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

A

Permit Number HS001950

New Construction

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 4343 N 178th St (no rural route) City Lincoln, NE Zip 68527

Legal Description NW (1/4) 12 (1/4 Section) 10N (Township) 8E (Range) Native Grass Addition (Subdivison) 1 (Block) 4 (Lot)

PID 23-12-102-004-000

B. Owner

Name Kyle Haeffner Signature [signature]

Address 7641 Ali Dr City/State/Zip Lincoln, NE 68507

Home Phone 402-499-2736 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 3.04

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
Comments
Date rec'd
Date frwd
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 1-29-20 Amount Paid $430.00
Received By JAO Cash/Check No. 9618

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

Form A Updated: 1/13

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

PiL-2312102004000

Please Print or Type

Onsite System Location Native Grass Estates, Lot 4, Blk 1, WICN

Address _____ City _____ NE, Zip _____

Owner Kyle Haeffner (no rural route) Address _____

Date of Tests 10-Oct 2018 to 11 Oct 2018 Weather: Precipitation .43 Temperature 47°

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		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	36	10-10	10-00	10-11	10-00	10-11	10-00	6	10-11	10-30	30	1/2	60
2	"	"	"	"	"	"	"	6	"	"	"	1/2	60
3	"	"	"	"	"	"	"	6	"	"	"	1/2	60
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 432 1082
Address 4810 W. Claire Ave.
Lincoln NE, 68523
Soil type (NRCS Maps/Other) 7207
Groundwater Depth Over 10'

Sum of Percolation Rates: 180
Average of Rates: 60
Rate Used for Calculation: 60

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
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-6022

