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

A

Permit Number
#S002122

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 N 27th St (no rural route) City Davey NE Zip 68336

Legal Description NE (1/4) SE (1/4) 1 (Section) 11N (Township) 6E (Range) Allen Acres Addition (Subdivison) 2 (Addition) (Block) (Lot)

PID 12-01-401-002-000

B. Owner

Name Hunter C Isley

Signature ISLEY.HUNTER.CUONG.1260748595 Digitally signed by ISLEY.HUNTER.CUONG.1260748595 Date: 2020.10.21 08:35:09 -05'00'

Address 1531 Hartland Road

City/State/Zip Lincoln, NE 68521

Home Phone 402-416-9300

Work Phone

C. Certified Installer

Name Lloyd Jakoubek, Raymond Contracting Inc

Signature Lloyd J. 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 6 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 33.95

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify

Type of Wastewater ☐ Domestic ☐ Non-Domestic Design flow in gallons per day

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 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

Date

Business Office Use Only
Date Received 10-22-20 Amount Paid $440 CK
Received By JAD Cash/Check No CK 5040

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

Form A Update 1-13

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

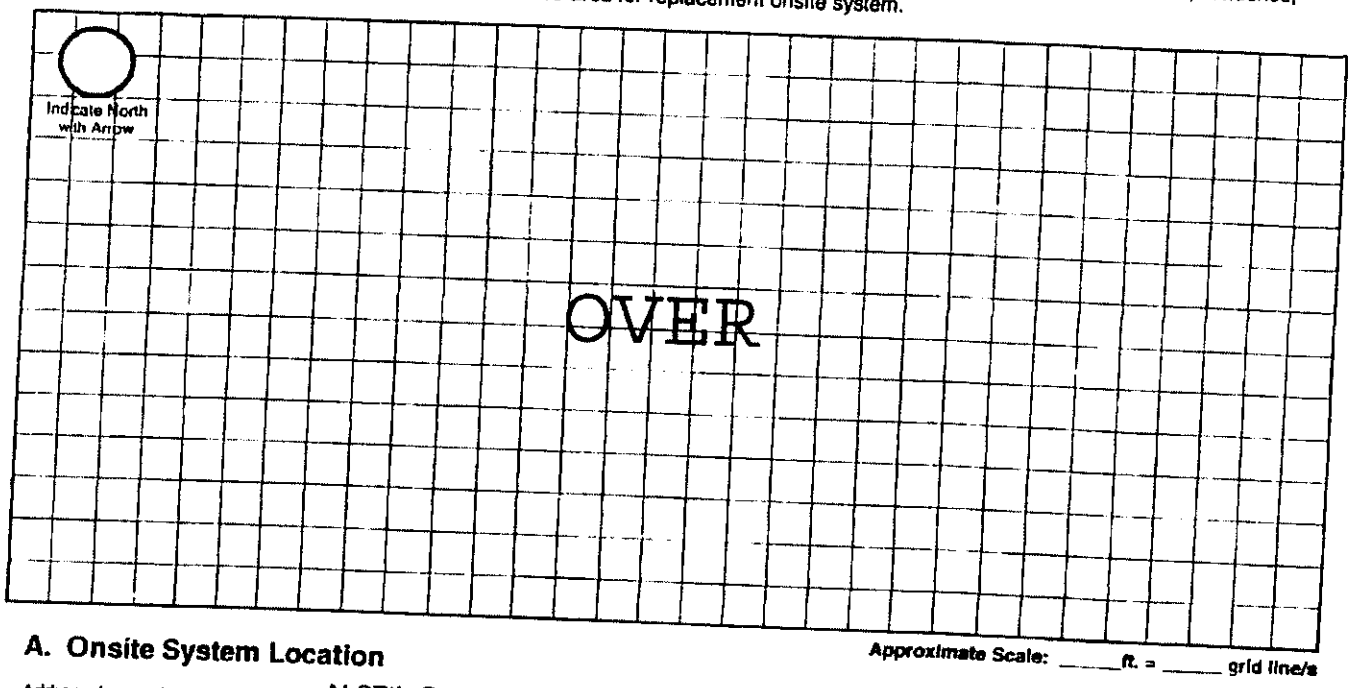
C

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) N 27th St City Davey NE, Zip 68336

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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__ (min/inch = mpi) No. of Bedrooms_____ Soil Type _____ Land Slope_____%

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

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ 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 Mark Semerad Date 10-21-20

Installer Brian L Johnson Date 10-22-20

Builder initials NP



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. HS002122

System Type: Lagoon

Situs: No Site Address Specified

Issued: 10/26/2020

Expires: 10/26/2021

Description: ALLEN ACRES ADDITION, Lot 2

Owner: ISLEY, HUNTER C & NGUYEN, THUY ANH THI
13997 N 27 ST
RAYMOND, NE 68336

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