REC'D APR 20 2020

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

A

Permit Number 1500 1984

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 6533 Countryview Rd (no rural route) City Lincoln, NE Zip 68516

Legal Description: SE (1/4) 28 (Section) 9N (Township) 7E (Range) Countrylane Addition (Subdivison) 4 (Block) 1 (Lot)

PID 16-28-404-010-000

B. Owner

Name Jeffrey A Dousharm Signature Jeff Dousharm

Address 6533 Countryview Rd City/State/Zip Lincoln, NE 68516

Home Phone 402-613-8812 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature Lloyd Jakoubek

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 Date rec'd ACTION ☐ Approved ☐ Disapproved
Date frwd Signature
Comments

2. Supt. Bldg. Insp. or Village Clerk
Comments Date rec'd ACTION ☐ Approved ☐ Disapproved
Date frwd Signature

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

Form A Updated: 1/13

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

B

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 6533 Countryview Rd (no rural route) City Lincoln, NE, Zip 68516

Owner Scott Rasmussen Address 3500 S 76th St, Lincoln, NE 68506

Soil Type (SCS): Wymore Silty Clay Loam Percolation Rate: 60 min./inch

Date of Tests 4-17 to 4-18 Weather: Precipitation 0 Temperature Ya+50's

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	36	4/17	6:30	4/18	11:00	4/18	2:10	22¾	4/18	2:40	30	¾	40
2			PM		AM		P	28½		P		½	60
3								24				⅝	48
4								27½				½	60
5								28½				⅝	48
6								28				¾	40

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 475-2462
Address 17201 So 72
Hickman, NE 68372

Sum of Percolation Rates: 296
Average of Rates: 49
Rate Used for Calculation: 60

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks Soils poor. Marginal perc rate

Signature of Reviewing Official Paul D. Zimmer Date 10-31-97

FORM 23-101 10-96

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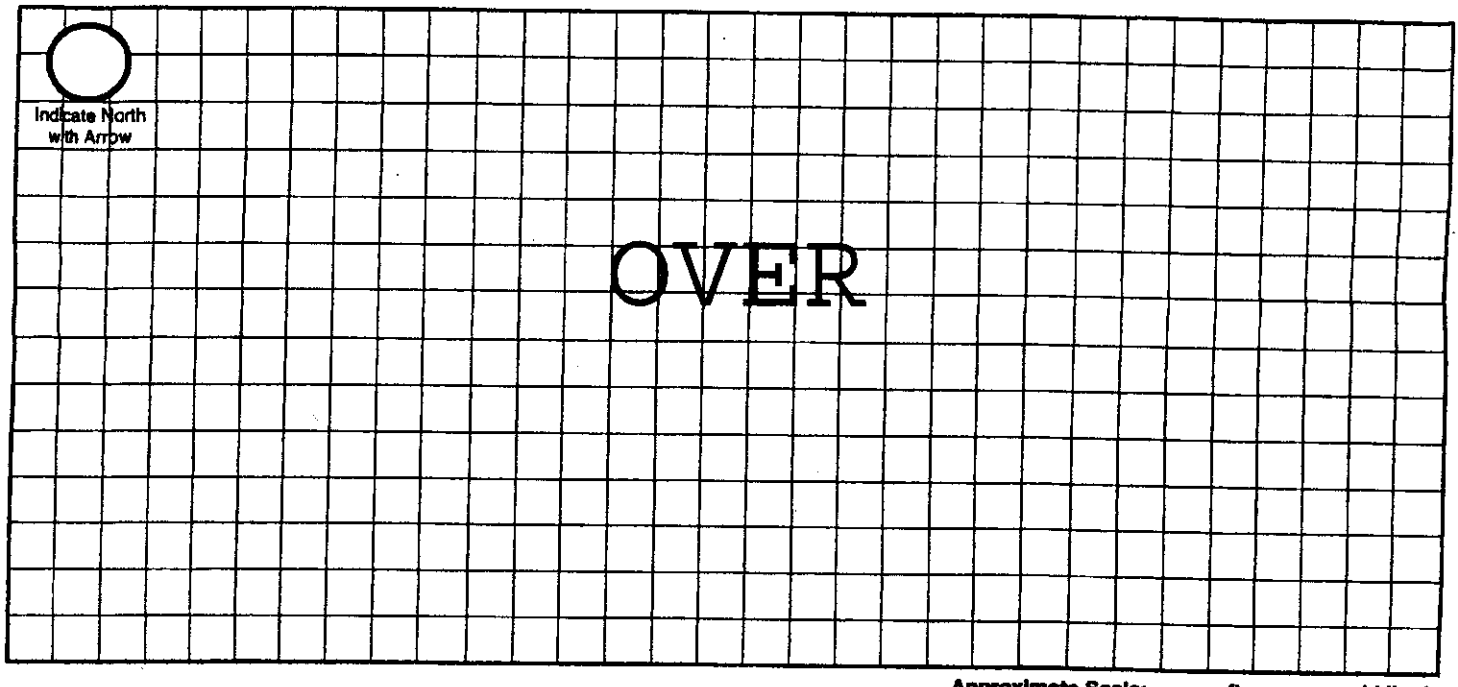
C

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) 6533 Countryview Rd City Lincoln NE, Zip 68516

B. Proposed Septic Tank/s

Septic Tank Cap. New 1000 / 1000 existing 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 Wymore/Yutan SCL Land Slope_____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,755 sq.ft.

