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

A

Permit Number HS001854

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 6300 SW 34th Ct (no rural route) City Lincoln, NE Zip 68523

Legal Description NW (1/4) 17 (1/4 Section) 9N (Township) 6E (Range) Roberts Ironwood Est (Subdivison) 4 (Addition) 2 (Block) (Lot)

PID 09-17-104-002-000

B. Owner

Name Michael Selvage Signature [signature]

Address 6300 SW 34th Ct City/State/Zip Lincoln, NE 68523

Home Phone 402-304-0904 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 5 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 3.18

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 1-03-19 Amount Paid $420.00
Received By JAO Cash/Check No. 9658

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

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

B

Permit Number: 06B03220

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 3400 Pleasant Hill Rd. (no rural route) City Lincoln NE, Zip

Owner Mike Salvage Address 1647 SW. 13th St.

Soil Type (SCS): Percolation Rate: 30 Min / 1.729 min./inch

Date of Tests 6-28-06 to 6-29-06 Weather: Precipitation 0 Temperature 90

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results			
		Start		End		Start			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 (Min)	Water Level Drop (in)	Percolation Rates (Min/in)	
1	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	4.5	30 / 4.5	7
2	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	2.75	30 / 2.75	11
3	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	1	30 / 1	30
4	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	.5	30 / .5	60
5	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	.375	30 / .375	80
6	36	6-28	12:00	6-28	6:00	6-29	11:30	20	6-29	12:00	30	1.25	30 / 1.25	24

Sum of Percolation Rates: 30 / 10.625

Average of Rates: 30 min / 1.729 IN.

Rate Used for Calculation: 60 MIN / 1 IN.

Person Conducting Percolation Tests

Name: Dave Pruse

Phone: 402-525-0822 or 402-792-0085

Address 7500 Panama Rd. Hickman

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Greater than 20 minutes difference

