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

A

Permit Number HS002199

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 3785 W Branched Oak Rd (no rural route) City Raymond NE Zip 68428

Legal Description NW (1/4) NW (1/4) 32 (Section) 12N (Township) 6E (Range) _____ (Subdivison) _____ (Addition) 29 (Block) _____ (Lot)

PID 13-32-100-012-000

B. Owner

Name Chad Draper Signature Chad J. Draper

Address 3785 W Branched Oak Rd City/State/Zip 3785 W Branched Oak Rd Raymond NE 68428

Home Phone 402-937-0767 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 5 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 18.51

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 _____ Date frwd _____
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 _____
Date _____

Business Office Use Only
Date Received 4-19-21 Amount Paid $440.00
Received By JAO Cash/Check No. CC5040

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: 402-441-8022

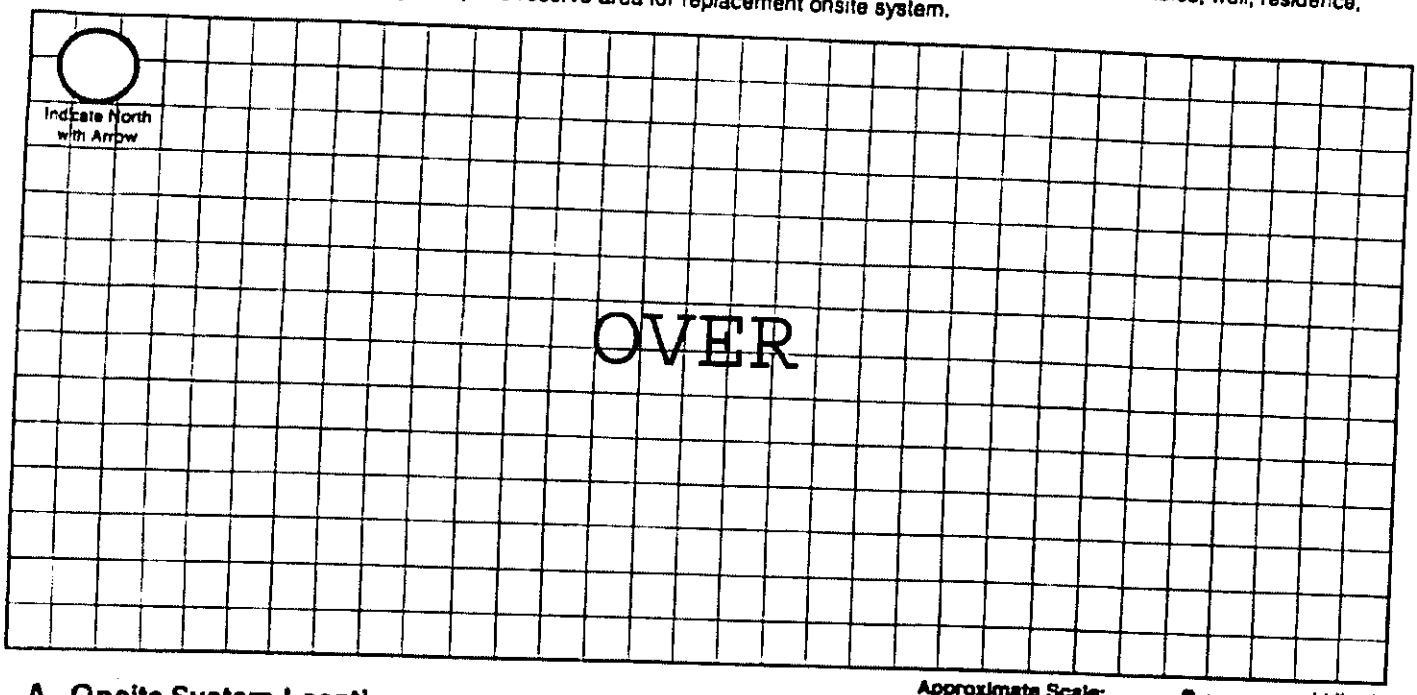
C

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) 3785 W Branched Oak Rd City Raymond NE, Zip 68428

