HS001876

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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):** 5280 NW 84th St, Lincoln, NE 68524

   Legal Description of Property: Township: 10N Range: 5E Section: 2-SW

   Block ____ Lot 11 SubDivsion ____ Add: ____

   *Parcel ID 04 - 02 - 300 - 001 - 000 (i.e. 99-99-999-999-999)

2. **Property use:** ☑ Residential ☐ Commercial ☐ Other use (Describe: ____)
   Number of bedrooms 3 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:** ~~Upgrade drainfield. Keep the 2 outer existing laterals, disconnect the middle line for 120'/420sqft. Install 2 new laterals, 70' each, using EZFlow bundles for 630sqft for a total of 1,050sqft. Using existing 1,000 gallon tank and adding risers.~~ See attached engineers detailed design.

5. Current Type of Lateral- perf pipe & gravel **Current Linear Ft. Of Lateral** - 180 (3.5' wide trench)

   Current Tank Gallonage- 1,000

6. Print Name William H Rohe Jr Address 5280 NW 84th St, Lincoln, NE 68524 Phone: 402-310-8450

   Applicant Signature: William H Rohe Jr

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 8/26/19 REVIEW: ☑ Approved ☐ Disapproved By: ____

Comments (if any): ____

Site visits
Date ___/___/___ By ____
Date ___/___/___ By ____

Installation final written approval
Date 10/29/19 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: 8/21/19 Amount $225.00 Check No. 9710 Initials ____

Revised 4/8/13

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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 5280 NW 84th St (no rural route) City Lincoln NE, Zip 68524

Owner William H Rohe Jr Address 226 S Exeter, Malcolm, NE 68402

Date of Tests 7/17/19 to 7/18/19 Weather: Precipitation 0 Temperature 87°

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. 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	32	7/17	10:00a	7/17	2:00p	7/18	11:00a	6	7/18	11:30a	30	1/2	60
2	37	"	"	"	"	"	"	6	"	"	"	11/16	44
3	34	"	"	"	"	"	"	6	"	"	"	9/16	53
								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: 157
Average of Rates: 52
Rate Used for Calculation: 52

Soil type (NRCS Maps/Other) Aksarben SCL
Groundwater Depth >8'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

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

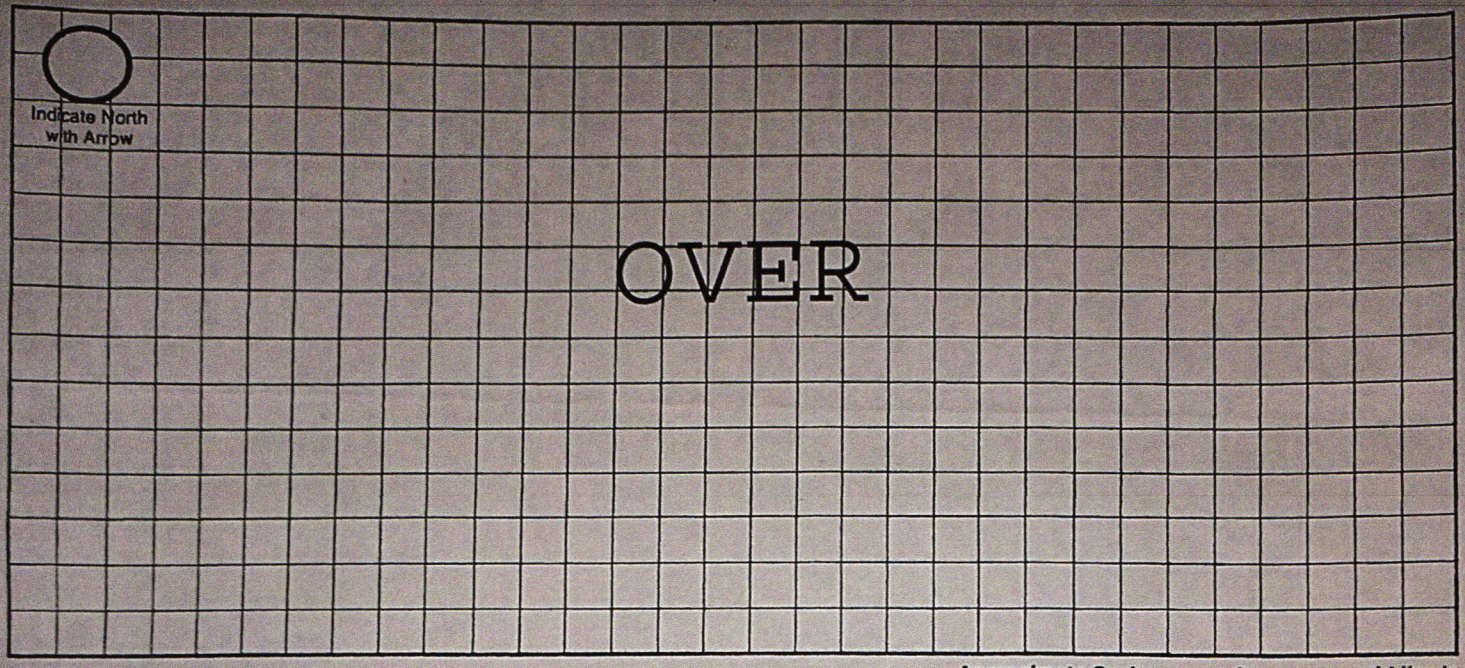
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Permit Number:

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) 5280 NW 84th St City Lincoln NE, Zip 68524

B. Proposed Septic Tank/s

Septic Tank Cap. Existing 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 (percoloation test required) ☒ Lagoon

D. Drainfield Absorption System

Percolation Rate 60 (min/inch = mpi) No. of Bedrooms 3 Soil Type SCL Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield ~~1,050~~ 765 sq.ft.

Total length of laterals ~~140 new~~ ~~120 existing~~ 170' Type of distribution: Existing ☒ Perforated pipe ☐ Half-Round ☐ Chamber ☒ New Other EZFlow 1203H

No. of absorption trenches ~~4~~ 3 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 _____ Date 7-24-19

Installer _____ Date 8/21/2019

Onsite Form C 12-06

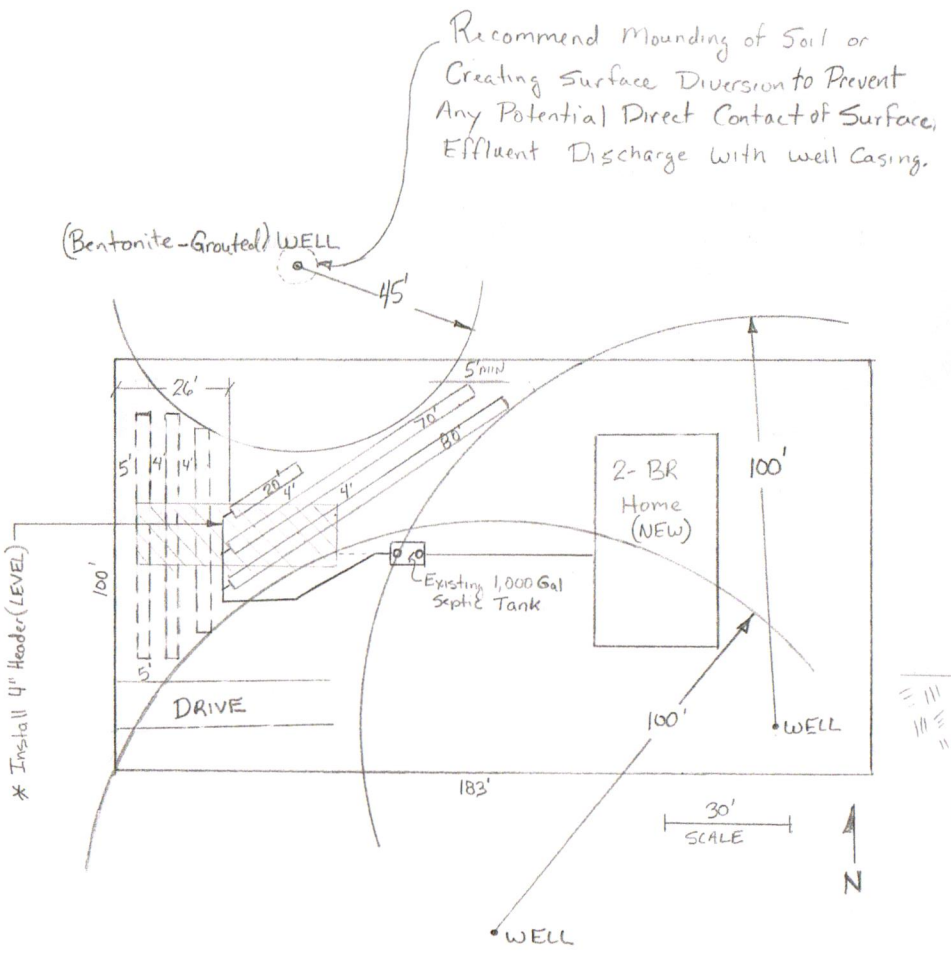
Septic System Design - 5280 NW 84th St, Lincoln, NE

