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

A

Permit Number HS002007

New Construction

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 4205 Brandon Blvd (no rural route) City Roca NE Zip 68430

Legal Description SW 8 8N 7E Meyer Shire 2
(1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot)

PID 15-08-302-002-000

B. Owner

Name Jared L Muth Signature Jared L Muth

Address 22333 SW 128th St City/State/Zip Crete, NE 68333

Home Phone 402-540-6999 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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 4 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 5.04
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 fwd Signature
Comments

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 5-20-20 Amount Paid $430.00
Received By JBD Cash/Check No. CC 0287

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

Form A Updated: 1/13

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

For Jared Muth

PLEASE PRINT OR TYPE

Onsite System Location

Address 4205 Brandon Blvd (no rural route) City Roca NE, Zip 68430

Owner Adam Shipowick Address 2315 S Canterbury Ln, Lincoln, NE 68512

Date of Tests 4/6/20 to 4/7/20 Weather: Precipitation 0 Temperature 69°

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		Initial	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 Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	68	4/6	10:00a	4/7	11:30a	4/7	3:00p	6	4/7	3:30ap	30	1-1/16	28
2	72	"	"	"	"	"	"	6	"	"	"	11/16	44
3	72	"	"	"	"	"	"	6	"	"	"	7/8	34
4	72	"	"	"	"	"	"	6	"	"	"	13/16	37
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Terri L Jakoubek, Raymond Contracting, Inc.

Phone: 402-783-2663 or 402-890-6009

Address 13800 NW 70th St

Raymond, NE 68428 Cert #1198

Soil type (NRCS Maps/Other) Wymore SCL

Groundwater Depth >15'

Sum of Percolation Rates: 143

Average of Rates: 36

Rate Used for Calculation: 36

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

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

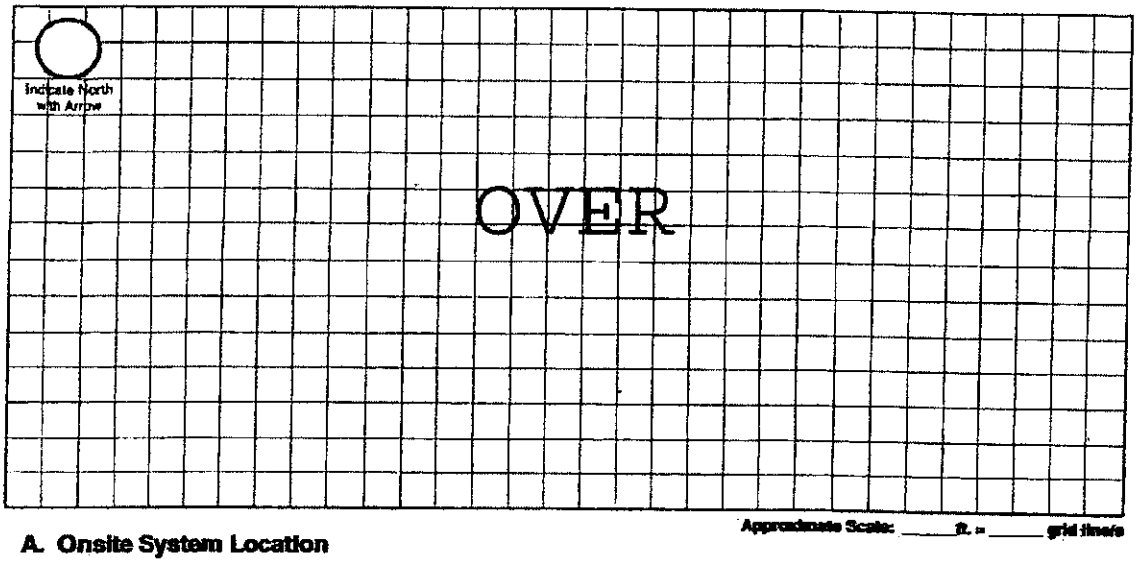
C

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 lines

A. Onsite System Location

Address (no rural route) 4205 Brandon Blvd City Roca NE, Zip 68430

B. Proposed Septic Tank/s

Septic Tank Cap. 2000 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 36 (min/inch = mpi) No. of Bedrooms 4 Soil Type SCL Land Slope _____ %

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1,125 sq.ft.