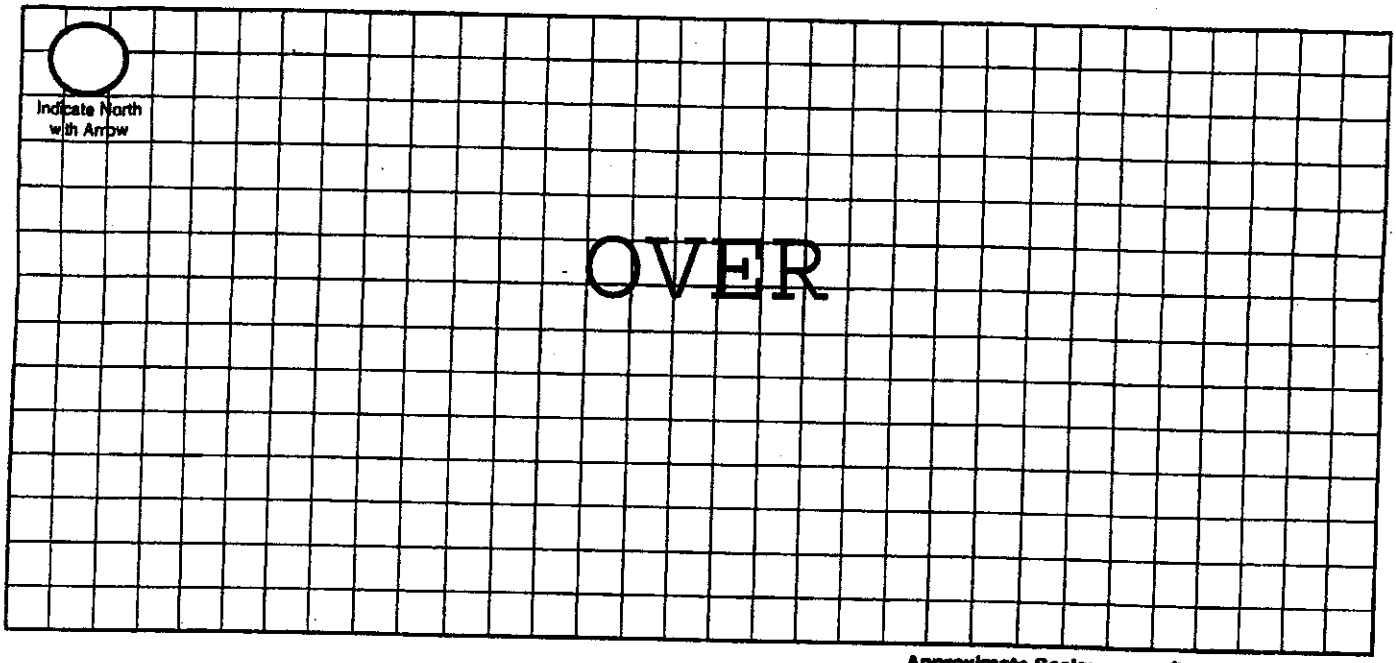
C

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) 4343 N 178th St City Lincoln NE, Zip 68527

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 Aksarben SCL Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____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 ☐	☐