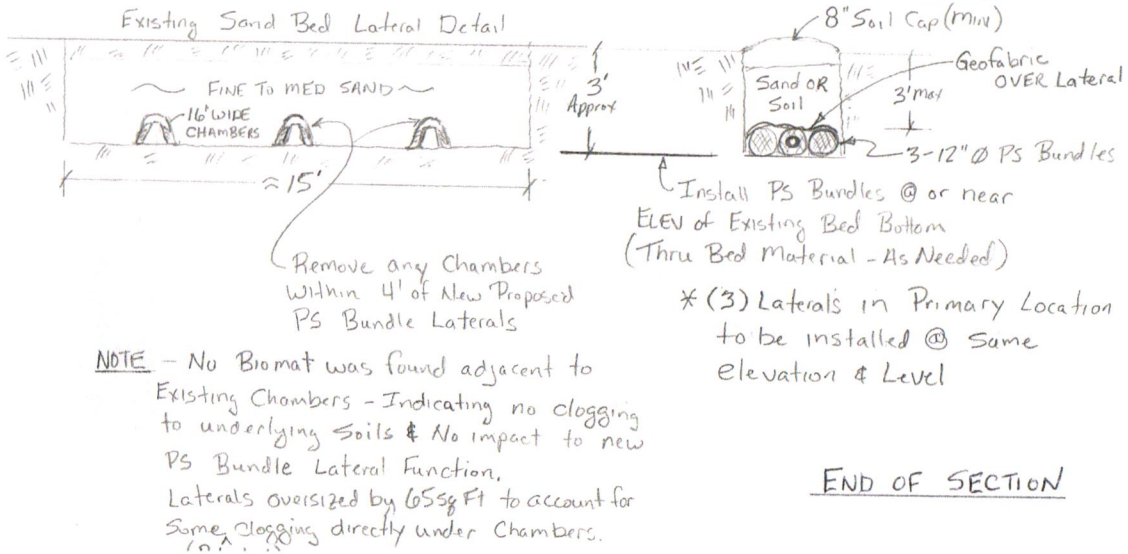
CONSTRUCTION AND MAINTENANCE NOTES:

1. Contractor to verify size, condition and conformance of existing septic tank to NDEE Title 124
2. Remove chamber sections in existing bed within 4ft of new proposed laterals.
3. If encouter biomat/clogging of soil when excavating for new laterals through bed, over-excavate and remove biomat and use clean sand to fill to proper trench bottom elevation.
4. Contractor Responsible for Contacting 811 for Primary Utilities and Should Contact Owner for Secondary Utility Locations in Proposed Construction Area.
5. Additional Septic Permit and Inspections are Required from Lancaster County Health Department
6. Septic Installation Shall Also Meet Minimum Requirements of NDEE Title 124 and Shall Be Registered With NDEE Onsite Department
7. Contractor to Warrant Workmanship Items for a Period of 1-Year (Equipment Warranties Limited To Mfg. Warranty Terms and Coverage)
8. Septic Installation Excavation Back-fill to be Left Slightly Mounded to Allow for Natural Settling (Especially Over Laterals) - Additional Future Grading & Seeding May Be Required
9. Owner Responsible for Routine Pumping of Septic Tank & Keep Trees From Growing Within Lateral Area.
10. Due to limited lateral area, recommend effluent filter on septic tank outlet - requires periodic cleaning
11. Contractor to contact engineer during construction if encounter unseen issues and coordinate completion inspection documents.

Prepared By: **Jeffery N. Schoeneck, P.E.**
Horizon Envirotech, LLC
1291 County Rd V
Fremont, NE 68025
402-720-9209
jeffhet@1791.com

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NOTE - No Biomat was found adjacent to Existing Chambers - Indicating no clogging to underlying Soils & No impact to new PS Bundle Lateral Function. Laterals oversized by 655 sq Ft to account for Some clogging directly under Chambers.