Total length of laterals 250 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 3 Width 40" No. of drop boxes 1 Distrubition 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 Builder or Contractor _____ Date 5/21/2020

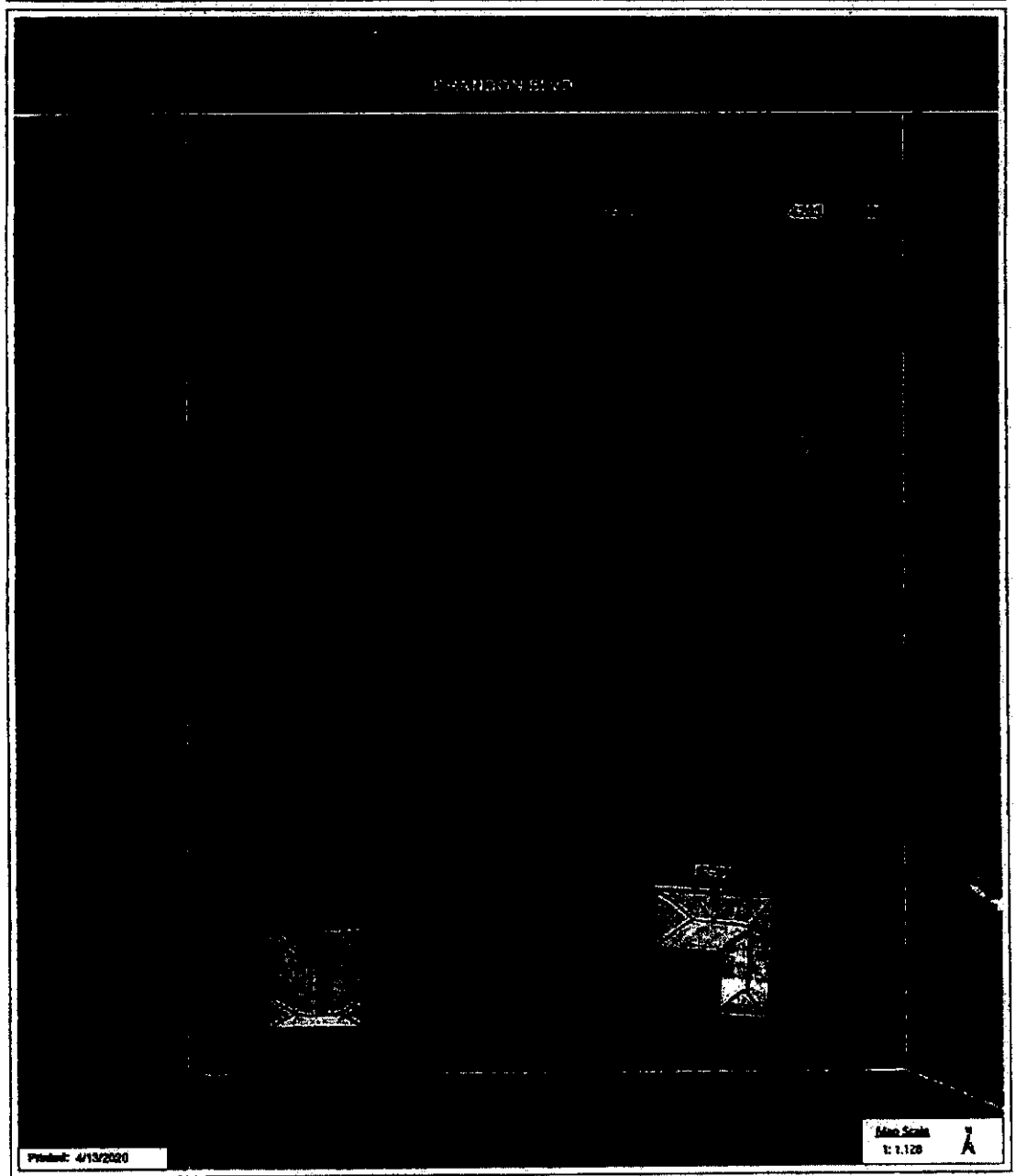
Installer _____ Date _____

Onsite Form C 12-06

Customer Initials _____

GIS Viewer

City of Lincoln\Lancaster County GIS Map



DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

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. HS002007

System Type: Standard

Situs: No Site Address Specified

Issued: 5/27/2020

Expires: 5/27/2021

Description: MEYER SHIRE, Lot 2

Owner: MUTH, JARED L & ODEN-MUTH, LORI E
22333 SW 128 ST
CRETE, NE 68333

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

SCANNED

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

A

Permit Number HS002007

New Construction

Onsite Wastewater Treatment System
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3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

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Legal Description SW 8 8N 7E Meyer Shire 2
(1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot)

PID 15-08-302-002-000

B. Owner

Name Jared L Muth Signature Jared L Muth

Address 22333 SW 128th St City/State/Zip Crete, NE 68333

Home Phone 402-540-6999 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek, Raymond Contracting Inc Signature

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

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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 11/19/20 Date rec'd Date fwd
ACTION ☐ Approved ☐ Disapproved
Signature
Comments

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

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

Installation Final Written Approval
By Joey Muth
Date 11/24/20

Business Office Use Only
Date Received 5-22-20 Amount Paid $430.00
Received By JBD Cash/Check No. CC 0287

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

Form A Updated: 1/13

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

Exhibit 5

Permit Number: HS002007

