HS001964

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):** 28221 S 96th Firth

   Legal Description of Property: Township: T7 Range: R7E Section: S 35

   Block _____ Lot 130 SubDivsion _____ Add: _____

   ***Parcel ID** 14-35-200-027-000 (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:** Add New latural field

5. **Current Type of Lateral-** Chambers **Current Linear Ft. Of Lateral -** 300

   Current Tank Gallonage- 1250

6. Print Name Kevin Lewis Address 4810 W Claire Ave Phone: 402 310 9160

Applicant Signature: _____

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: 03/12/20 Amount $230.00 Check No. CC8412 Initials JAD

Revised 4/8/13

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. HS001964

System Type: Standard

Situs: No Site Address Specified

Issued: 3/13/2020

Expires: 3/13/2021

Description: S35, T7, R7, 6th Principal Meridian, LOT 130 NE

Owner: MOSEMAN, DANIEL D & BARBARA JO
28221 S 96 ST
FIRTH, NE 68358

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

KEVIN LEWIS
4810 W CLAIRE AVE
LINCOLN, NE

HS001964

SCANNED

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):** 28221 S 96th Firth

   Legal Description of Property: Township: 17 Range: R7 Section: S 35

   Block _____ Lot 130 SubDivsion _____ Add: _____

   ***Parcel ID** 14-35-200-027-000 (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:** Add New lateral field

5. **Current Type of Lateral-** Chambers **Current Linear Ft. Of Lateral -** 300

   Current Tank Gallonage- 1250

6. Print Name Kevin Lewis Address 4810 w claire Ave Phone: 402 310 9160

Applicant Signature: _____

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 3/13/20 REVIEW: ☒ Approved ☐ Disapproved By: _____

Comments (if any): _____

Site visits
Date 03/30/20 By DS.
Date ___/___/___ By _____

Installation final written approval
Date 04/01/20 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: 03/12/20 Amount $230.00 Check No. CC8412 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

Exhibit 5

Permit Number: H500 1964

Onsite Wastewater Treatment System

Inspection Sheet

Date 04/01/20 Legal Description ¼ ¼ 35/7/7 Lot 170

Onsite System Location

Address (no rural route) 28221 South 96th 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 1,080 Sq. Ft. Tank Size 1,250 gals

Total length of laterals 240' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E2 flow

No. of Absorption Laterals 2 Width 4.5 Feet No. of Drop Boxes Distribution Box

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 NA

Lateral #1 Lateral #3

Lateral #2 Lateral #4

Comments:

Inspections prior to Final Approval
Initial DK Date 9/30/20

Follow-Up Date

Follow-Up Date

Installation Final Written Approval
By Doug Kruse

Date 4/1/20

Field Note Drawing (See Reverse Side):

Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

002979

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

Permit # 03380268701

Issued 08/13/03
Expires 02/13/04
Revenue Code 3157

Establishment

DANIEL D MOSEMAN
T7N R7E SEC 35 QTR NE
LOT 102
28221 S 96 ST-FIRTH

FEES: $200.00

Permittee

DANIEL D MOSEMAN
21810 S 96 ST
HOLLAND NE 68372

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

AUG 1 2 2003

A

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

Permit Number: 033802687O1

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 28221 South 96th Street (no rural route) City Firth NE, Zip 68358

Legal Description 5.67 AC in south part of Lot 102 NE 35-7-7 Lancaster County
(1/4 | 1/4 | Section | Township | Range | Subdivision | Addition | Block | Lot)

Geographical Location (if known): Longitude _____ Latitude _____

☒ Check if system mail address is not the same as the owner's address

B. Owner

Name Daniel Moseman Signature Daniel D. Moseman

Address 21810 South 96th Street City/State/Zip Holland NE 68372

☒ Check if owner designed system Home Phone 402 792 3216 Work Phone Cell 310-4406

C. Contractor

Name Owner Company Name _____

Address _____ City/State/Zip _____

☐ Check if contractor designed system Work Phone _____

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 3 Is there a Whirlpool Bathtub (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. 2832

1. **Health Department** Date rec'd 8/13/03 Date frwd 8/13/03 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd 8-6-03 Date frwd 8-6-03 ACTION ☒ Approved ☐ Disapproved Signature Michael A. Moeller
3. **City or County Engineer** Date rec'd 8-13-03 Date frwd 8-13-03 ACTION ☒ Approved ☐ Disapproved Signature _____

9/9/03 Need Drawing. J. C.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date OCTOBER 3, 2003

Business Office Use Only

Date Rec'd 8-13-03

Amt Paid 200.00

Rec'd By TW Cash/Check No. 1728

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

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

B

Permit Number: 033802687

Sewage Disposal System

Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 28221 South 96th Street (no rural route) City Firth NE, Zip 68358

