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

A

Permit Number #S002036

Existing Home

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 4001 W Bucks Dr (no rural route) City Lincoln, NE Zip 68523

Legal Description: SE (1/4) SE (1/4) 18 (Section) 9N (Township) 6E (Range) Rolling Meadows (Subdivison) 5 (Addition) 4 (Block) (Lot)

PID 09-18-405-004-000

B. Owner

Name Shawn Miller Signature Shawn Miller

Address 4001 W Bucks Dr City/State/Zip Lincoln, NE 68523

Home Phone 402-499-3423 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 3

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 ACTION ☐ Approved ☐ Disapproved

Site visits Date rec'd Signature

Date frwd

Comments

2. Supt. Bldg. Insp. or Village Clerk ACTION ☐ Approved ☐ Disapproved

Comments Date rec'd Signature

Date frwd

3. City or County Engineer ACTION ☐ Approved ☐ Disapproved

Comments Date rec'd Signature

Date frwd

Installation Final Written Approval

By

Date

Business Office Use Only

Date Received 12-20 Amount Paid $430.00

Received By JRD Cash/Check No CC 5040

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 Rolling Meadows Block 5 Lot 4

System Location (Indicate correct number and street)

Address 4001 W Bucktail (no rural route) City _____ NE, Zip _____

Owner _____ Addresss _____

Soil Type (SCS): SHARPSBURG & WYMORE SILTY CLAY LOAM BOTH IN AREA Percolation Rate: 53 min./inch

Date of Tests 3/1/98 to 3/1/98 Weather: Precipitation SNOW Temperature 34

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	30	3/1	11:30	3/1	4:30	3/1	5:00	6	3/1	5:30	30	1/2	60 MIN/IN
2	"	"	"	"	"	"	"	"	"	"	30	3/4	40 MIN/IN
3	"	"	"	"	"	"	"	"	"	"	30	5/8	48 MIN/IN
4	"	"	"	"	"	"	"	"	"	"	30	1/2	60 MIN/IN
5	"	"	"	"	"	"	"	"	"	"	30	1/2	60 MIN/IN
6	"	"	"	"	"	"	"	"	"	"	30	5/8	48 MIN/IN

Sum of Percolation Rates: _____

Average of Rates: _____

Rate Used for Calculation: 53 MIN/IN

Person Conducting Percolation Tests

Name: Melvin Wagner

Phone: 797-2365

Address 4810 W Claire Ave. Lincoln NE 68523

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official Jerrold C. Wood R.E.H.S Date MARCH 2, 1998