END OF SECTION

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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: Not Known

NDEE Permitted System #190WT021

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 = 04-02-300-001-000

Address or Legal Description or Parcel Identification Number (PID) 5280 NW 84th St, Lincoln, NE 68524

Owner: William H Rohe Jr Address 226 S Exeter St, Malcolm, NE 68402

A. Wastewater Piping (Existing)

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 40 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1,000
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well 50 ft.+
   Pressure line N/A ft
   Property Line 45 ft.+
   Foundation 40 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 45 ft. W

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: 3
3. Length of each lateral (linear): ft. 70 ft. 70 ft. 30 ft.
4. Drainfield size: 765 sq. ft.
5. Distance to:
   Well 45 ft.+
   Pressure line N/A ft.
   Property line 5 ft.+
   Depth of Groundwater >8'

See As-Built Drawing NA

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: 10/16/19

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

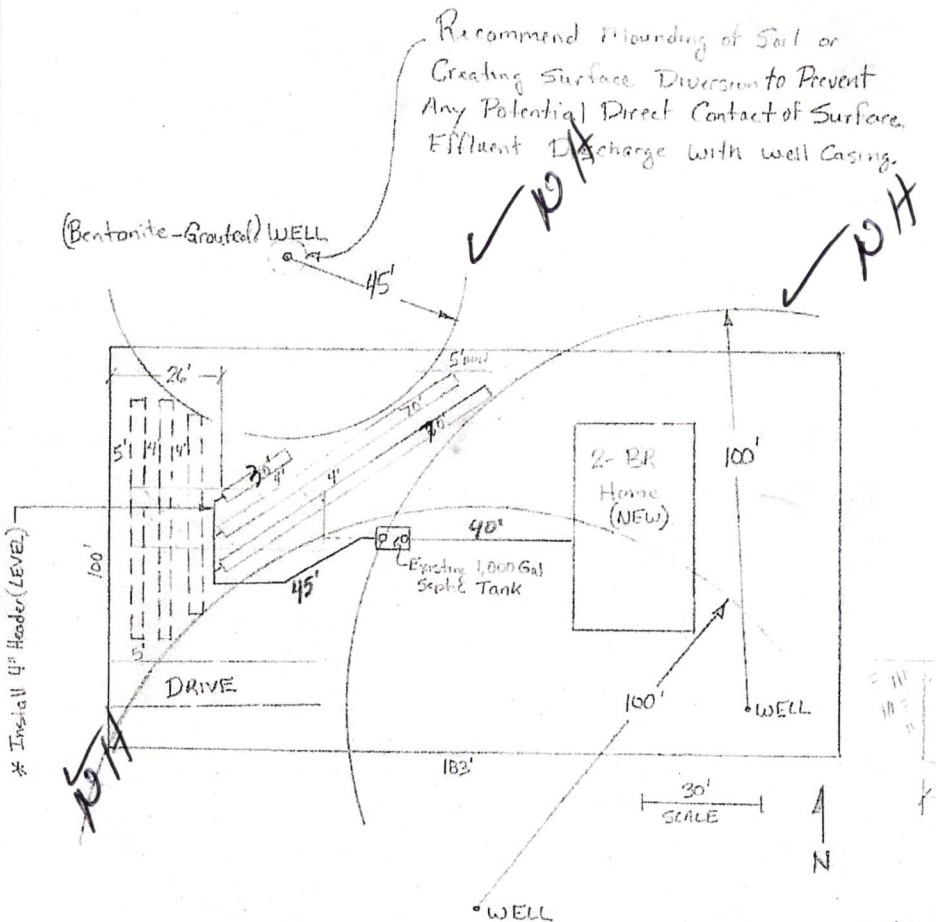
10/16/2019

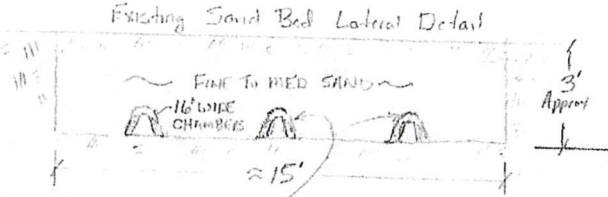
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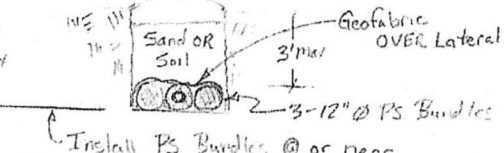
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Prepared By: **Jeffery N. Schoeneck, P.E.**
Horizon Envirotech, LLC
1291 County Rd V
Fremont, NE 68025
402-720-9209
jeffhet@1791.com







* (3) Laterals in Primary Location to be installed @ Same elevation & Level

NOTE - No Biomat was found adjacent to Existing Chambers - Indicating no clogging to underlying Soils & No impact to new PS Bundle Lateral Function. Laterals oversized by 655sq Ft to account for Some clogging directly under Chambers.

