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

A

Permit Number HS001902

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* 6020 Little Salt Rd (no rural route) City Davey, NE, NE Zip 68017

Legal Description 4 12 7 6th Principal Meridian, Lot 3 SW
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 1904300002000 *Approx. Address (If to be determined)

B. Owner

Name Craig W, Megan E. Niemeyer Signature

Address 1431 Torrey's Drive City/State/Zip Lincoln, NE 68521

Home Phone 402-310-6214 Work Phone

C. Certified Installer

Name: Huss Well Company Inc. Signature

Address PO Box 246 City/State/Zip Mead, Ne 68041

Work Phone 402-624-3895

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 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

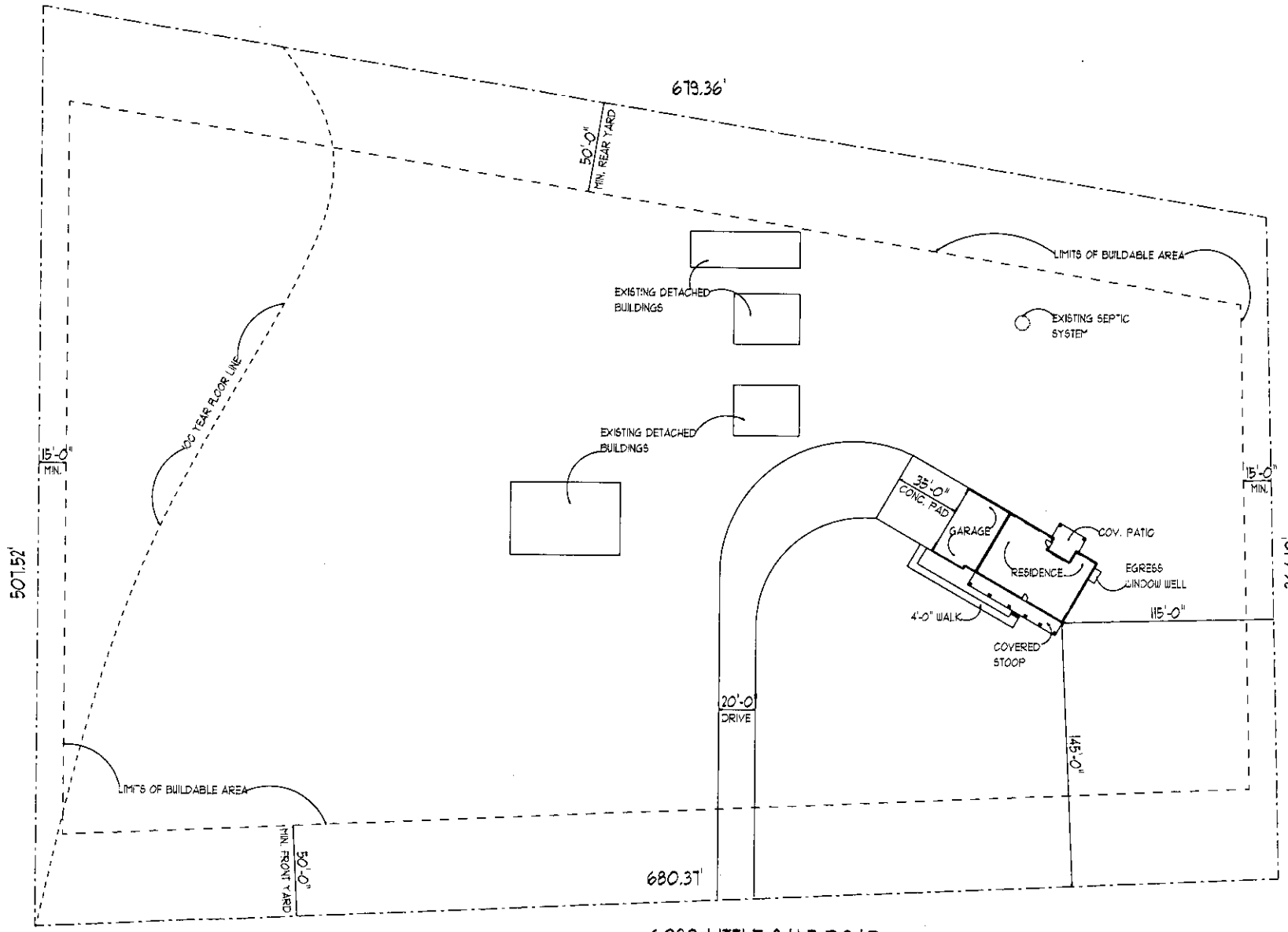
3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 4-08-20 Amount Paid $480.00
Received By JAO Cash/Check No. [illegible]

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

Form A Updated: 4/15



6020 LITTLE SALT ROAD

NOTES:
1: BUILDING MAY BE LOCATED ANYWHERE WITHIN BUILDABLE AREA OF LOT.
2: EXISTING HOUSE HAS BEEN REMOVED FROM LOT.

