REC'D MAY 07 2020

#S001997

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):** 5751 Saltillo Rd

   Legal Description of Property: Township: 8 Range: 7 Section: 4

   Block _____ Lot 29 SubDivsion _____ Add: _____

   ***Parcel ID** ____-____-_____-_____-_____ (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:** Replace laterals Risers & lids on tank

5. **Current Type of Lateral** Easy Flow **Current Linear Ft. Of Lateral -** 360

   Current Tank Gallonage 1500

6. Print Name Scott Hues Address 9800 Bretgan Rd Phone: 402-499-1166

   Applicant Signature: Scott Hues

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
3131 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only
Received: Date: 05/07/20 Amount $230.00 Check No. 2773 Initials JKD

Revised 2/18

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 5751 Saltillo Rd (no rural route) City Lincoln NE, Zip 68516

Owner Terry Back Addresss

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

Date of Tests 4-6-20 to 4-7-20 Weather: Precipitation None Temperature 60°

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	24	4-6	9:00	4-7	9:00	4-7	9:00	6	4-7	1:00	30	3/4	75
2	24	4-6	9:00	4-7	9:00	4-7	9:00	6	4-7	1:00	30	3/4	75
3	24	4-6	9:00	4-7	9:00	4-7	9:00	6	4-7	1:00	30	3/4	75

Sum of Percolation Rates: 225
Average of Rates: 40
Rate Used for Calculation: 40

Person Conducting Percolation Tests

Name: Scott Haes
Phone: 402-499-1166
Address 9800 Breagen Rd
Lincoln, NE 68526

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

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

Address or Legal Description or Parcel Identification Number (PID) 5751 Saltillo Rd

Owner: Terry Bock Address

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 140 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1500
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well NA ft.
   Pressure line 35 ft
   Property Line 50 ft.
   Foundation 140 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 6 ft. N

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless: Easy Flow
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 90 ft. 90 ft. 90 ft. 90
4. Drainfield size: 1620 sq. ft.
5. Distance to:
   Well NA ft.
   Pressure line 45 ft.
   Property line 30 ft.
   Depth of Groundwater 720

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

If Yes, the Certified Professional must sign below for final approval:

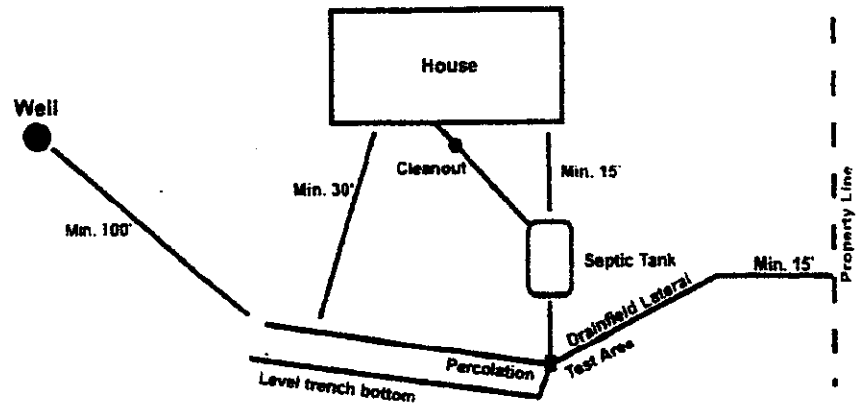
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: _____ Date: _____

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

Onsite Wastewater System Design (Example)

Indicate North
w/ Arrow Here:



*Note-If Lagoon, show all applicable dimensions

House
75
clean out
60
tank
6'
4 60' laterals
drop Box
perk holes
30

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. HS001997

System Type: Standard

Situs: No Site Address Specified

Issued: 5/8/2020

Expires: 5/8/2021

Description: S4, T8, R7, 6th Principal Meridian, LOT 28 NW

Owner: BOCK, TERRYL K & ANGELA R
5751 SALTILLO RD
LINCOLN, NE 68516

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

HAES EXCAVATING INC
9800 BREAGAN RD
LINCOLN, NE 68526

REC'D MAY 07 2020 SCANNED #S001997

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Current Tank Gallonage 1500

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Revised 2/18

* Site pre-approved to cover prior to inspection - DH