Pollock tape w/ contractor to all wells

END OF SECTION

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NEBRASKA

Good Life. Great Resources.

DEPT. OF ENVIRONMENT AND ENERGY

Construction Permit No. 19OWT021

is hereby issued to

William Rohe

for the

300 Gallon/Day Onsite Wastewater Treatment System

Description:

Average day flow is 300 GPD for the two bedroom dwelling. A 1,000 gallon existing septic tank will be reused to be followed by a new bundled polystyrene soil absorption system. The three foot wide trenchs will total 170 feet in length and meet the 700 sq. ft. requirement of Title 124 when multiplying by the 1.5 effective width factor for polystyrene systems. The bundles shall have a geofabric covering to prevent fines from plugging the bundles. A encrouchment of a recently installed residential well of 45 ft exists but well records show the well is screened at 145 ft depth and bentonite chip grouted the full length of the casing 95 ft to 6 ft. The static water elevation is recorded at 97 ft depth. It was the opinion of a professional engineer, Jeffery Schoeneck, who reviewed the water well registration and the proposed septic system layout that there is no health threat to the encrouched well.

located at

5280 NW 84th Street, Lincoln, NE 68524
40 86' 46 lat -96 83'38 long

Pursuant to a Delegation Memorandum dated July 1, 2019, and signed by the Director, the undersigned hereby executes this document on behalf of the Director.

Signed 8/21/19

Shelley Schneider

Shelley Schneider, Water Permits Division Administrator

Suite 400, The Atrium, 1200 "N" Street, P. O. Box 98922, Lincoln, Nebraska, 68509-8922
Phone (402) 471-2186, Fax (402) 471-2909, e-mail ndee.moreinfo@nebraska.gov

Onsite Water Supply System
Property Transfer Inspection Report

Lincoln-Lancaster County Health Department
Environmental Public Health Division (441-8031)
3140 "N" Street, Lincoln, NE 68510

FOR OFFICE USE ONLY rev 6/05
APD No. HPT00___ ___ ___
Initialized __/__/__ By _____
FOS Rec'd __/__/__ By _____
Amt _____ ck# _____
Posted __/__/__ By _____
Return to Water Team Support Staff

Property Address: 5280 NW 84

Legal Description: T___ R___ S___ ¼___ Subdiv. _____ Blk ____ Lot ____

Parcel ID: __-__-___-___-___

Owner Name: William Rohe Phone #1: _____ Phone #2: _____

Owner E-mail address: _____ Fax #: _____

Authorized Agent*: _____ Phone #1: _____ Phone #2: _____

Agent Address (not required for PTI): _____ Fax #: _____

Agent E-mail address: _____

(*Authorized Agent shall mean a Real Estate Agent, Property Transfer Inspector (PTI), or any individual or corporation authorized, in writing, to act as the legal representative in all matters authorized by the owner.)

Onsite Water Supply System (check one)

- ☒ Private Well
- ☐ Shared Well
- ☐ Public Water

Onsite Wastewater Treatment System (check one)

- ☐ Lagoon
- ☒ Standard Septic
- ☐ Non-Standard (specify) _____
- ☐ Community System

Required Information:

1. The well meets setback requirements from known sources of contamination — (Yes) No
2. The well is visibly in substantial compliance with Title 178 NAC 3 — (Yes) No
3. Water sample tests for coliform bacteria were negative — (Yes) No
4. Water sample tests for nitrate were less than 10 mg/l — (Yes) No
   Nitrate test result 6.35
5. Additional inspection information attached — Yes No

Comments:

_____

_____

_____

_____

Note: If the onsite water supply serving this property is not located on the described property, a copy of an agreement to use the supply must be included with this report.

The system has been inspected within the guidelines established by the Lincoln-Lancaster County Health Department.

Signature: Michael Dietze Permit No.: HPTINS00 03 Date: 08-01-2019
Property Transfer Inspector

Received Time Aug. 21. 2019 10:00AM No. 1067