Owner Daniel Moseman Addresss 21810 South 96th Street, Holland NE

Soil Type (SCS): Wymore Silty Clay Loam Percolation Rate: 47.33 min./inch

Date of Tests 07/19 to 07/20 Weather: Precipitation None Temperature 93°F

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	26	07/19	800 PM	07/19	200 PM	07/20	1:00 PM	20 3/4	07/20	1:30 PM	30	3/4	40 min/in
2	29	07/19	805	07/19	205 PM	07/20	1:05 PM	24 1/2	07/20	1:35 PM	30	3/4	40 min/in
3	29 1/8	07/19	810	07/19	210 PM	07/20	1:10 PM	23 5/8	07/20	1:40 PM	30	5/8	48 min/in
4	30 3/8	07/19	815	07/19	215 PM	07/20	1:15 PM	25	07/20	1:45 PM	30	5/8	48 min/in
5	27 1/4	07/19	820	07/19	220 PM	07/20	1:20 PM	26 1/4	07/20	1:50 PM	30	1/2	60 min/in
6	28 1/2	07/19	825	07/19	225 PM	07/20	1:25 PM	27 0	07/20	1:55 PM	30	5/8	48 min/in

Sum of Percolation Rates: 284

Average of Rates: 47.33

Rate Used for Calculation: minutes / drop in inches

Person Conducting Percolation Tests

Name: Daniel Moseman

Phone: 792-3216

Address 21810 South 96th Street
Holland NE 68372

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

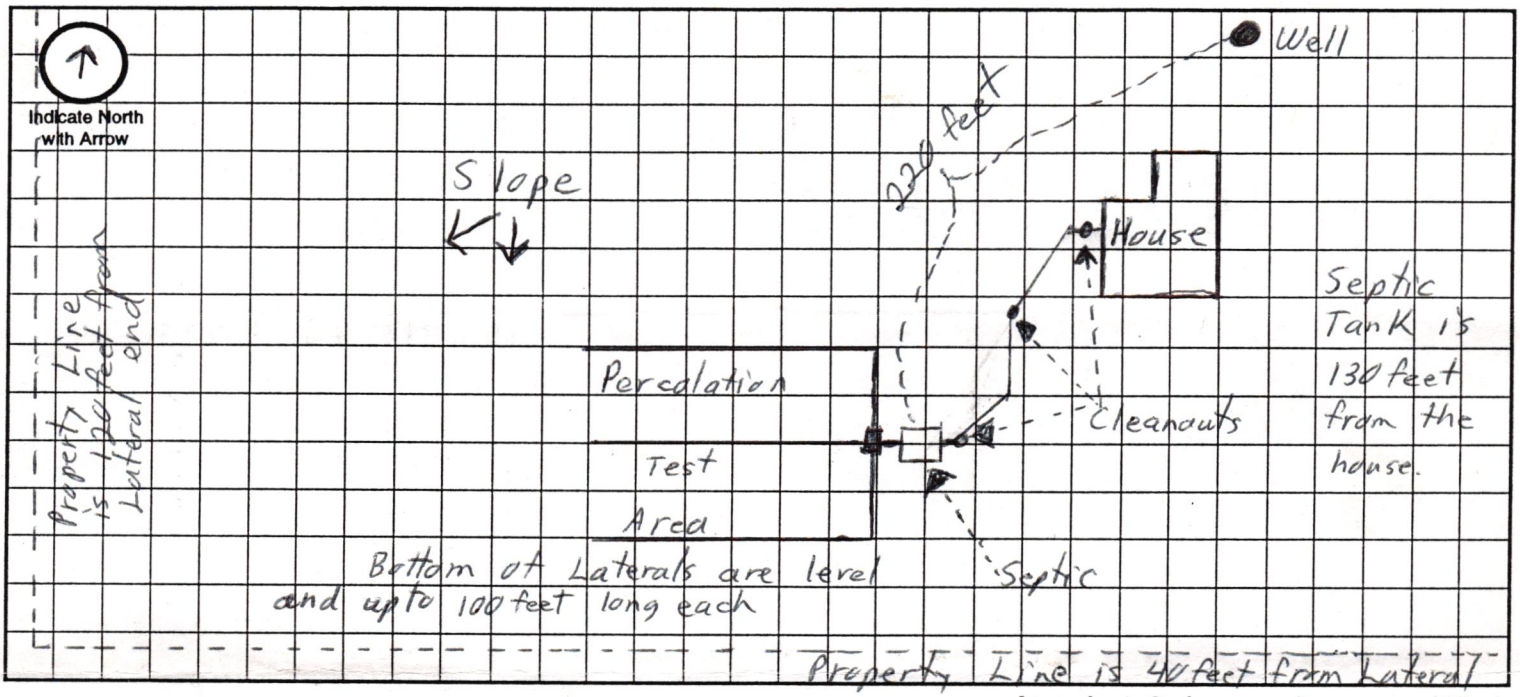
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 033802687

