HS001946

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):** 6901 ALMIRA LANE LINCOLN, NE 68516

   Legal Description of Property: Township: 9 Range: 7 Section: 16

   Block ____ Lot 3 SubDivsion LEE'S SUMMIT Add: ____

   ***Parcel ID** 16 - 16 - 401 - 003 - 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:** ADDING LATERAL

5. **Current Type of Lateral-** HALF ROUND CONCRETE **Current Linear Ft. Of Lateral -** 200 FT

   Current Tank Gallonage- 1000 GALLON CONCRETE

6. Print Name JAIME KIRK Address 105 LOCUST P.O. Box 194 HICKMAN, NE Phone: 402-475-2462

   Applicant Signature: Jaime Kirk

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: 12/19/19 Amount $230.00 Check No. CC 0214 Initials AO

Revised 4/8/13

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

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 6901 Almira Lane (no rural route) City Lincoln NE, Zip 68516

Owner Kathy Batterman Address

Date of Tests 12/5/19 to 12/6/19 Weather: Precipitation none Temperature 50 degrees

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			End				
Hole No.	Hole Depth(in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	30 inches	12/5	4:00 pm	12/6	9:55 am	12/6	1:25 pm	6	12/6	1:55 pm	30 min	1/2	60
2	30 inches	12/5	4:00 pm	12/6	9:55 am	12/6	1:25 pm	6	12/6	1:55 pm	30 min	1/2	60
3	30 inches	12/5	4:00 pm	12/6	9:55 am	12/6	1:25 pm	6	12/6	1:55 pm	30 min	5/8	48
4	30 inches	12/5	4:00 pm	12/6	9:55 am	12/6	1:25 pm	6	12/6	1:55 pm	30 min	5/8	48
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-475-2462
Address 105 Locust Street P.O. Box 191
Hickman, NE 68372

Soil type (NRCS Maps/Other) 7207 Askarban
Groundwater Depth +12

Sum of Percolation Rates: 216
Average of Rates: 54
Rate Used for Calculation: 54

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
ALTERATION PERMIT
No. HS001946

System Type: Standard

Situs: No Site Address Specified

Issued: 12/24/2019

Expires: 12/24/2020

Description: LEES SUMMIT, Lot 3, EX PT ON E FOR ST (EX DESC IN INST #1999-31286)

Owner: BATTERMAN, ROBERT E &
KATHLEEN J LIFE ESTATES
6901 ALMIRA LN
LINCOLN, NE 68516

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim Health Director

Dear Applicant:

The above document is your permit to alter an existing On-site Waste Water System at the location listed. Please contact this office once the alteration is complete to obtain final approval before use.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Interim Health Director

JAIME KUBIK
105 LOCUST ST, PO BOX 191
HICKMAN, NE 68372

SCANNED

HS001946

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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.

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***Parcel ID** 16 - 16 - 401 - 003 - 000 (i.e. 99-99-999-999-999)

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Current Tank Gallonage- 1000 GALLON CONCRETE

6. Print Name JAIME KIRK Address 105 LOCUST P.O. Box 191 HICKMAN, NE Phone: 402-475-2462

Applicant Signature: Jaime Kirk

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 12/24/19 REVIEW: ☒ Approved ☐ Disapproved By: ____

Comments (if any): ____

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

Installation final written approval
Date 11/9/20 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: 12/19/19 Amount $230.00 Check No. CC 0214 Initials ____

Revised 4/8/13

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

D

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

Address or Legal Description or Parcel Identification Number (PID) 11e - 11e - 401 - 003 - 000

Owner: KATHY BATTERMAN Address 6901 ALMIRA LANE LINCOLN, NE 68516

A. Wastewater Piping

1. Material: SCH 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 77 ft.

B. Septic Tank

1. Material JH 1530 INFILTRATOR
2. Capacity: 1500 GALLON
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well +100 ft.
   Pressure line +50 ft
   Property Line +50 ft.
   Foundation 77 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 22 ft. EAST

D. Drainfield/Absorption Field

☒ Trench

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: E2 FLOW N203
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 80 ft. 80 ft. 80 ft.
4. Drainfield size: 1080 sq.ft. 1050 Req'd
5. Distance to:
   Well +100 ft.
   Pressure line +50 ft.
   Property line +50 ft.
   Depth of Groundwater +12

PH

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

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

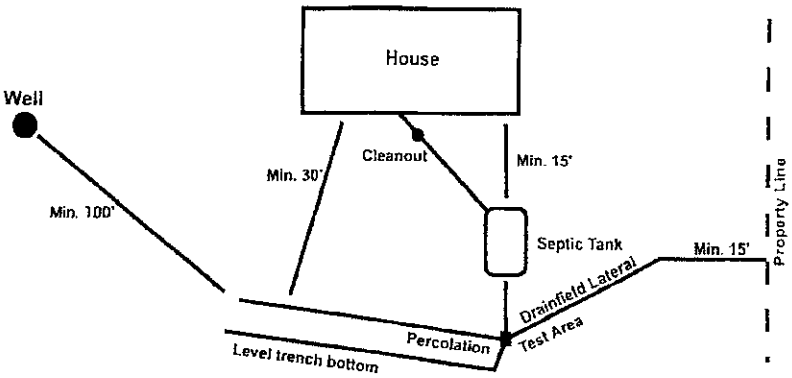
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date: 1/16/2020

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

Indicate North
w/ Arrow Here:

Onsite Wastewater System Design (Example)



