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

A

Permit Number #5001976

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

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

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 12501 N 98th St City Waverly, NE Zip 68517
(no rural route)

Legal Description S11, T11, R7, 6th Prin Lot 53 SE
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 18-11-400-002-000 *Approx. Address (If to be determined)

B. Owner

Name Waylon Timmerman Signature

Address 12501 N 98th St. City/State/Zip Waverly NE 68517.

Home Phone 402-326-4810 Work Phone

C. Certified Installer

Name: Scott Mueller Signature

Address 1345 N 26th Rd City/State/Zip Syracuse NE 68446

Work Phone 402-432-2946

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 2 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres
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

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 3-26-20 Amount Paid $430.00
Received By Cash/Check No. CC030

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

Form A Updated: 4/16

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. HS001976

System Type: Lagoon

Situs: No Site Address Specified

Issued: 3/31/2020

Expires: 3/31/2021

Description: S11, T11, R7, 6th Principal Meridian, LOT 53 SE

Owner: TIMMERMAN, WAYLON L
12501 N 98 ST
LINCOLN, NE 68517

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

DON JOHNSON HOMES
LINCOLN, NE

SCANNED

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

A

Permit Number #5001976

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

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

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 12501 N 98th St (no rural route) City Waverly NE Zip 68517

Legal Description SW, T11, R7, 6th Prm Lot 53 SE

1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 18-11-400-002-000 *Approx. Address (If to be determined)

B. Owner

Name Waylon Timmerman Signature

Address 12501 N 98th St. City/State/Zip Waverly NE 68517.

Home Phone 402-326-4810 Work Phone

C. Certified Installer

Name: Tom Mueller Signature

Address 1345 N 26th Rd City/State/Zip Syracuse, NE 68446

Work Phone 402-432-2946

D. Engineer

☐ Check and complete if engineer designed system

Designer Name Firm P.E. License Number:

Work Phone

E. This system will serve a

☐ Residential Dwelling Number of Bedrooms 2 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres

Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify

Type of Wastewater ☐ Domestic ☐ Non-Domestic Design flow in gallons per day

DO NOT WRITE BELOW THIS LINE

Approval Process

1. Health Department

Site visits 12/22/20 DF Date rec'd 3/31/20 Date frwd 3/31/20

ACTION ☒ Approved ☐ Disapproved

Signature

Comments

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 Doug Thiele

Date 12/23/20

Business Office Use Only

Date Received 3-26-20 Amount Paid $430.00

Received By JAO Cash/Check No CC030

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

Form A Updated: 4/15

Existing property - Demoing new house

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

Exhibit 5

Permit Number: HS001976

Onsite Wastewater Treatment System

Inspection Sheet

Date 12/23/20 Legal Description ____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 12501 N 98th 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 1,500 gals

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

No. of Absorption Laterals 3 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 ____ NA

Lateral #1 ____ Lateral #3 ____

Lateral #2 ____ Lateral #4 ____

Comments:

Field Note Drawing (See Reverse Side):

Inspections prior to Final Approval
Initial DS Date 12/23/20

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By Doug Svoboda

Date 12/23/20

Updated 4/15

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 12501 N 98th (no rural route) City Lincoln NE, Zip

Owner Don Johnson Homes Address

Date of Tests to Weather: Precipitation Temperature

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start		Water Level Drop	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	36	12-5	13:00	12-6	8:00	12-6	8:00	6	12-6	8:30	30	3/4	45
2								6				3/4	45
3								6				1/2	60
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Scott Mueller (402) 430-2946

Phone: 1345 N 96th Rd

Address Syracuse NE 68446

Soil type (NRCS Maps/Other)

Groundwater Depth 12+

Sum of Percolation Rates: 150

Average of Rates: 50

Rate Used for Calculation: 50-60 mpi

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date