Total length of laterals 390' Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 4 New Width 40" No. of drop boxes 1 Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distribution lines per bed_____

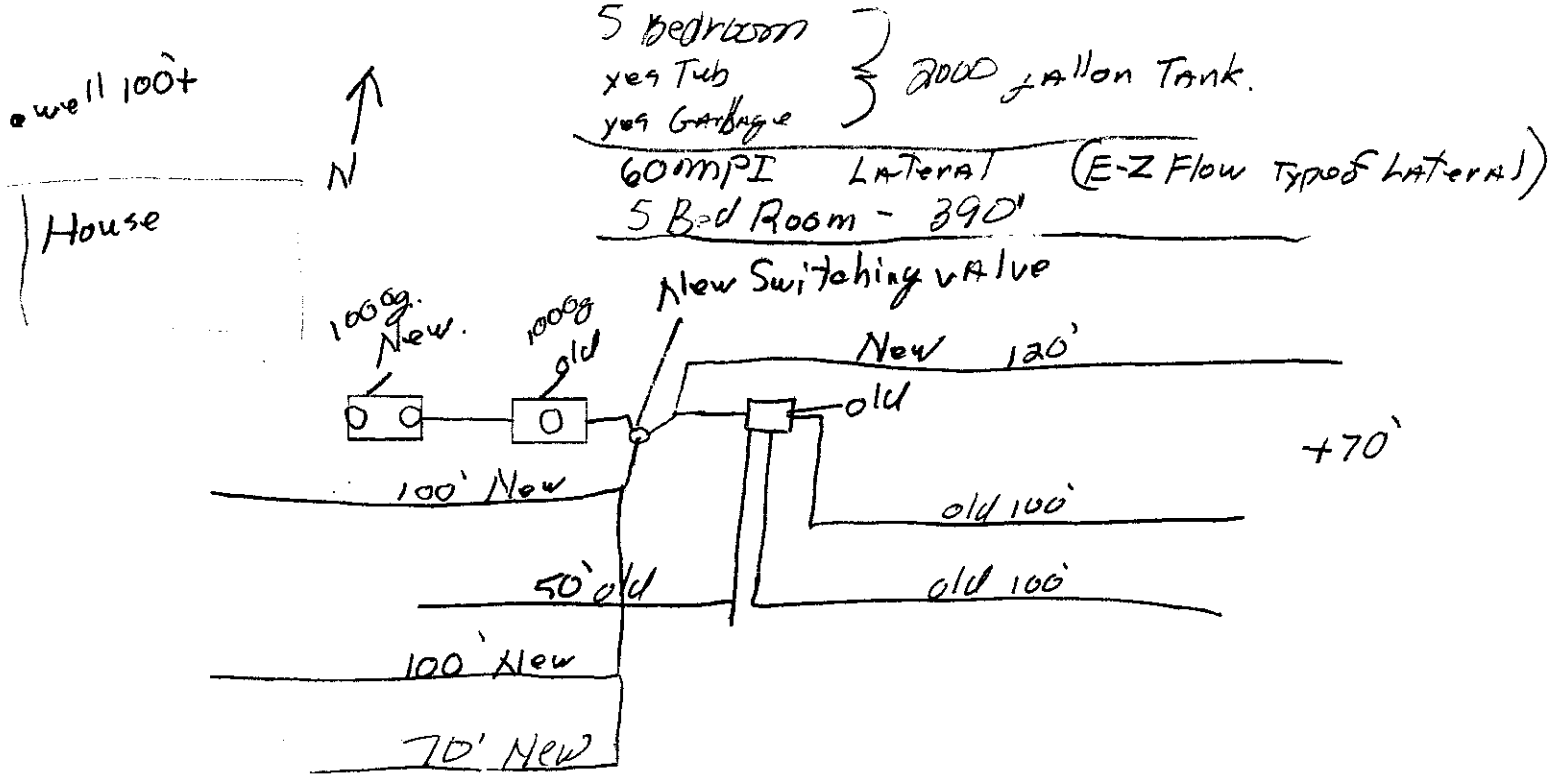
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

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

Home Building Contractor Existing Home Date _____

Installer [signature] Date 4-16-20


5 Bedroom
yes Tub
yes Garbage
2000 gallon Tank.
60 mpi Lateral (E-Z Flow Type of Lateral)
5 Bed Room - 390'
well 100+
N
House
1000g. New.
1000g old
New Switching valve
New 120'
old
+70'
100' New
old 100'
50' old
old 100'
100' New
70' New

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. HS001984

System Type: Standard

Situs: No Site Address Specified

Issued: 4/21/2020

Expires: 4/21/2021

Description: COUNTRYLANE ADDITION, BLOCK 4, Lot 1

Owner: DOUSHARM, JEFFREY A
6533 COUNTRYVIEW RD
LINCOLN, NE 68516

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
RAYMOND, NE 68428