Onsite Wastewater Treatment System

Inspection Sheet

Date 11/25/20 Legal Description ____ ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 4205 Brandon Blvd. 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 1,125 Sq. Ft. Tank Size 2,000 gals

Total length of laterals 250 Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ Flow

No. of Absorption Laterals 4 Width 4.5 Feet No. of Drop Boxes ____ Distribution Box ____

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:

Inspections prior to Final Approval
Initial ____ Date 12/18/20

Follow-Up ____ Date ____

Follow-Up ____ Date ____

Installation Final Written Approval
By ____

Date 11/24/20

Field Note Drawing (See Reverse Side):

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: HS002007

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 = 15-08-302-002-000

Address or Legal Description or Parcel Identification Number (PID) 4205 Brandon Blvd, Roca, NE 68430

Owner: Jared L Muth Address 22333 SW 128th St, Crete, NE 68333

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 129 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2000g
3. Depth to top of tank, below unfinished grade: 12-24 in.
4. Distance to:
   - Well Not yet installed ft.+
   - Pressure line N/A ft
   - Property Line 100 ft.+
   - Foundation 100 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 4 ft. N

(Drainfield Control Valve)

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other

   Material brand and inside width of Chamberless: EZFlow 1203H Bundles
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 60 ft. 60 ft. 60 ft. 70
4. Drainfield size: 1,125 sq. ft.
5. Distance to:
   - Well Not yet installed ft.+
   - Pressure line N/A ft.
   - Property line 100 ft.+
   - Depth of Groundwater >8'

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

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

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: 11/18/20

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

4 Bed Room yes / No

36 mpI

1'-2' Deep 2000 g Tank concrete 2plastic Risers/Lids.

250' EZ Flow. 1203H Bundle.

