JAN 0 4 2021

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

A

Permit Number HS002164

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 Apollo Drive (no rural route) City Denton, NE Zip 68339

Legal Description West Van Dorn Estates 2nd Addition, Block 2, Lot 4

1/4 | 1/4 | Section 54 | Township 9 | Range R5 | Subdivison | Addition | Block | Lot

PID 0304206004000

B. Owner

Name Aspen II Builders Signature

Address 1640 Normandy Ct. City/State/Zip Lincoln, 68512

Home Phone 402-423-6811 Work Phone

C. Certified Installer

Name: Robert Banes Signature

Address 1640 Normandy Ct City/State/Zip Lincoln, NE 68512

Work Phone

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 5 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
Site visits Date rec'd **ACTION** ☐ Approved ☐ Disapproved
Date frwd Signature
Comments

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

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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 1-04-21 Amount Paid $440.00
Received By JAD Cash/Check No 29493

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3131 "O" 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 TBD Apollo (no rural route) City Denton NE, Zip 68339

Owner Aspen Address)

Date of Tests 10-7 to 10-8 Weather: Precipitation Dry Temperature 65

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop: Last 30 mins of 4 hr or last 10 mins of 1 hr					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	36	10-7	10AM	10-8	10AM	10-8	10:15	6	10-8	:45	30	3/4	40
2							:16	6		:46		1"	30
3							:17	6		:47		5/8	48
4							:19	6		:48		3/4	40
5							:19	6		:49		3/4	40
6							:20	6		:50		5/8	48
								6					
								6					

Person Conducting Percolation Test

Name: Bob Bynes
Phone: HOME Normandy
Address Lincoln, NE

Sum of Percolation Rates: 240
Average of Rates: 41
Rate Used for Calculation: 40

Soil type (NRCS Maps/Other) Arisman 5.4+
Groundwater Depth Arisman 16

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

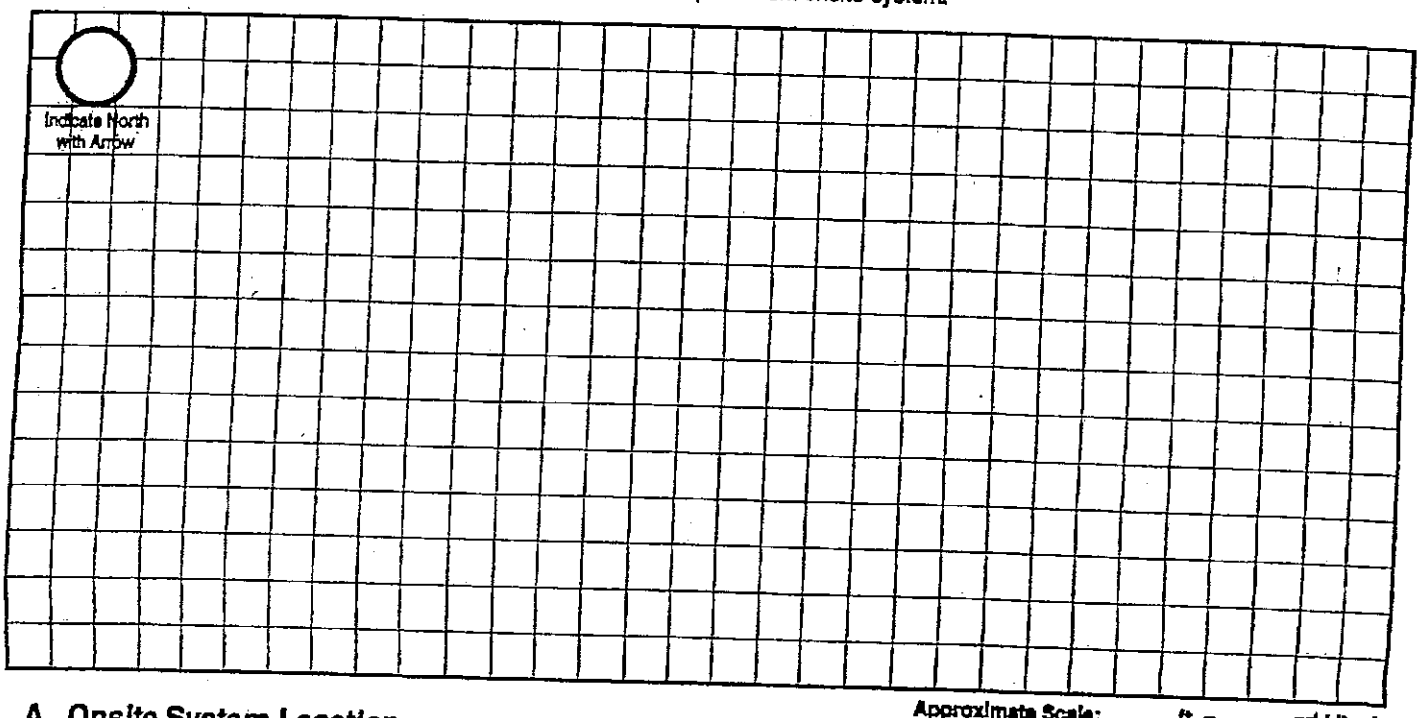
C

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 line/s

A. Onsite System Location

Address (no rural route) 1858 Apollo City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. 1750 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 40 (min/inch = mpi) No. of Bedrooms 5 Soil Type AK Land Slope 2 %

☑ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 1650 sq.ft.