Signature of Reviewing Official Jerrold C. Wood Date JULY 14, 2006

FORM 23-101 10-98

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

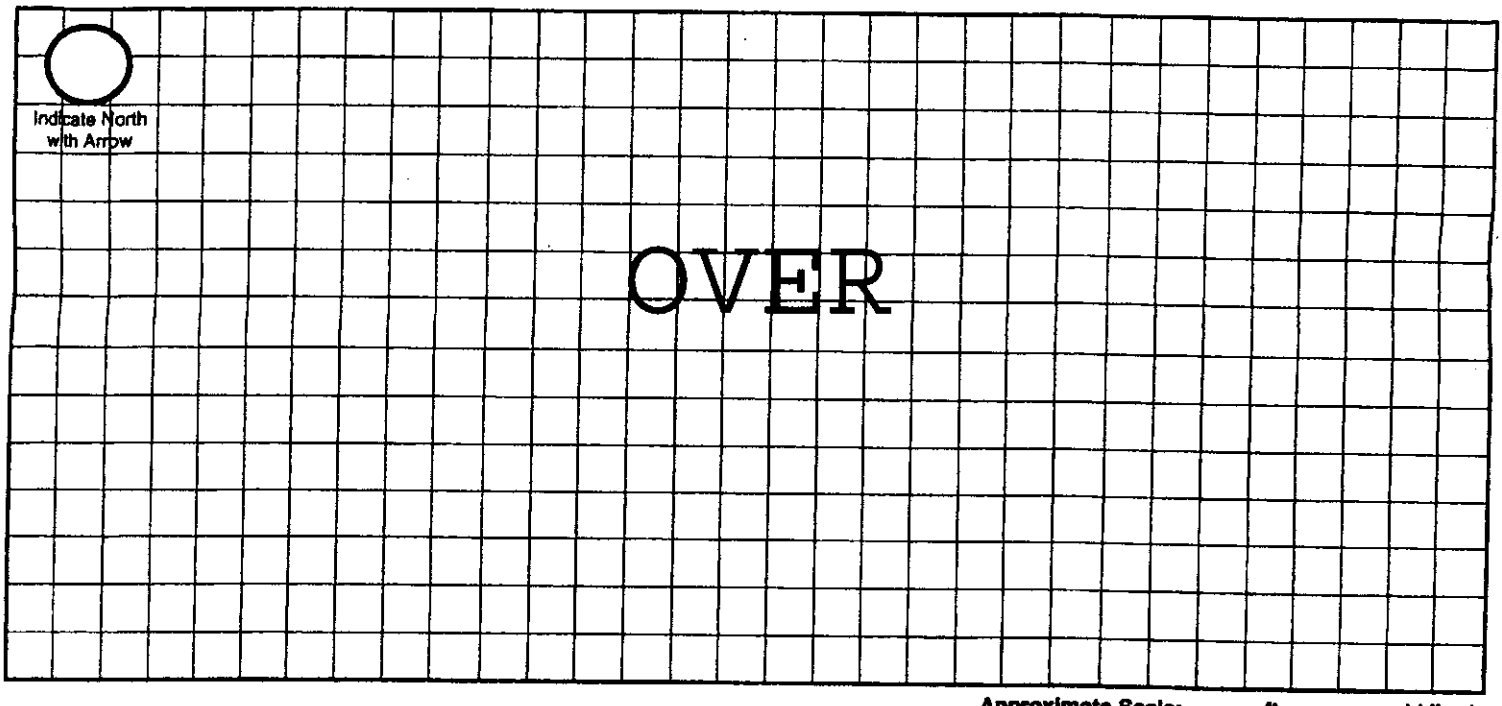
C

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) 6300 SW 34th Ct City Lincoln NE, Zip 68523

B. Proposed Septic Tank/s

Septic Tank Cap. 2,000 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 60 (min/inch = mpi) No. of Bedrooms 5 Soil Type Wymore SCL Land Slope _____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,755 sq.ft.

Total length of laterals 390 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 4 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 Builder/Agent/Contractor Existing Home Date _____