*Note-If Lagoon, show all applicable dimensions

N
W E
S

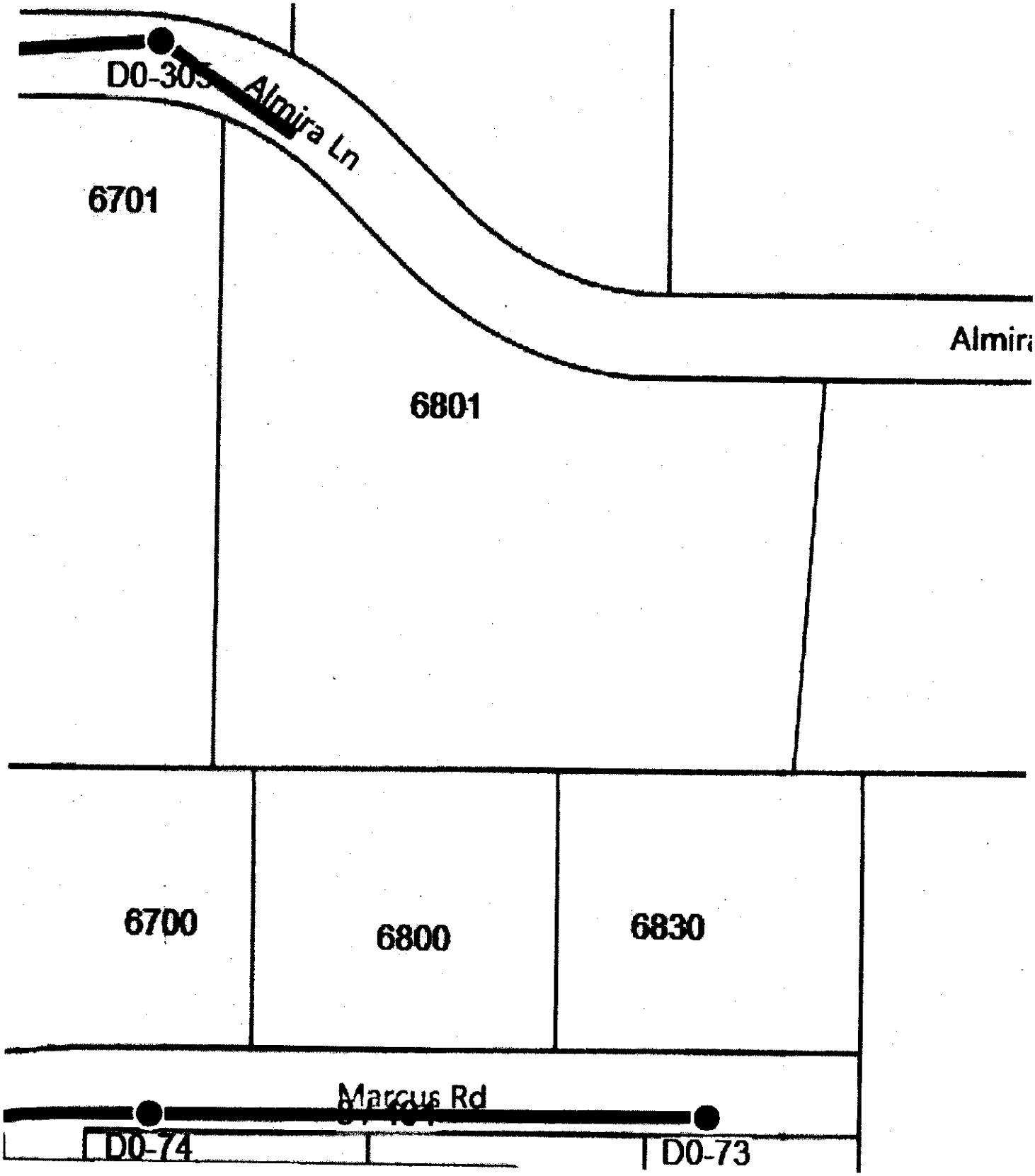
WELL
HOUSE
13FT
64FT
22FT
1500 GAL SEPTIC
80' EAST FLOW
80' EAST FLOW
80' EAST FLOW

Nate C. Hartman

From: Brian A. Kramer
Sent: Thursday, October 31, 2019 10:16 AM
To: Nate C. Hartman
Cc: Chris M. Schroeder
Subject: RE: 6901 Almira Ln

Nate,

There is not currently sanitary sewer availability to 6901, see screen shot below.



From: Nate C. Hartman <nhartman@lincoln.ne.gov>
Sent: Thursday, October 31, 2019 9:05 AM
To: Brian A. Kramer <bakramer@lincoln.ne.gov>
Cc: Chris M. Schroeder <cschroeder@lincoln.ne.gov>
Subject: FW: 6901 Almira Ln

Brian:

Could you verify the availability (or lack thereof) of City Sewer for this property. They are anticipating taking out an onsite wastewater permit from our department in the event that sewer isn't available.

Please advise...

Thanks!

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
3131 'O' Street, Lincoln, NE 68510
O: 402-441-8643 F: 402-441-3890

From: Jason Kubik [mailto:southwicksewer@yahoo.com]
Sent: Wednesday, October 30, 2019 8:51 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: 6901 Almira Ln

Nate

Received a call today to replace a septic system at 6901 Almira LN. I am meeting with the homeowner Friday morning (Boyd Batterman). Was just checking to see if there will be any permit hang ups due to the in town location.

Jason and Jaime Kubik

Southwick Liquid Waste
Office: 402-475-2462
www.southwickliquidwaste.com