Total length of laterals 367 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☑ Other EZ FLO

No. of absorption trenches 3 Width 3' No. of drop boxes_____ Distrubtion Box 1

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_____ Data 12-28-20

Installer_____ Date 12-28-20

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. HS002164

System Type: Standard

Situs: No Site Address Specified

Issued: 1/5/2021

Expires: 1/5/2022

Description: WEST VAN DORN ESTATES 2ND ADDITION, BLOCK 2, Lot 4

Owner: ASPEN BUILDERS INC
1640 NORMANDY CT STE A
LINCOLN, NE 68512

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
Health Director

ASPEN BUILDERS
1640 NORMANDY CT, STE A
LINCOLN, NE 68512

JAN 04 2021

SCANNED

A

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

Permit Number HS002164

Onsite Wastewater Treatment System
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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 10101 Apollo Drive (no rural route) City Denton, NE Zip 68339

Legal Description West Van Dorn Estates 2nd Addition, Block 2, Lot 4

1/4 1/4 Section 5 Township 9 Range 5 Subdivison Addition Block Lot

PID 0304206004000

B. Owner

Name Aspen Builders Signature

Address 1640 Normandy Ct. City/State/Zip Lincoln, 68512

Home Phone 402-423-6811 Work Phone

C. Certified Installer

Name: Robert Banes Signature

Address 1640 Normandy Ct City/State/Zip Lincoln, NE 68512

Work Phone

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 5 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

Site visits 7/29/21 Date rec'd 1/5/21 Date frwd 1/5/21

ACTION ☑ Approved ☐ Disapproved Signature

Comments

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 Doug Mueller

Date 7/30/21

Business Office Use Only

Date Received 1-04-21 Amount Paid $440.00

Received By JAO Cash/Check No. 29493

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

Exhibit 5

Permit Number: HS002164

Onsite Wastewater Treatment System

Inspection Sheet

Date 7/30/21 Legal Description W. Von Dorn Estate Blk 2, Lot 4

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 10101 Apollo 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 1665 Sq. Ft. Tank Size 2 tanks — 1,000 gallons each 2,000 gals

Total length of laterals 3701 Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ Flow

No. of Absorption Laterals 3 Width 4.5 factor 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 DC Date 7/29/21

Follow-Up Date

Follow-Up Date

Installation Final Written Approval

By Doug Thun

Date 7/30/21

Add Note Drawing (See Reverse Side):

Updated 4/15

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 HS002164

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 0304206004000

Address or Legal Description or Parcel Identification Number (PID) 10101 Apollo Dr

Owner: Aspen Address Denton, NE

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 80 ft.

B. Septic Tank

1. Material PVC
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 22 in.
4. Distance to:
   Well 110 ft.
   Pressure line 80 ft
   Property Line 200 ft.
   Foundation 80 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 5 ft. E

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless. 1203 E2
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 130 ft 130 ft 110 ft.
4. Drainfield size: 1665 sq. ft.
5. Distance to:
   Well 130 ft.
   Pressure line 100 ft.
   Property line 100 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: _____ Date: 8-5-21