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

[redacted] Date 4-12-21

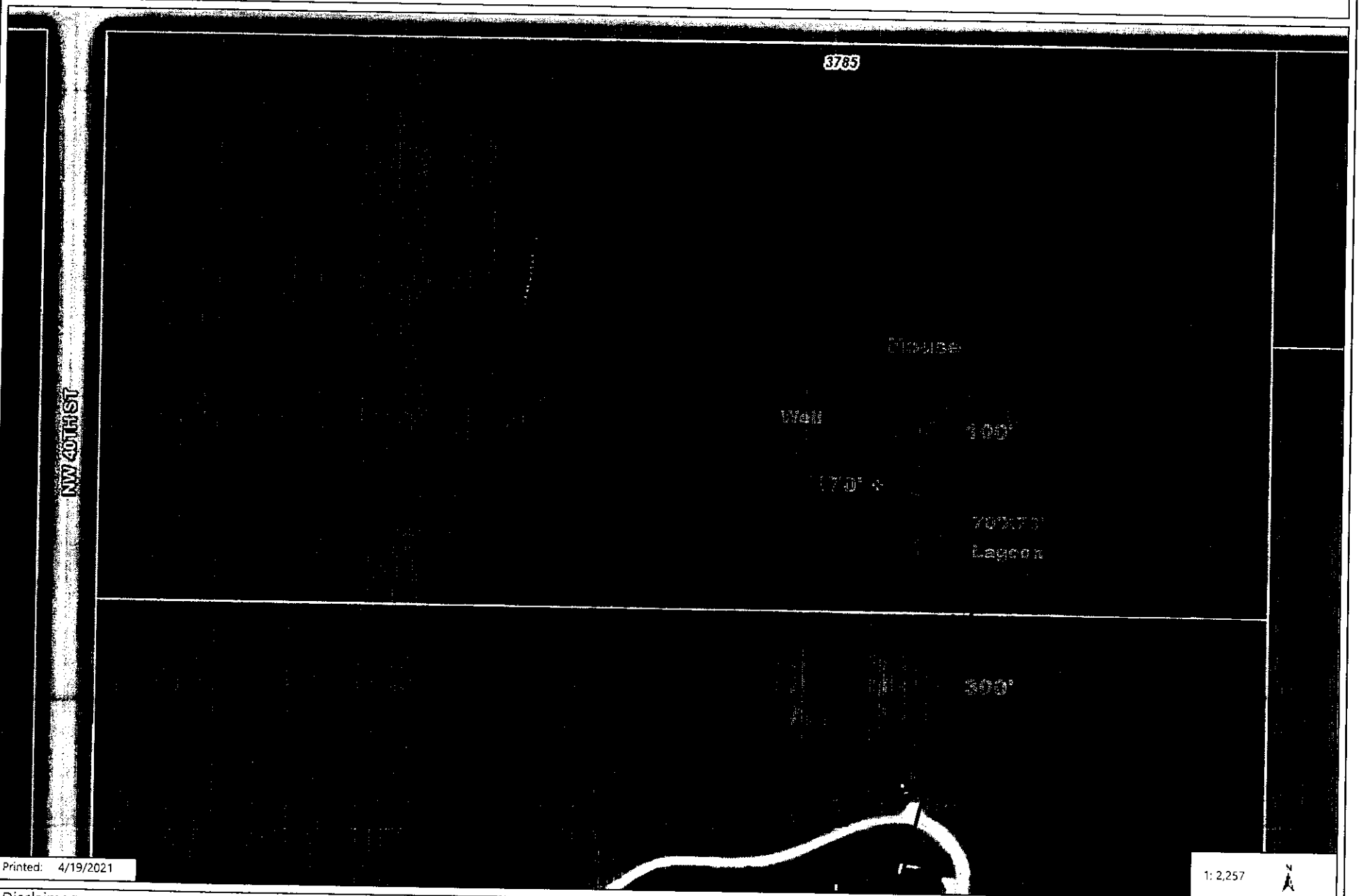
Installer Date 4/19/21

Onsite Form C 12-05

3785 W Branched Oak Rd, Raymond, NE 68428

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



Printed: 4/19/2021

1: 2,257

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. HS002199

System Type: Lagoon

Situs: No Site Address Specified

Issued: 4/23/2021

Expires: 4/23/2022

Description: S32, T12, R6, Acres 6th Principal Meridian, LOT 29 NW

Owner: DRAPER, CHADD & CASSANDRA
PO BOX 247
MALCOLM, NE 68402

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

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 HS002199

New Construction

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)

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PID 13-32-100-012-000

B. Owner

Name Chad Draper Signature [signature]

Address 3785 W Branched Oak Rd City/State/Zip 3785 W Branched Oak Rd Lincoln NE 68528

Home Phone 402-937-0767 Work Phone _____

C. Certified Installer

Name Lloyd Jakoubek, Raymond Contracting Inc Signature [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 *Assessor says 3 bedroom -

☑ Residential Dwelling Number of Bedrooms 5 3, Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 18.51

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 8/8/21 - 2nd tier?? Date rec'd 4/23/21 Date frwd 4/23/21
ACTION ☒ Approved ☐ Disapproved Signature [signature]
Comments _____

2. Supt. Bldg. Insp. or Village Clerk
Comments _____ Date rec'd _____ Date frwd _____
ACTION ☒ Approved ☐ Disapproved Signature [signature]

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

Installation Final Written Approval
By [signature]
Date 9/12/22

Business Office Use Only
Date Received 4-19-21 Amount Paid $440.00