FORM 23-101 10-96

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

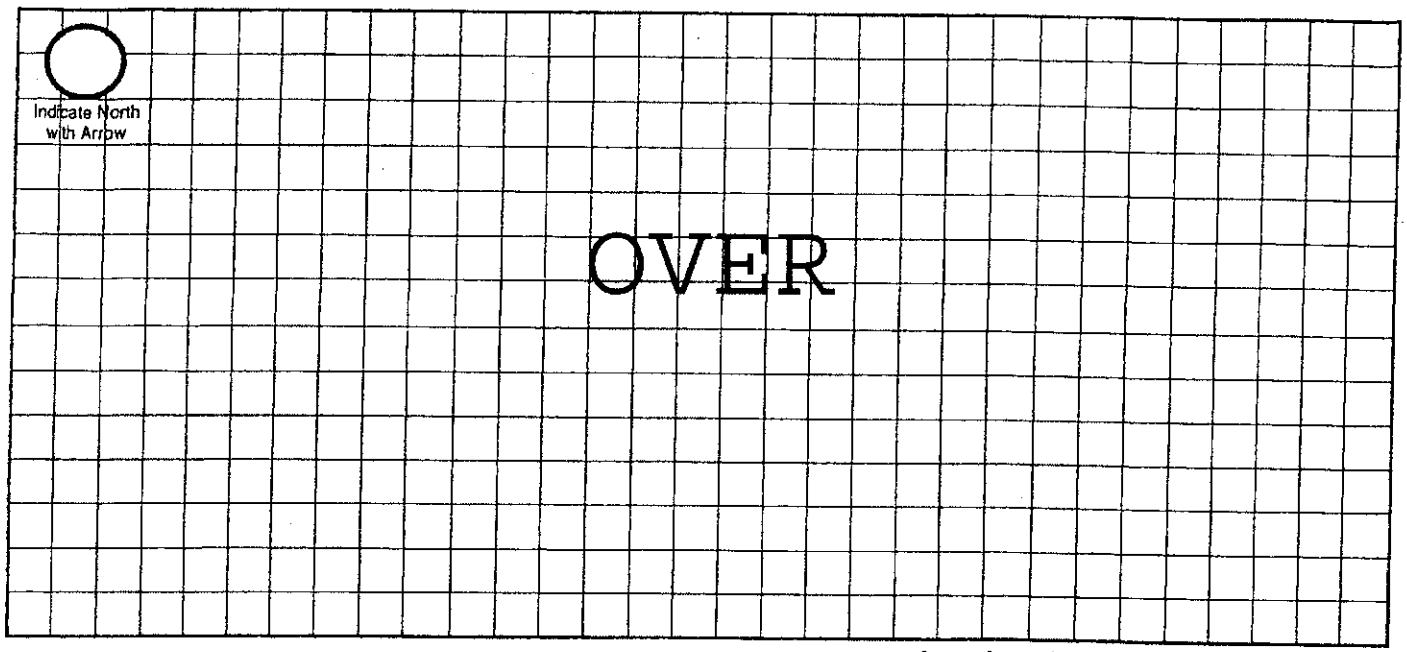
C

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 line/s

A. Onsite System Location

Address (no rural route) 4001 W Bucks Dr City Lincoln NE, Zip 68523

B. Proposed Septic Tank/s (Has an existing 1000g concrete septic tank)

Septic Tank Cap. 1000 New 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 53 (min/inch = mpi) No. of Bedrooms 4 Soil Type Wymore SCL Land Slope _____%

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

Total length of laterals 320 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☒ Other EZFlow 1203H

No. of absorption trenches 3 Width 40" No. of drop boxes 2 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