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

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

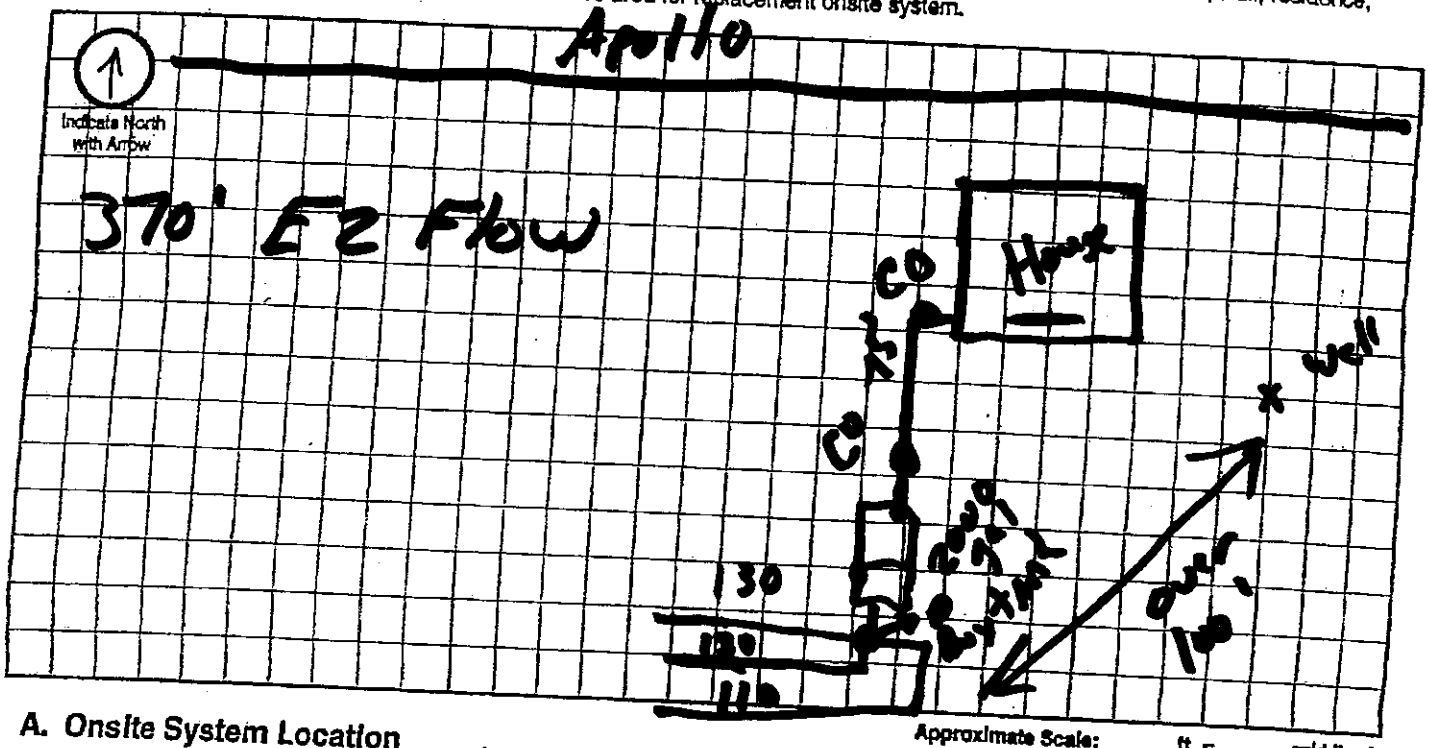
10101 Apollo PBC

Permit Number:

Onsite Wastewater Treatment System

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C. Reserve Area for Replacement Onsite System

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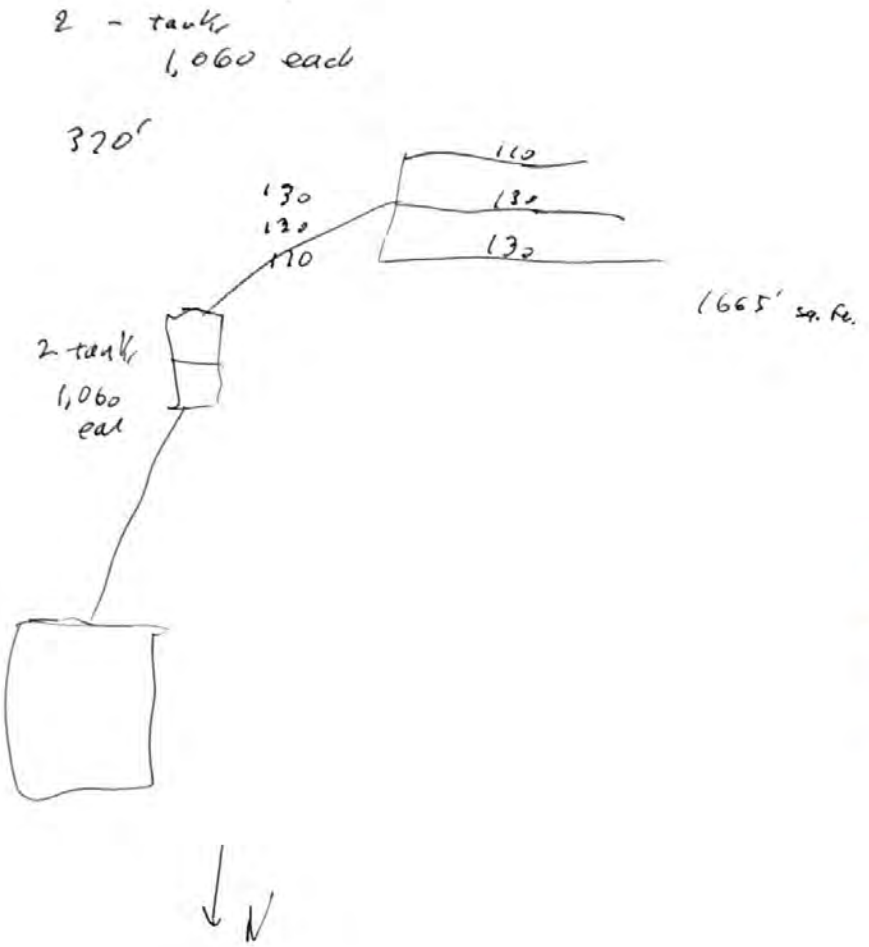
F. Required Signatures

Home Building Contractor _____ Date 12-28-20

Installer _____ Date 12-28-20

Form C 12_06

7/29/21



T9N R5E SEC 4 BLK 2 LOT 4
WEST VAN DORN ESTATES 2ND ADD
10101 APOLLO DR
HSP2164

SEPTIC