Installer _____ Date _____

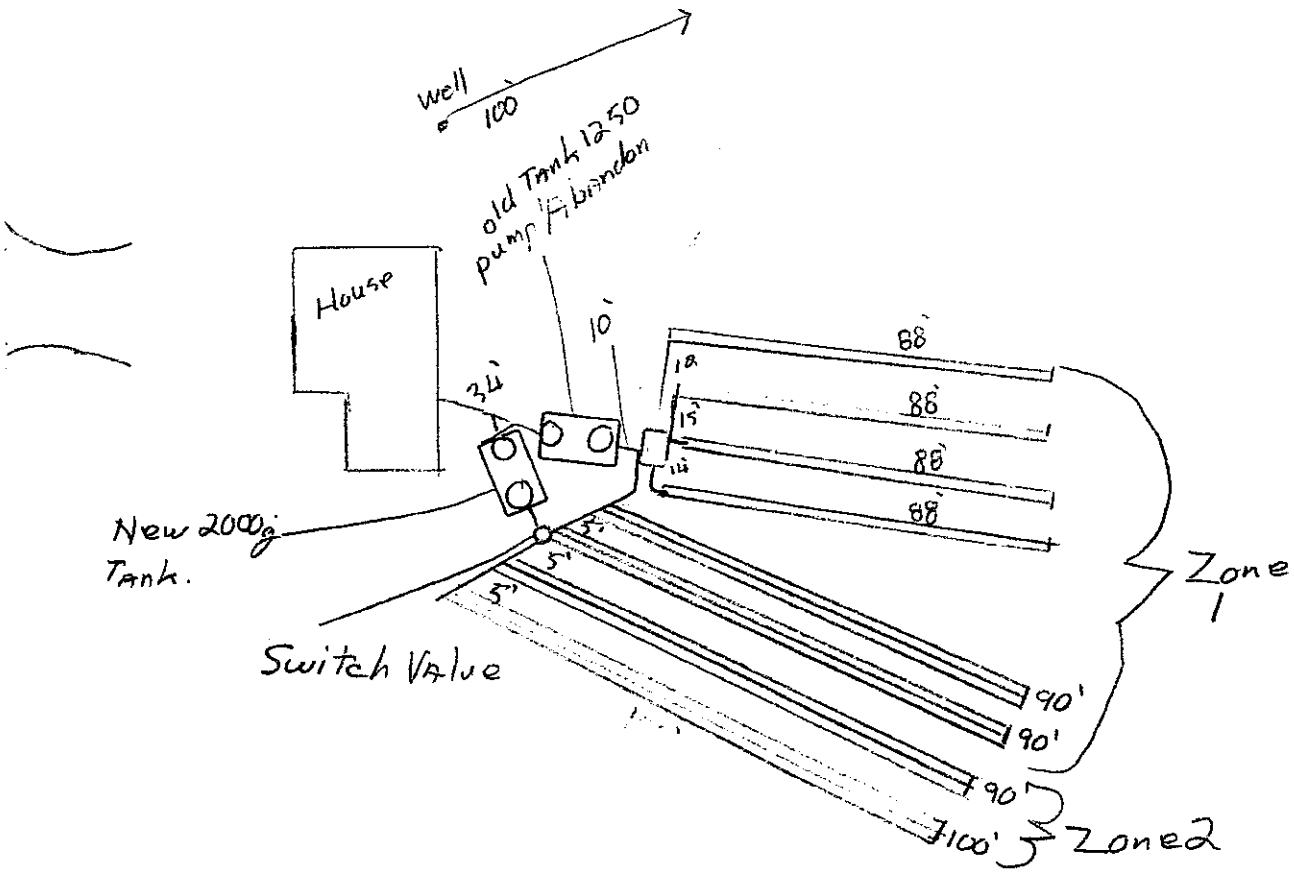
Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

Michael/Sherri Selvage.
6300 SW 34CT
Lincoln NE 68523.

N

5 Bed Room
Yes Disposal
No O/S Tub.

60 mPI
Tank ~~1750~~ 2000g.
390' EZ Flow.



Pleasant Hill Rd.

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. HS001854

System Type: Standard

Situs: 6300 SW 34TH ST, LINCOLN, NE 68523

Issued: 7/3/2019

Expires: 7/3/2020

Description: ROBERTS IRONWOOD ESTATES, BLOCK 4, Lot 2

Owner: SELVAGE, MICHAEL P & SHERRI L
6300 SW 34 CT
LINCOLN, NE 68523

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

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
#5001854

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)

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

1. Health Department
Site visits
Comments
Date rec'd 7/3/19
Date frwd 7/3/19
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 8/6/19

Business Office Use Only
Date Received 7-23-19 Amount Paid $420.00
Received By JKO Cash/Check No. 9658

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: 402-441-8643

D Exhibit 4

Permit Number: HS001854

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 = 09-17-104-002-000

Address or Legal Description or Parcel Identification Number (PID) 6300 SW 34th Ct, Lincoln, NE 68523

Owner: Michael P Selvage Address Same

A. Wastewater Piping (New)

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 22 ft. (Tied in with new pipe about 22' from house)

B. Septic Tank

1. Material Concrete
2. Capacity: 2,000
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well 100 ft.+
   Pressure line N/A ft
   Property Line 100 ft.+
   Foundation 20 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 4 ft. SE

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: 5
3. Length of each lateral (linear): ft. 100 ft. 90 ft. 80 ft. 70 ft. 50
4. Drainfield size: 1,755 sq. ft. (175' Total)
5. Distance to:
   Well 100 ft.+
   Pressure line N/A ft.
   Property line 30 ft.+
   Depth of Groundwater >8'

(Unable to get that to pass inspection - plat)