PLOT PLAN SCALE: 1" = 80'-0"

LEGAL:
S4, T12, R7,
6TH PRINCIPAL
MERIDIAN, LOT 3 SW

new VENTURES RESIDENTIAL DESIGN
The Trade Center
6031 South 58th Street, Suite C
Lincoln, NE 68516
Phone: (402) 420-0088
Fax: (402) 420-0089
www.newventures.com

NV00720
NIEMEYER
RESIDENCE

Builder: Visionary Custom Homes - Melanie Regac

Nebraska DEQ

Onsite Wastewater Treatment System
Soil Percolation Test Data Sheet

Owner Name Craig Niemeyer Phone 402-310-1214

Mail Address 1431 Torreys Drive Lincoln NE 68521
Property: 10020 Little Salt Rd
City State Zip

Location (Attach a sketch of the property showing test hole locations)

__ __ ____ ____ ____ Lancaster
¼ ¼ Section Township Range County

Lot # _____ Subdivision _____

Soil Type (Check one)

Sand ____ Silt ____ Clay ____ Sandy Clay ____ Loamy Sand ____ Silty Clay ____

Silty Clay Loam X Sandy Loam ____ Silt Loam ____

Dates of Test

Start Date 3/16 to End Date 3/17, 2020

Weather Conditions

Precipitation WET Avg. Temp 40 °F

Percolation Test Measurements and Data

Hole No.	Hole Depth (in.)	Pre-saturation Period: Start Date (Mo./Day)	Pre-saturation Period: Start Time (Hr./Min)	Pre-saturation Period: End Date (Mo./Day)	Pre-saturation Period: End Time (Hr./Min)	Percolation Readings (last period): Start Date (Mo./Day)	Percolation Readings (last period): Start Time (Hr./Min)	Percolation Readings (last period): Start Water Level (inch)	Percolation Readings (last period): End Time (Hr./Min)	Percolation Readings (last period): End Water Level Drop (inch)	Results: Elapsed Time (minutes)	Results: Drop in Water Level (inches)	Results: Percolation Rate (in ÷ 1) (Minutes per inch)
1	30"	3/16	2:00 pm	3/17	2:00 pm	3/17	2:00 pm	15	30 min	14.5	30 min	.50	60
2								16		15.4		.60	50
3								16		15.4		.60	50
4								16		15.5		.50	60

Tests must be performed by a certified professional, a professional engineer or a registered environmental health specialist.

Signature _____

Certificate or License # C-1981

Address 1597 CR 10

City Mead St NE Zip 68041

Phone 402-624-3895

Sum of Percolation Rates = 220

Avg. of Percolation Rates* = 55
(sum of rates ÷ number of tests)
(minutes per inch)

* If rates vary by more than 20 min/in., do not average. Use slowest rate measured for sizing soil absorption area.

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. HS001982

System Type: Standard

Situs: No Site Address Specified

Issued: 4/13/2020

Expires: 4/13/2021

Description: S4, T12, R7, 6th Principal Meridian, LOT 3 SW

Owner: NIEMEYER, MEGAN E & CRAIG W
1431 TORREYS DR
LINCOLN, NE 68521

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

VISIONARY CUSTOM HOMES
LINCOLN, NE

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

SCANNED

A

Permit Number HS001902

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

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

PID 1904300002000 *Approx. Address (If to be determined)

B. Owner

Name Craig W, Megan E. Niemeyer Signature

Address 1431 Torrey's Drive City/State/Zip Lincoln, NE 68521

Home Phone 402-310-6214 Work Phone

C. Certified Installer

Name: Huls Well Company Inc Signature E-13353

Address PO Box 246 City/State/Zip Mead, Ne 68041

Work Phone 402-624-3895

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 4 as per Lincoln 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 4/10/20

Date frwd 4/10/20

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 9/3/20

Business Office Use Only

Date Received 4-08-20 Amount Paid $430.00

Received By JAO Cash/Check No 42763

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

Form A Updated: 4/15

Inspected VH

See D-sheet

Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Monday, August 31, 2020 4:13 PM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 6020 Little Salt D-Sheet
Attachments: 6020 Little Salt Rd D-Sheet.pdf

[CAUTION] This email comes from a sender outside your organization.