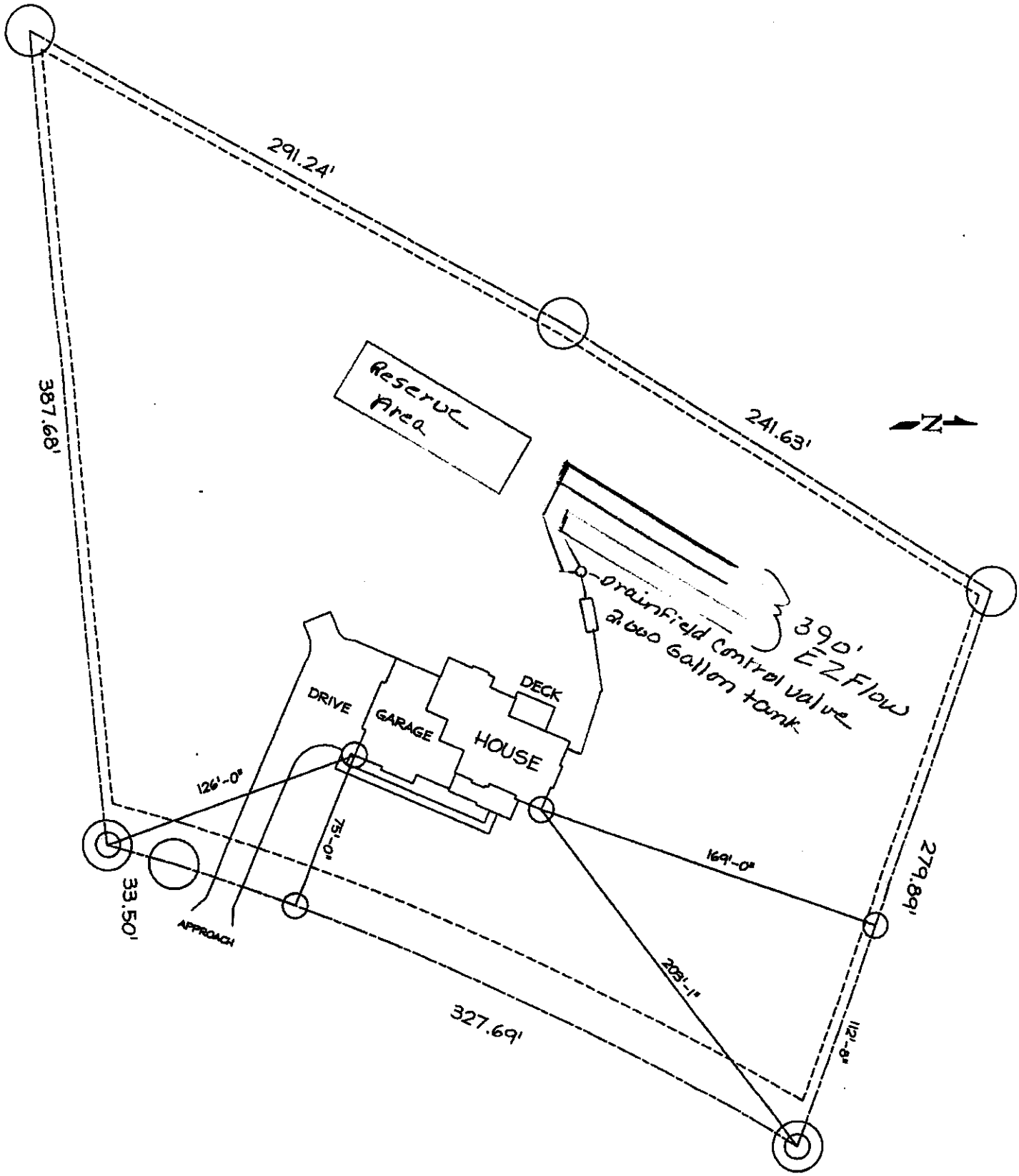
F. Required Signatures

Homebuilder/Contractor _____ Date 1/28/2020

Installer _____ Date 1/28/2020

Onsite Form C 12-08

4343 N 178th St, Lincoln, NE 68527 **Customer Initials:** KA



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. HS001950

System Type: Standard

Situs: No Site Address Specified

Issued: 1/29/2020

Expires: 1/29/2021

Description: NATIVE GRASS ADDITION, BLOCK 1, Lot 4

Owner: HAEFFNER, KYLE L & CHRISTINE N
7641 ALI DR
LINCOLN, NE 68507

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 INC
13800 NW 70TH ST
LINCOLN, 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 HS001950

New Construction

Onsite Wastewater Treatment System
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A. Onsite System Location

Address 4343 N 178th St (no rural route) City Lincoln, NE Zip 68527

Legal Description NW 12 10N 8E Native Grass Addition 1 4
(1/4 1/4 Section Township Range Subdivison Addition Block Lot)

PID 23-12-102-004-000

B. Owner

Name Kyle Haeffner Signature [signature]

Address 7641 Ali Dr City/State/Zip Lincoln, NE 68507

Home Phone 402-499-2736 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

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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 9/18/20 DL
Comments
Date rec'd 1/29/20
Date frwd 1/29/20
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 Jerry Mrkvicka
Date 9/22/20

7207

Business Office Use Only
Date Received 1-29-20 Amount Paid $430.00
Received By JAO Cash/Check No. 9618

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

Form A Updated: 1/13

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

Exhibit 5

Permit Number: HS001950

Onsite Wastewater Treatment System

Inspection Sheet

05

Date 9/22/20

Legal Description Native Grass ¼ ¼ Section/Township/Range Blk 6 Lot 4

Onsite System Location

Address (no rural route) 4343 N 178th 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 1,755 Sq. Ft. Tank Size 2,000 gals

Total length of laterals ~~400~~ 390' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe) E-Z 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 Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial Date 9/18/20

Follow-Up Date

Follow-Up Date

Installation Final Written Approval
By Doug Meyer
Date 9/22/20

Field Note Drawing (See Reverse Side):

Updated 4/15

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: HS001950

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 = 23-12-102-004-000

Address or Legal Description or Parcel Identification Number (PID) 4343 N 178th St, Lincoln, NE 68527

Owner: Kyle Haeffner Address 7641 Ali Dr, Lincoln, NE 68507

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 12 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 24-30 in.
4. Distance to:
   Well 100 ft.+
   Pressure line N/A ft
   Property Line 50 ft.+
   Foundation 12 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 5 ft. W

(Drainfield Control Valve)

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: 4
3. Length of each lateral (linear): ft. 100 ft. 100 ft. 100 ft. 90
4. Drainfield size: 1,755 sq. ft.
5. Distance to:
   Well 100 ft.+
   Pressure line N/A ft.
   Property line 50 ft.+
   Depth of Groundwater >7'

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

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

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: Kevin L. Jakubek Date: 9/18/20

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

9/18/20