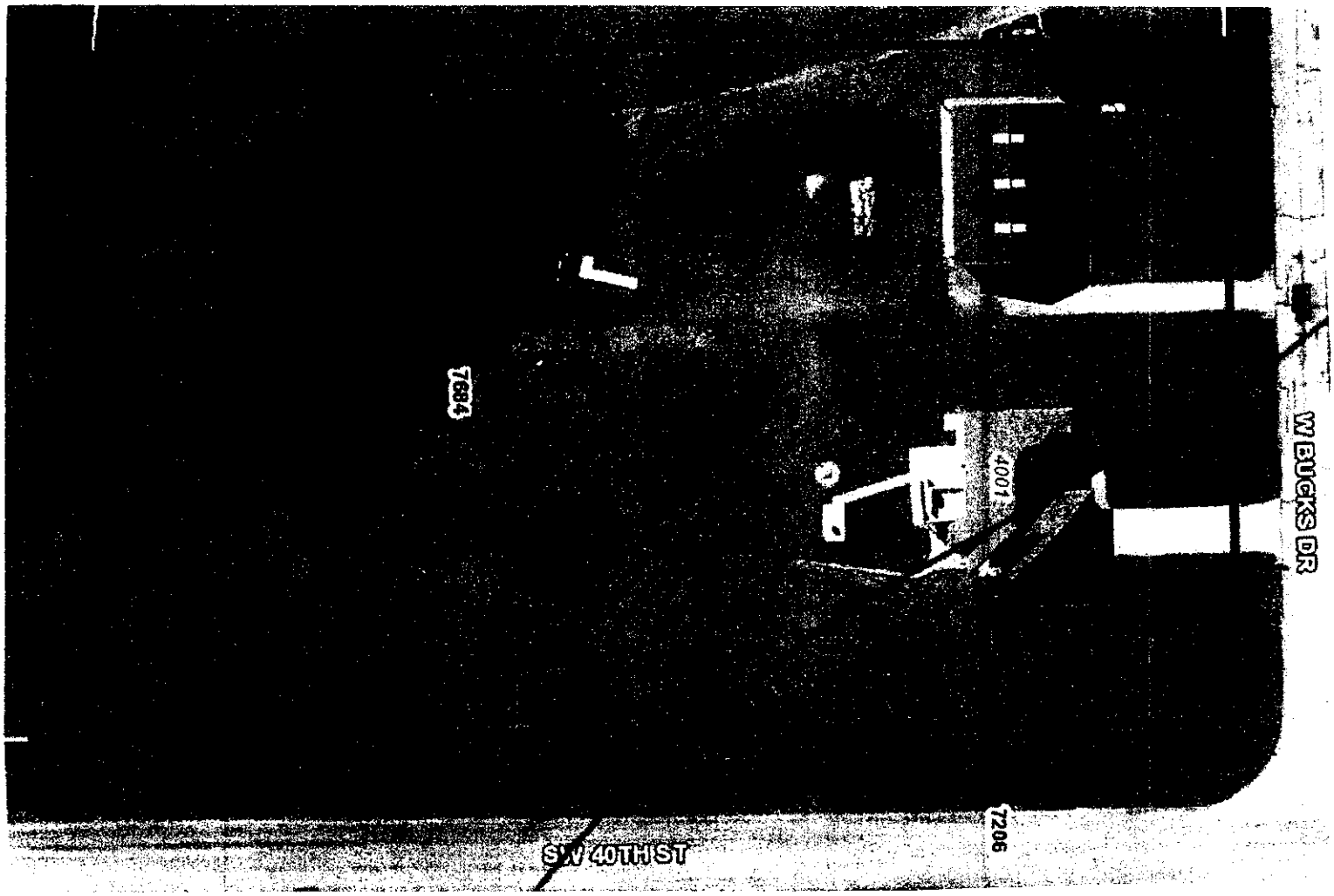
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☒	500 ☒	50 ☒	NA ☒	25 ☒	20 ☒	15 ☒	25 ☒	☒
Field (ft)	100 ☒	500 ☒	50 ☒	4 ☒	30 ☒	20 ☒	30 ☒	40 ☒	☒
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor Existing Home Date _____

Installer Kurt L Johnson Date 6/22/20

4 Bed x eq/x en
53 mpi = 320 EZ Flow.



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. HS002036

System Type: Standard

Situs: No Site Address Specified

Issued: 6/22/2020

Expires: 6/22/2021

Description: ROLLING MEADOWS, BLOCK 5, Lot 4

Owner: MILLER, SHAWN A & ANGELA M
4001 W BUCKS DR
LINCOLN, NE 68523

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 #S002036

Existing Home

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

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Name Shawn Miller Signature Shawn Miller

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Home Phone 402-499-3423 Work Phone

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D. Engineer ☐ Check and complete if engineer designed system P.E. License Number:

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☐ 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. 02-38

1. Health Department

Site visits

Comments

Date rec'd 6/22/20 Date frwd 6/22/20

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 9/15/20

Business Office Use Only

Date Received 6-22-20 Amount Paid $430.00

Received By JRD Cash/Check No. CC 5040

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

D Exhibit 4

Permit Number: HS002036

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 = 09-18-405-004-000

Address or Legal Description or Parcel Identification Number (PID) 4001 W Bucks Dr, Lincoln, NE 68523

Owner: Shawn A Miller Address 4001 W Bucks Dr, Lincoln, NE 68523

A. Wastewater Piping (Existing)

1. Material: Cast Diameter: 4 in.
2. Distance between dwelling and septic tank: 55 ft.

B. Septic Tank

1. Material Concrete (existing & new)
2. Capacity: 1000g existing, 1000g new
3. Depth to top of tank, below unfinished grade: 18 in. (new)
4. Distance to: (New)
   Well 100 ft.+
   Pressure line N/A ft
   Property Line 100 ft.+
   Foundation 50 ft.+