6020 Little Salt D-Sheet is attached (don't have permit receipt/number).

Thanks,

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-890-3870 (Mobile)
jakoubek63@windstream.net

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:

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 = 19-04-300-002-000

Address or Legal Description or Parcel Identification Number (PID) 6020 Little Salt Rd, Ceresco, NE 68017

Owner: Craig & Megan Niemeyer Address 1431 Torrey's Dr, Lincoln, NE 68521

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and ~~septic tank~~ Lagoon: 376 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank ~~below~~ unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property Line _____ ft.
   Foundation _____ ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: ____ ft. ____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☒ Perforated Pipe ☐ Chamber ☐ Gravelless ☐ Other
   Material and inside width of chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral: ft. _____ ft. _____ ft. _____ ft. _____
4. Drainfield size: _____
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

Fence Return 1.5 ft to Lateral Pipe 19 ft

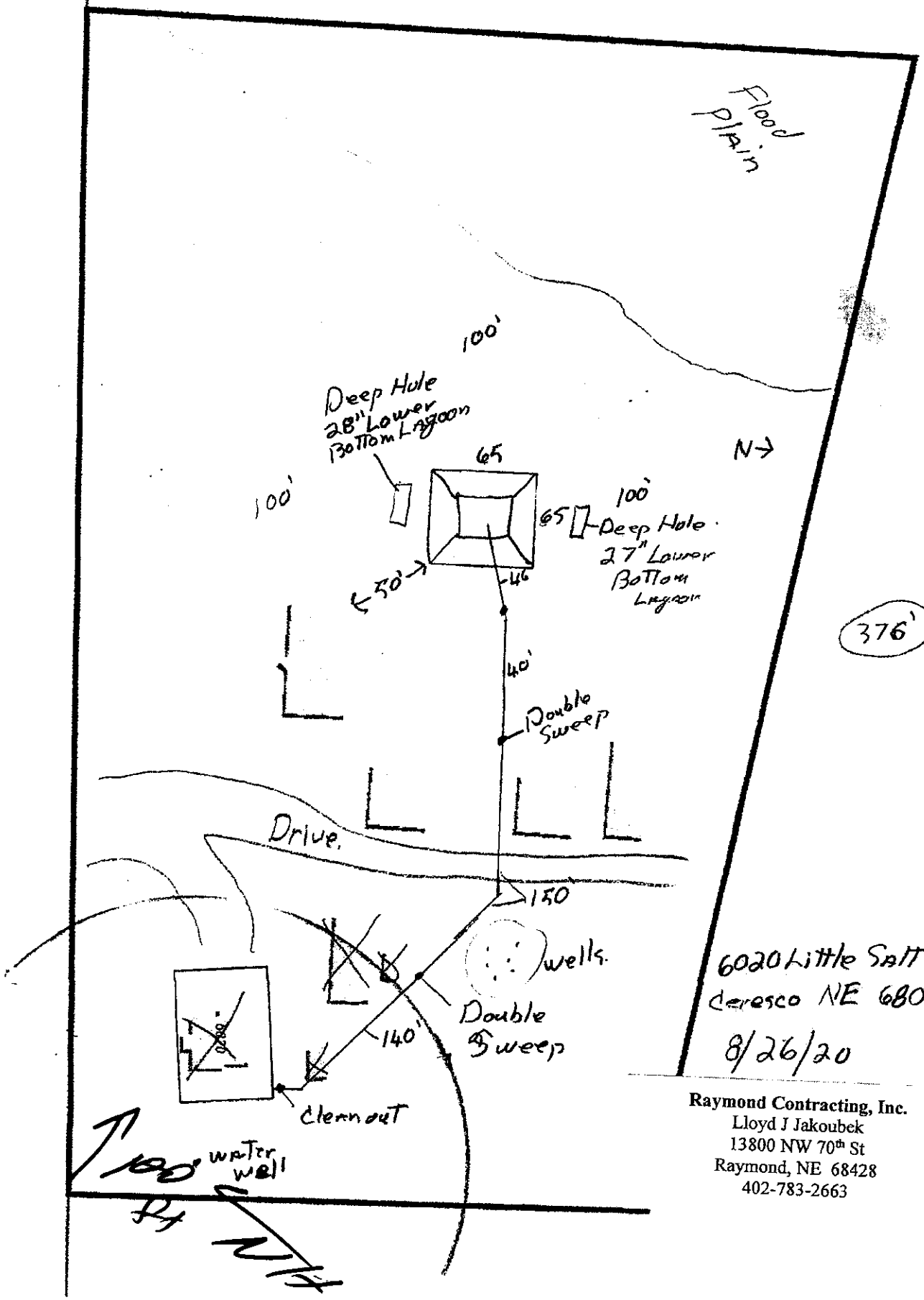
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No (Partially)

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: Kevin L. Jamison Date: 8/26/20

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

I want to...
Street
Tools
City of Lincoln\Lancaster County, NE GIS | City of Lincoln\Lancaster County, NE GIS