Received By JAO Cash/Check No CC5040

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

Form A Updated: 1/13

* fence installed - 9/9/22

Nate C. Hartman

From: Frank Robbins <franklingrobbins@gmail.com>
Sent: Thursday, April 22, 2021 5:37 AM
To: Nate C. Hartman
Subject: Re: 3785 W. Branched Oak Rd
Attachments: image001.jpg

The board would approve this application. The system would have to comply with county codes.

Frank Robbins

On Tue, Apr 20, 2021, 9:17 AM Nate C. Hartman <nhartman@lincoln.ne.gov> wrote:

> Frank:
>
> We have received a permit application for an onsite wastewater system to be located at the above noted address. At present, the application is for a lagoon used to serve a 5 bedroom home. Please provide an official "approval" or "denial" from the Village of Raymond by simply responding to this email. Owner of the property is Chad Draper. Legal is T12N, R6E, SEC 32, Lot 29....PID is 1332100012000 for reference.
>
> If you have any questions, please feel free to contact me any time.
>
> Thanks!
>
> Nate Hartman REHS, QCIS, QPSWPPP
>
> Senior Environmental Health Specialist
>
> 3131 'O' Street, Lincoln, NE 68510
>
> O: 402-441-8643 F: 402-441-3890




Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

D

Permit Number: HS002199

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 = 13-32-100-012-000

Address or Legal Description or Parcel Identification Number (PID) 3785 W Branched Oak Rd, Raymond, NE 68428

Owner: Chadd Draper Address 3785 W Branched Oak Rd, Raymond, NE 68428

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and ~~septic tank~~ Lagoon: 160 ft.

B. Septic Tank

1. Material _____
2. Capacity: _____
3. Depth to top of tank, below unfinished grade: ____ in.
4. Distance to:
   Well _____ ft.
   Pressure line _____ ft
   Property Line _____ ft.
   Foundation _____ ft.

C. Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

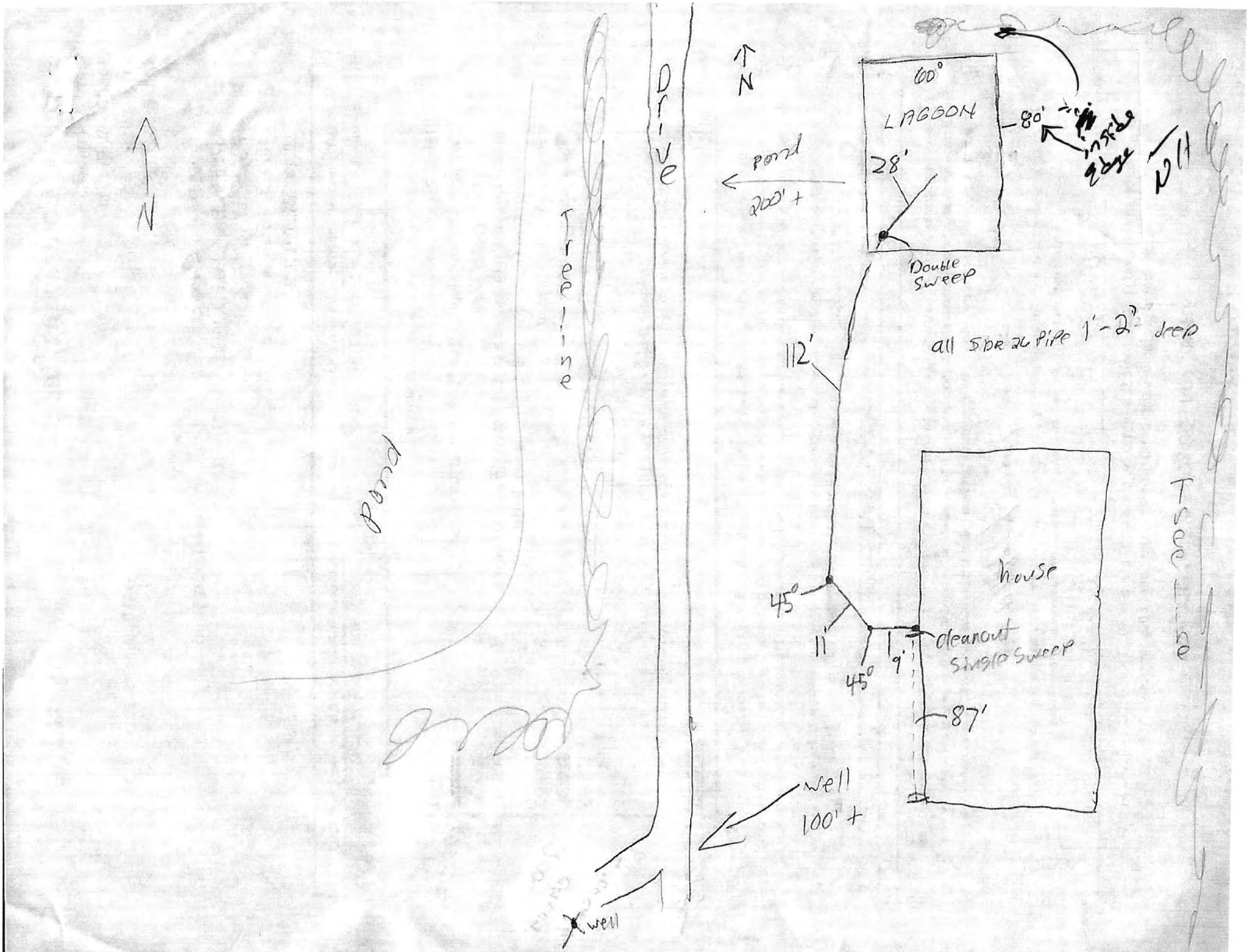
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☑ Yes ☐ No (Partially)

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: _____ Date: 7/2/21

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


N
Drive
Tree line
pond
N
60'
LAGOON
80'
28'
pond
200' +
Double Sweep
112'
all SDR 26 Pipe 1'-2' deep
45°
11'
45°
9'
cleanout
single sweep
87'
house
Tree line
well
100' +
well

3785 W Branched Oak Rd, Raymond, NE 68428

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



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SCANNED