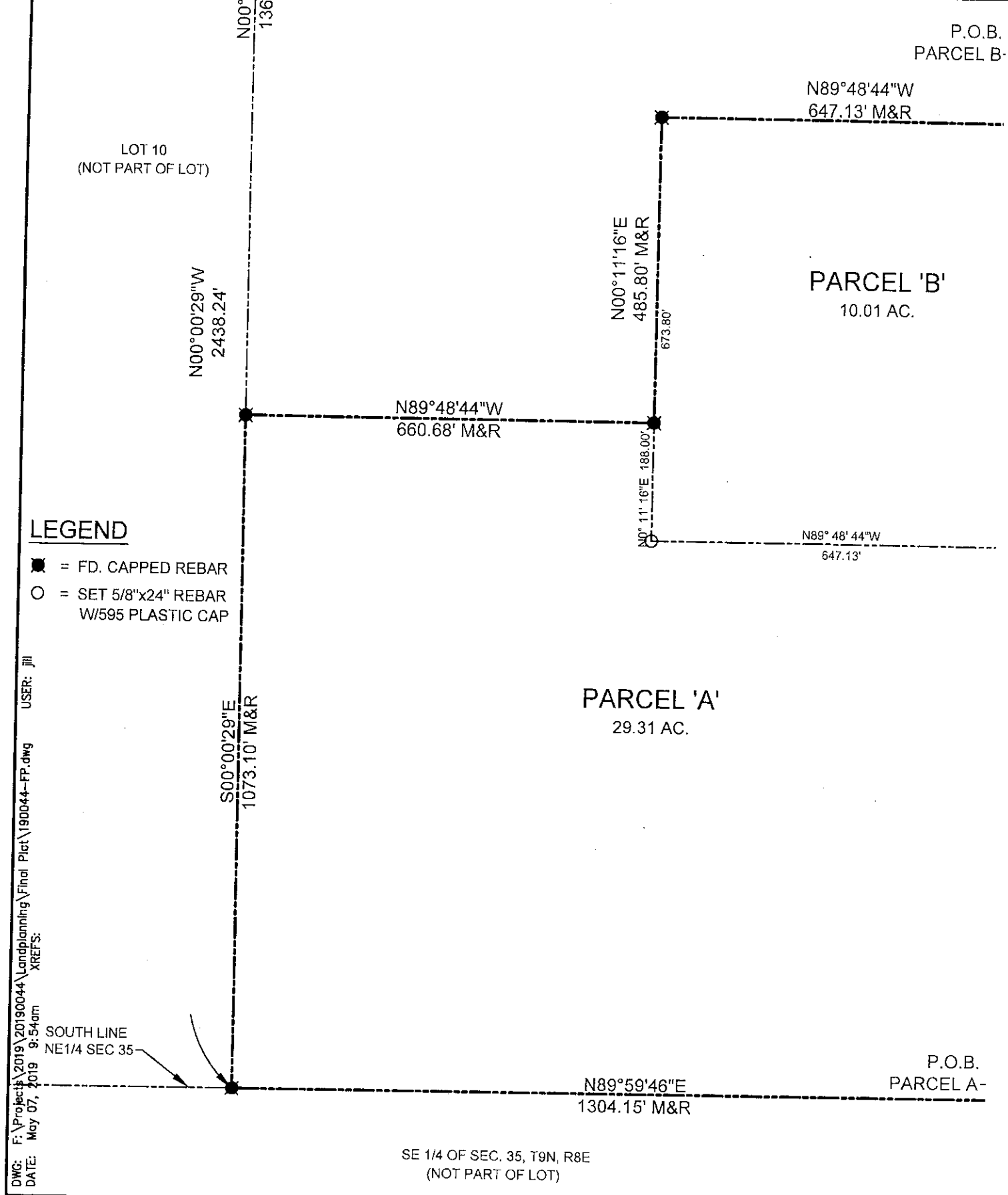
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drawn by:	jds
checked by:	-
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FARMSTEAD SPLIT
JOHN & LORI BRUSS PROPERTY
LANCASTER COUNTY, NEBRASKA

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DWG: F:\Projects\2019\20190044\Landplanning\Final Plat\190044-FP.dwg USER: jill
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JOHN & LORI BRUSS PROPERTY
LANCASTER COUNTY, NEBRASKA

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Application For Farmstead Permit (Zoning)

*** A fee will be assessed for Farmstead Permits in the City Limit and 3 Mile Limit***
If required, please fill out a Miscellaneous Fees Application

City/Three Mile ___ County X Permit #MSV19026

The applicant is hereby requesting approval of a Farmstead on property located at:

Address: 10405 South 176th Street

Legal Description of property: Lot 11 Block _____

~~Addition~~ 35-09-08

	Yes	No
1. Residence on this property has existed for more than 5 years?	____	____
2. This property has been used for farming for more than 5 years?	____	____

Owner _____

Applicant _____

Telephone No. _____ Date _____

****

For Official Use Only

Zoning _____ Fee _____

Minimum Housing Code ____ Approved ____ Denied (Comments on back)

Minimum Zoning Requirements ____ Approved ____ Denied (Comments on back)

Residence has been the primary residence associated with a farm for at least 5 years? ____ Yes ____ No

****

Health Department Approval _____ Date _____

County Engineer Approval _____ Date _____

Building & Safety Approval _____ Date _____

Farmstead.mis