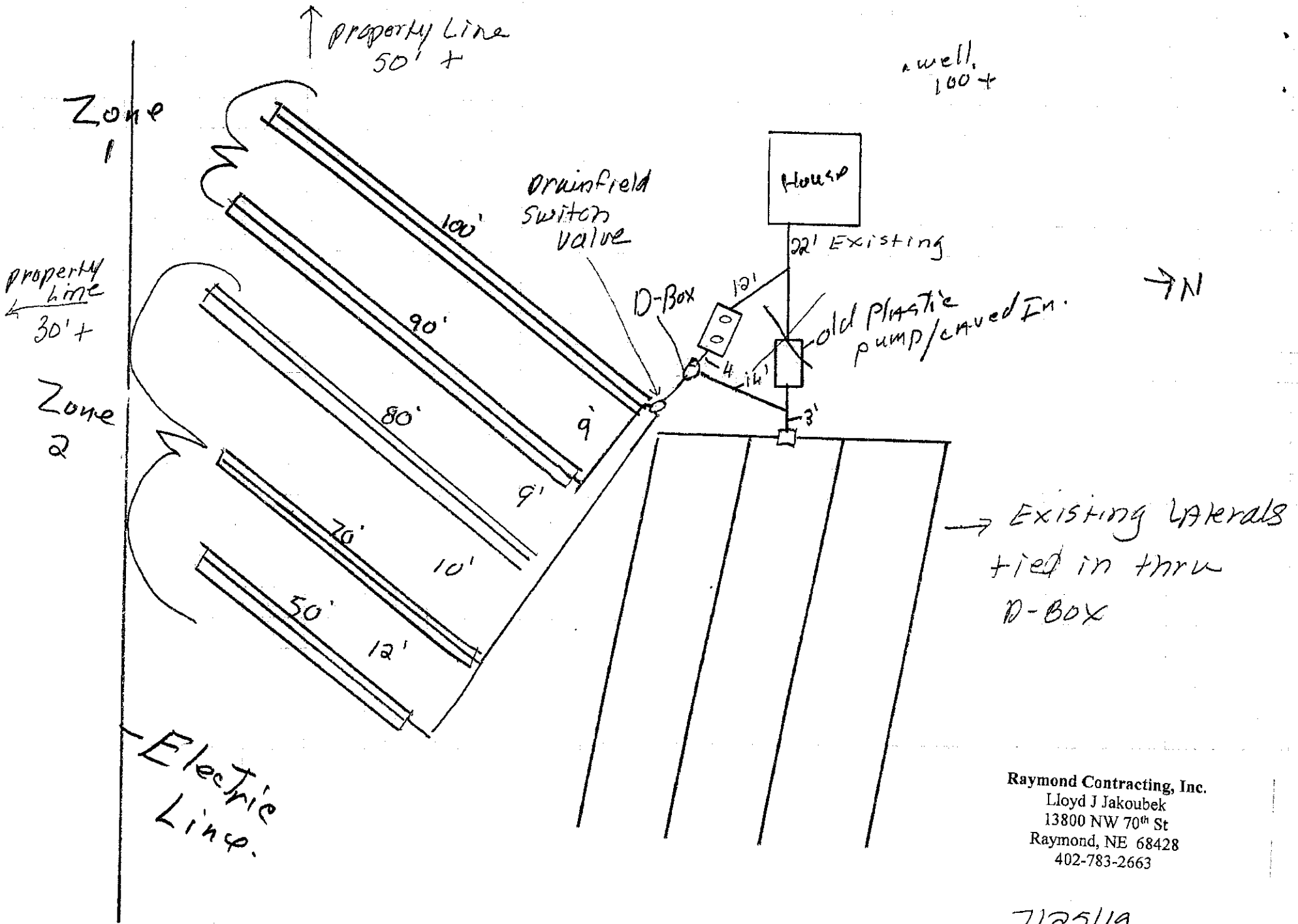
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No

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: [signature] Date: July 25, 2019

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



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

7/25/19