H S001988

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):** 21200 S 120th St

   Legal Description of Property: Township: 7 Range: 8 Section: 5

   Block _____ Lot _____ SubDivsion _____ Add: _____

   ***Parcel ID** 20 - 05 - 100 - 003 - 000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: _____)
   Number of bedrooms 5 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:** Replacing collapsing 1500 gallon septic tank with (2) 1000 gallon tanks. Adding 210' of EZ flow lateral = 945 to 288' of chamber = 950 for a total of 1895 sq ft

5. **Current Type of Lateral-** gravelless chamber **Current Linear Ft. Of Lateral -** 288

   Current Tank Gallonage- 1500

6. Print Name Jason Kubik Address 105 Lower St Phone: 475-2462

   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: 4/27/20 Amount $230.00 Check No. CC 0214 Initials JAD

Revised 4/8/13

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

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 21200 S 120th ST (no rural route) City HICKMAN NE, Zip 68372

Owner ANDREW ADCOCK Address same

Date of Tests 4/13/2020 to 4/14/2020 Weather: Precipitation 0 Temperature 50

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					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)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	30	4/13	5:15	4/14	8:00	4/14	11:30	6	4/14	12:00	30	5/8	48
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4	30	4/13	5:15	4/14	8:00	4/14	11:30	6	4/14	12:00	30	1	30
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								6					
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Person Conducting Percolation Test

Name: JASON KUBIK
Phone: 402-475-2462
Address 105 LOCUST ST
HICKMAN, NE 68372

Sum of Percolation Rates: 228
Average of Rates: 45.6
Rate Used for Calculation: 59

Soil type (NRCS Maps/Other) 7684, 7231
Groundwater Depth +12

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Janet O'Neal

From: Nate C. Hartman
Sent: Monday, April 27, 2020 10:28 AM
To: Janet O'Neal
Subject: FW: 21200 S 120th ST
Attachments: 21200 S 120th LLCHD Repair permit.pdf; 21200 S 120th ST perc test.pdf

FYI

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
3131 'O' Street, Lincoln, NE 68510
O: 402-441-8643 F: 402-441-3890

From: Jason Kubik [mailto:southwicksewer@yahoo.com]
Sent: Sunday, April 26, 2020 6:42 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>; Doug R. Smith <drsmith@lincoln.ne.gov>
Subject: 21200 S 120th ST

CAUTION: This email comes from a sender outside your organization.

Doug & Nate

We are going to start the repair on the above address on Monday 4/27/20. This is one that was discovered under property transfer, and money is held in escrow for repair. We are going to pump & remove the current collapsing 1500 gallon tank, and replace it with (2) 1000 gallon tanks. We will also be adding 210' of EZ Flow to suffice drain field square footage requirements. 288 ft of plastic chamber at 3 sq ft = 864. 210 ft of EZ Flow at 4.5 sq ft =945 for a combined total of 1809 sq feet. This is a 5 bedroom house with a 59 perc which needs 1750 sq ft minimum. I have attached the repair permit and perc test. Jaime will call payment in to Janet in the morning.

Thank You

Jason and Jaime Kubik

Southwick Liquid Waste
Office: 402-475-2462
www.southwickliquidwaste.com

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

B

Permit Number: HS001988

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DO NOT WRITE BELOW THIS LINE

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

Signature of Reviewing Official Date

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. HS001988

System Type: Standard

Situs: No Site Address Specified

Issued: 4/29/2020

Expires: 4/29/2021

Description: S5, T7, R8, 6th Principal Meridian, LOT 14 NW

Owner: ADCOCK, ANDREW
21200 S 120 ST
PANAMA, NE 68372

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

JASON KUBIK
105 LOCUST ST
HICKMAN, NE 68372

H S001988

SCANNED

Application to Alter or Repair an Onsite Wastewater Treatment System

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Applicant Signature: _____

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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 late April 2020 By D.S
Date ___/___/___ By _____

Installation final written approval
Date 06/01/20 By _____

Return application to:

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Environmental Public Health Division
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Business Office Use Only

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Revised 4/8/13

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3140 N Street • Lincoln NE 68510-1514
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Exhibit 5

Permit Number: HS001988

Onsite Wastewater Treatment System

Inspection Sheet

Date 06/01/20 Legal Description ____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 21200 S. 120th 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 1809 Sq. Ft. Tank Size 2 – 1,000 gals tanks

Total length of laterals 498' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe) ____

~~Existing~~ 288 & 3 Sq. Ft. = 864 Sq. Ft.

No. of Absorption Laterals 5 Width 45 New 240 Ft Row = 945 Sq. Ft. 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 N/A

Lateral #2 ____ Lateral #4 ____

Comments:

Inspections prior to Final Approval
Initial Late Appl Date 05

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By ____
Date 6/1/22

Field Note Drawing (See Reverse Side):

Doug R. Smith

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Sent: Sunday, April 26, 2020 6:42 PM
To: Nate C. Hartman; Doug R. Smith
Subject: 21200 S 120th ST
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Revised 4/8/13

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HICKMAN, NE 68372

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Signature of Reviewing Official Date

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

D

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

Address or Legal Description or Parcel Identification Number (PID) 20-05-100-003-050

Owner: ANDREW ADCOCK Address 21200 S 120TH HICKMAN, NE 68372

A. Wastewater Piping

1. Material: SCH 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 75 ft.

B. Septic Tank

1. Material (2) 1M 1060
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well 110 ft.
   Pressure line +100 ft
   Property Line [redacted] +100
   Foundation 75 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 5 ft. 12

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: EZ FLOW 1203 EXISTING CHAMBER 288 SF
2. Number of Laterals: 6
3. Length of each lateral (linear): ft. 100 ft. 100 ft. 88 ft. 40 60 110
4. Drainfield size: 1809 sq. ft.
5. Distance to:
   Well 110 ft.
   Pressure line +100 ft.
   Property line 5 ft.
   Depth of Groundwater +12

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

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: [signature] Date: MAY 27, 2020

Complete As-Built drawing on the back of this form.

N
W E
S

21200 S. 120th