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 28221 South 96th ST. City Firth NE, Zip 68358

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 47.33 (min. per inch) Soil Type: Wymore Silty Clay Loam Land Slope: 3 %

Type of Absorption System: ☐ Trench ☐ Bed ☒ Other CHAMBER

Total Square Feet of Field Required: 990 sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☒ Other Lateral Material: CHAMBER

Capacity of Septic Tank 1250 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 248 ft. Number of Trenches _____ Trench Width 48"

D. 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 ☐	☐

E. Required Signatures

Home Building Contractor Daniel D. Mezeren Date 4 August 03

Installer Daniel D. Mezeren Date 4 August 03

FORM 23-102 10-96

OCT 0 2 2003

D

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

Permit Number: 033802687O1

Sewage Disposal System

As Built Plans & Specifications

Date 29 Sept 2003

System Location (Indicate correct number and street)

Address 28221 South 96th ST (no rural route) City Firth NE, Zip 68358

A. Building Sewer

1. Material: Plastic Sewer Pipe
   Diameter: 4 inch in.
2. Distance above basement floor: NA in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: 96 ft.
4. Number of clean-outs: 3
5. Distances to: well or suction line 107 ft.
   stream NA ft.
   pressure line 22 ft.
   property line 72 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1250 gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 12 in.
   Over outlet, diameter 12 in.
   Riser: ☒ above ☒ below grade 01 in.
5. Inlet: ☒ baffle ☐ tee
6. Outlet: ☒ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 12 in.
8. Distances to: Well or suction line 238 ft.
   Stream NA ft.
   Pressure line 153 ft.
   Property line 70 ft.

C. Distribution Box

1. Material: Concrete
   Number available outlets: 4
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: 10 feet ft.

D. Absorption Field

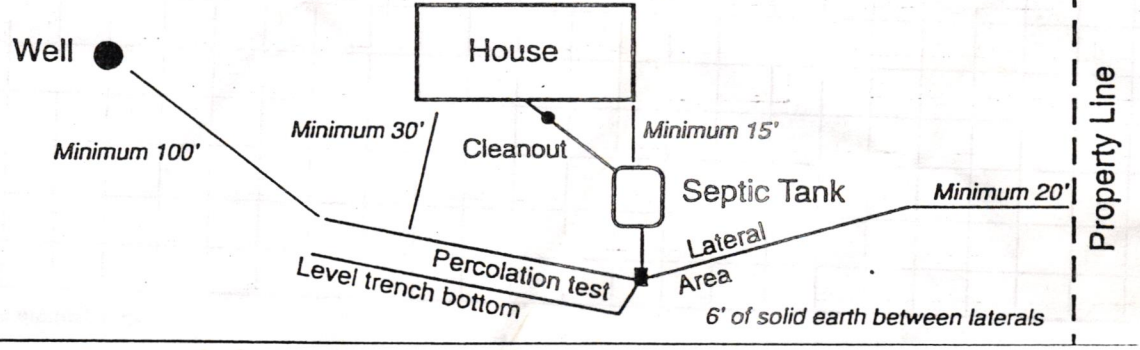
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: NA
   or perforated pipe: NA
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☒ other Equalizer 24 Chambers
2. Lateral lines: Number 3
   Length of each line: 100 ft. 100 ft.
   100 ft. ft., ft.
3. Trench dimensions: Width 3 ft.
   Slope level in/100 ft.
   Average depth 30 in
4. Filter material: Soil
   Depth of material 30 in.
5. Distances to: Well or suction line 248 ft.
   Stream NA ft.
   Pressure line 143 ft.
   Property line 58 ft.

Complete "As Built" drawing on back of this form.