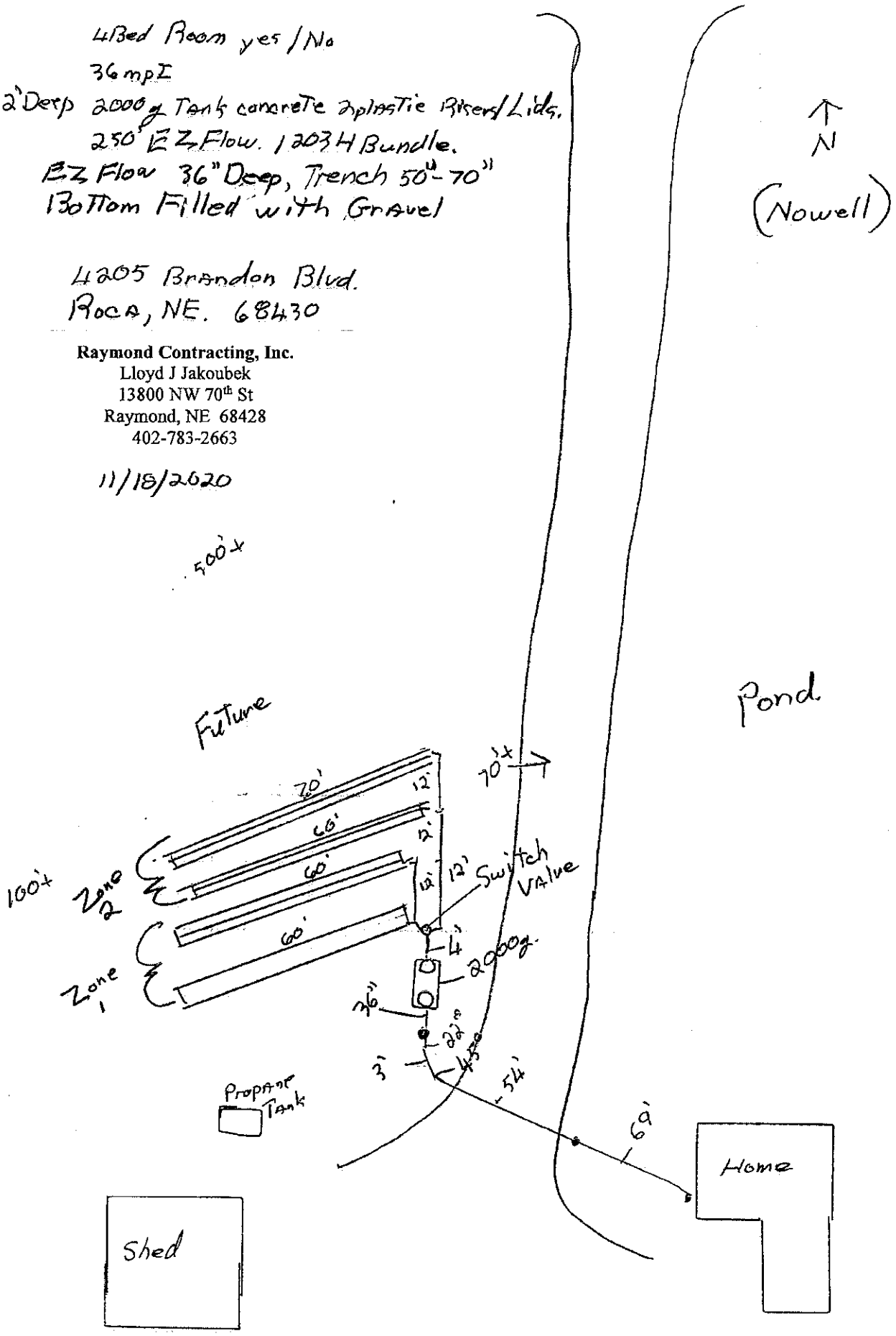
EZ Flow 36" Deep, Trench 50"-70"

Bottom Filled with Gravel

4205 Brandon Blvd.
Roca, NE. 68430

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

11/18/2020



Janet O'Neal

From: Nate C. Hartman
Sent: Wednesday, May 27, 2020 8:53 AM
To: Village of Roca
Cc: Janet O'Neal
Subject: RE: 20-11 Muth

Diane:

A permit application has been received, reviewed, and approved for Meyershire Addition, Lot 2. Permit number HS002007 for reference.

If you have any questions, let me know.

Thanks!

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

SCANNED

From: Village of Roca [mailto:villageofroca@gmail.com]
Sent: Wednesday, May 27, 2020 8:38 AM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: 20-11 Muth

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

Hi Nate,

The one for 4205 Brandon Blvd Meyer Shire Lot 2 is ok to process. Thank you.

Attached is the plat for the new addition coming soon.

It was great to talk to you. Take Care and thank you.

Diane Osterloo
Village of Roca Clerk/Treasurer
Equal Opportunity Provider and Employer
villageofroca@gmail.com
http://villageofroca.com/
402-421-9577