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. SW
(Drainfield Control Valve)

D. Drainfield/Absorption Field (New)

☒ 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. 80 ft. 80 ft. 30 ft. 130
4. Drainfield size: 1,440 sq. ft.
5. Distance to:
   Well 100 ft.+
   Pressure line N/A ft.
   Property line 10 ft.+
   Depth of Groundwater >8'

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

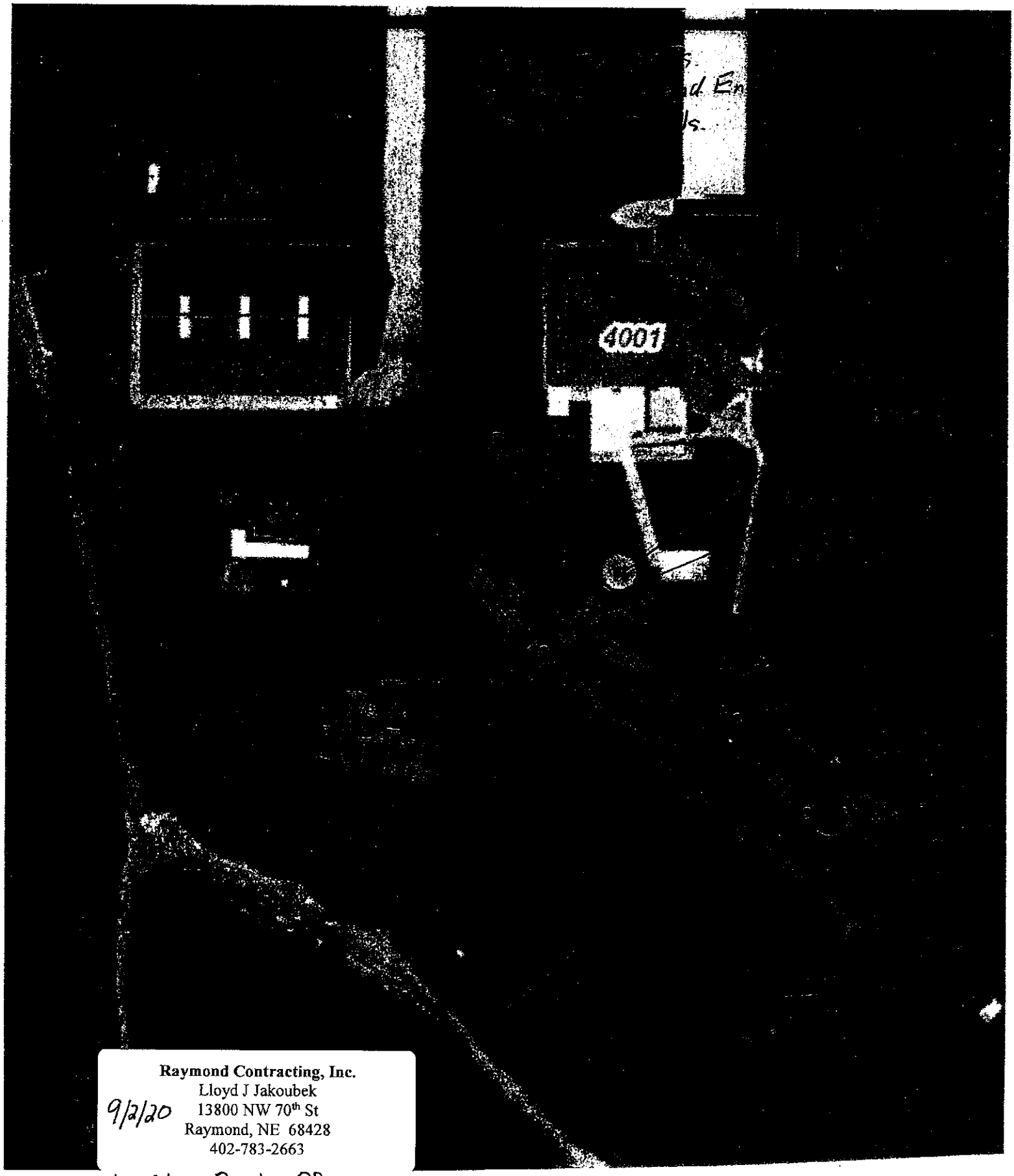
If Yes, the Certified Professional must sign below for final approval:

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 Johnson Date: 9/2/20

Test 2 pits x lines ✓ pit for complete

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

9/2/20

4001 W Bucks DR.
Lincoln NE 68523

Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Thursday, September 10, 2020 3:11 PM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 4001 W Bucks Dr D-Sheet
Attachments: 4001 W Bucks Dr D-Sheet.pdf

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

HS002036 is attached.

Thanks,

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

SCANNED

C

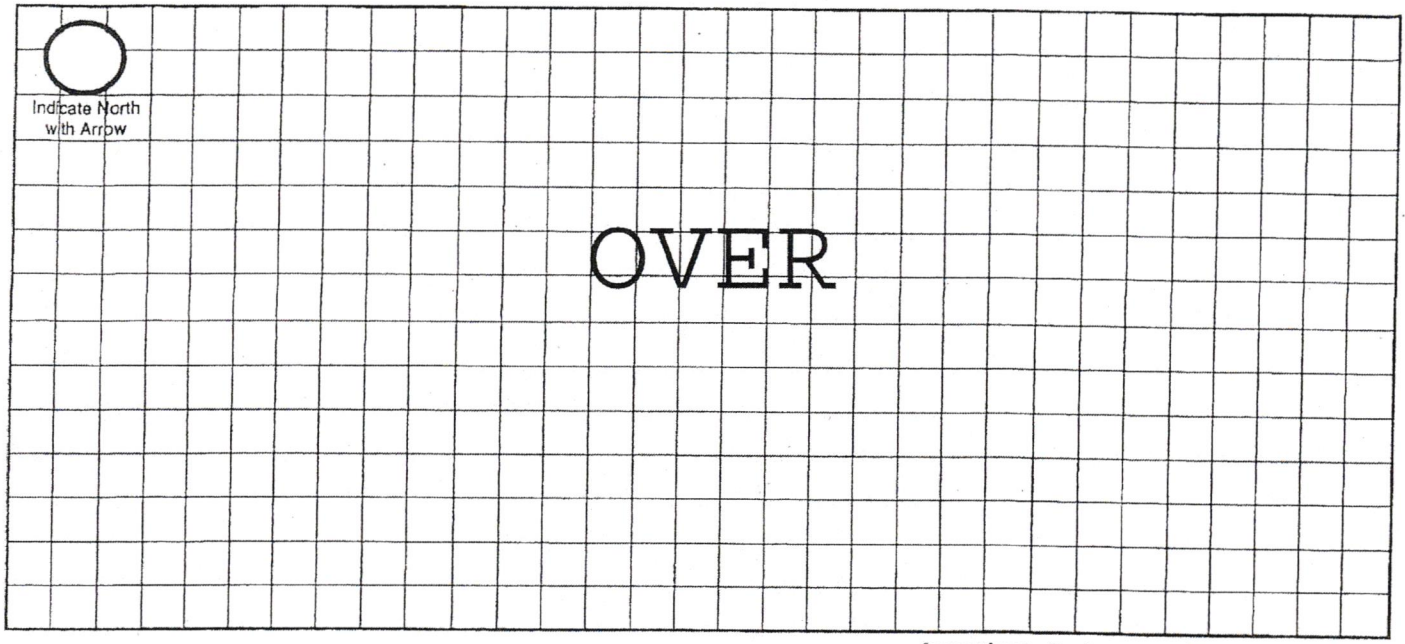
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street • Lincoln, NE 68510-1514
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Permit Number:

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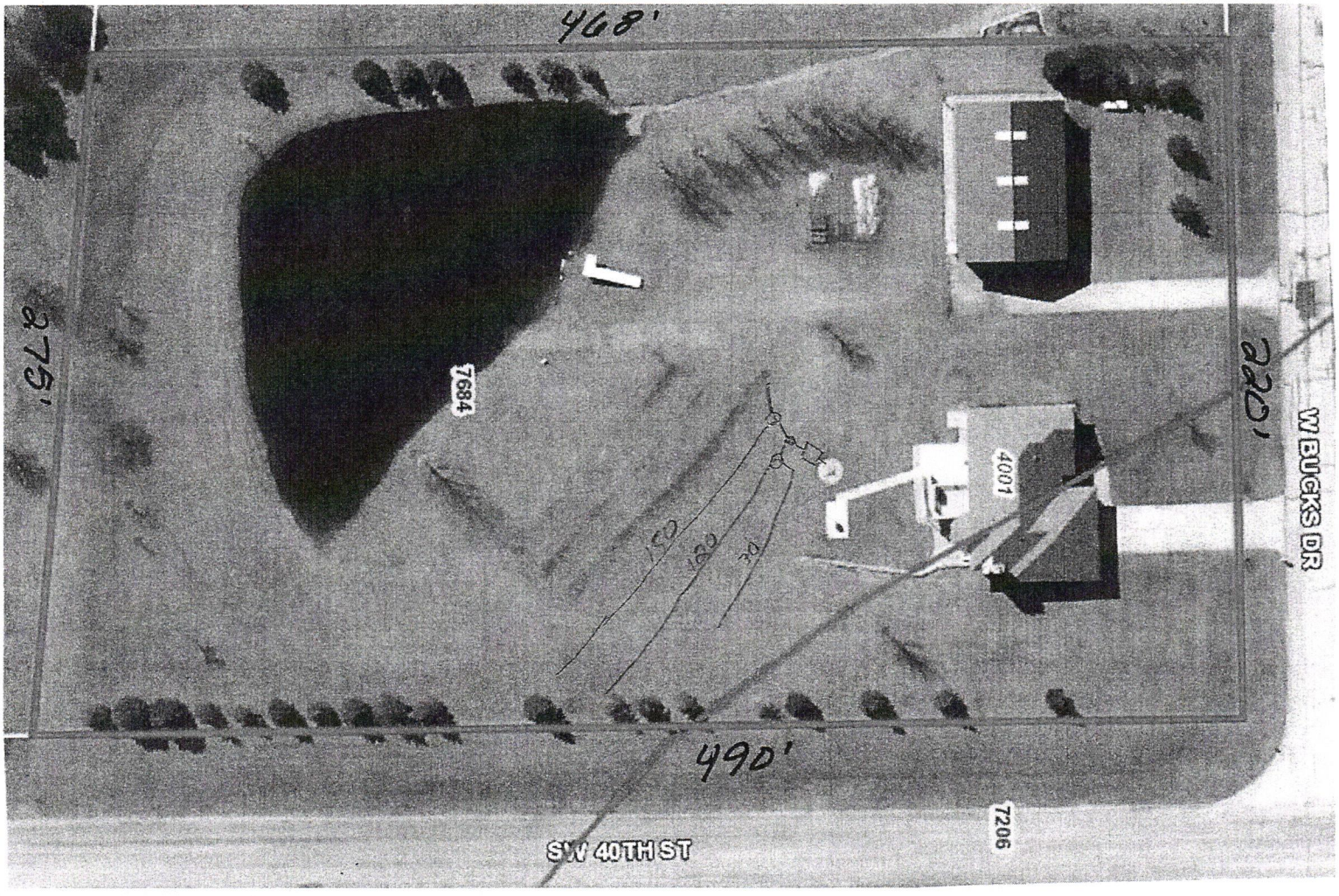
F. Required Signatures

Home Building Contractor Existing Home Date _____

Installer Kurt L Johnson Date 6/22/20

SCANNED

4 Bed x eq/x eq
53 mpi = 320 EZ Flow.



SCANNED

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
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D Exhibit 4

Permit Number: HS002036

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first 2 runs x lines complete ✓ pH