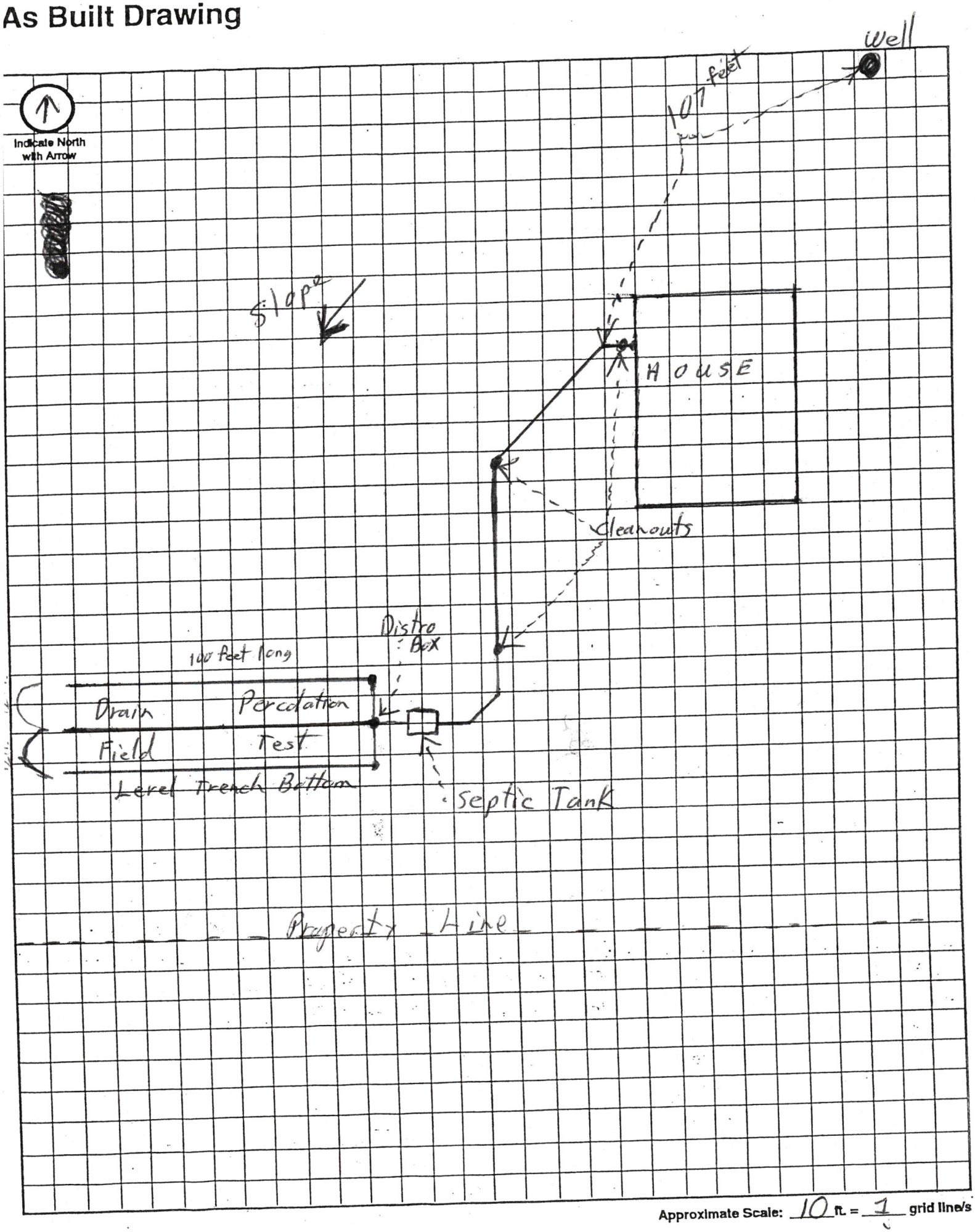
Indicate North with Arrow

Individual Sewage System Design (Example)



FORM 23-103 10-96

As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☐ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 28221 South 96th Street

Parcel ID 14-35-200-027-000 (i.e. 99-99-999-999-999)

Twp 7 North Range 7 East Section 35 1/4 ___ 1/4 ___ Block ___ Lot 102 Addition "Tract C, Subdivision of Lot 102 I.T."

Directions to Property From intersection of Firth Rd and 96th St. Go South ¼ mile to top of hill. Turn right into driveway and then immediately left. See Gray sided house.

Location of Well North of house Tap Location: Inside ☒ Outside ☐

Location of Sewage System South west of House Year Installed 2003

Site Hazards (dogs, etc.) Small Cocker Spaniel Dog

	NAME	ADDRESS	PHONE
Present Owner: (Land and well)	Daniel & JoAnn Moseman	28221 South 96th St. Firth NE 68358	Home 402 791 2511 Cell - 310-4489 work - 402 472-9455
Tenant/Buyer:	Daniel & JoAnn Moseman	28221 South 96th St Firth NE 68358	
Return to:	Daniel & JoAnn Moseman	28221 South 96th St Firth NE 68358	402 791 2511 402 472-1990 (Fax)

Signature of Applicant Daniel Moseman Address 28221 South 96th St. Firth NE 68358 Date 03/09/04

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 3/10/04 Amount $200.00 Check No. 2060 Initials MS

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 3/10/04

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ ___ /ml
Nitrate	☒ 4.0 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: ___

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

Approved by Jerrold C. Hood R.E.H.S. Date 3/11/04

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00