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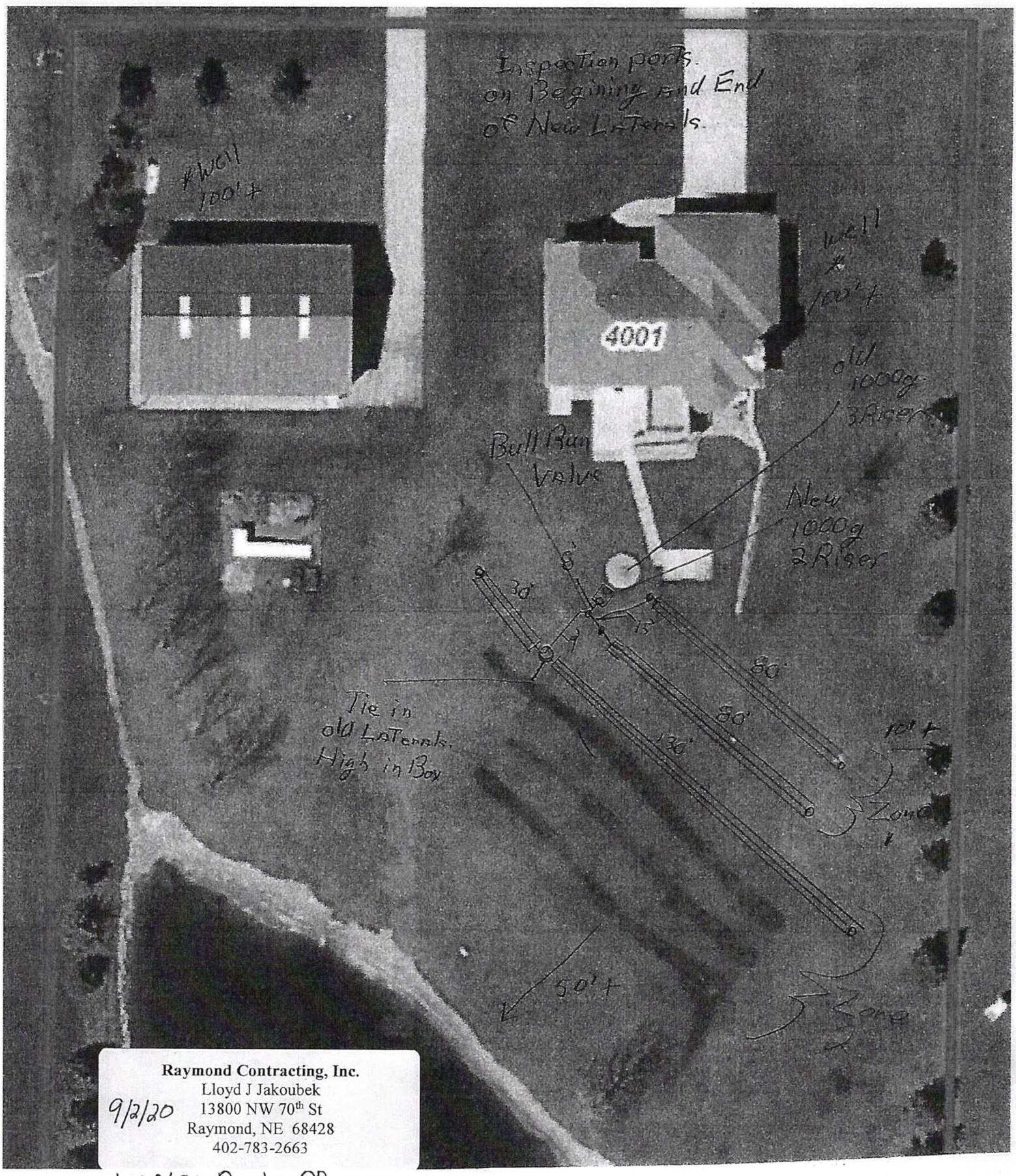
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Certified Professional Signature: [signature] Date: 9/2/20

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

SCANNED



Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
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9/2/20

4001 W Bucks DR.
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