Lincoln-Lancaster County Health Department

A

H500 3210

Existing Home

Onsite Wastewater Treatment System
Request for Site Clearance and Permit

Attachment Form 1 and 6 Submitted with this Application

☐ Septic System ☑ [illegible] ☐ Other Sewage Treatment System

The undersigned hereby requests site clearance for the following described Wastewater Treatment System in conformance with approved plans.

PLEASE PRINT OR TYPE

A. Onsite System Location

10705 N 134th St (or rural route) — Waverly — NE — 68462

SW (1/4) SE (1/4) 17 (Section) 11N (Township) 8E (Range) Wiebusch Acres (Subdivision) (Address) 2 (Block) (Lot)

P.I.D. 24-17-400-007-000

B. Owner

Lynn M Larsen — Signature

10705 N 134th St — City State Zip Waverly, NE 68462

Home Phone 402-432-1584 — 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

☑ Residence (Number of Bedrooms) 5 — Whirlpool Bathtub? ☐ Yes ☑ No — Total Acres 5

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment (Describe Facility) Specify — Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Meets Title 124 ☐ County Resolution No. 02-30

1. Health Department — Signature — Date Received — Date Issued — Comments — ACTION ☐ Approved ☐ Disapproved — Signature

2. Supt. Bldg. Insp. or Village Clerk — Signature — Date Received — Date Issued — ACTION ☐ Approved ☐ Disapproved — Signature

3. City or County Engineer — Signature — Date Received — Date Issued — ACTION ☐ Approved ☐ Disapproved — Signature

Installation Final Written Approval — Signature

Business Office Use Only — Date Received 5-03-24 — Receipt Number — Fee Paid $440.00 — JAO — CC6040

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

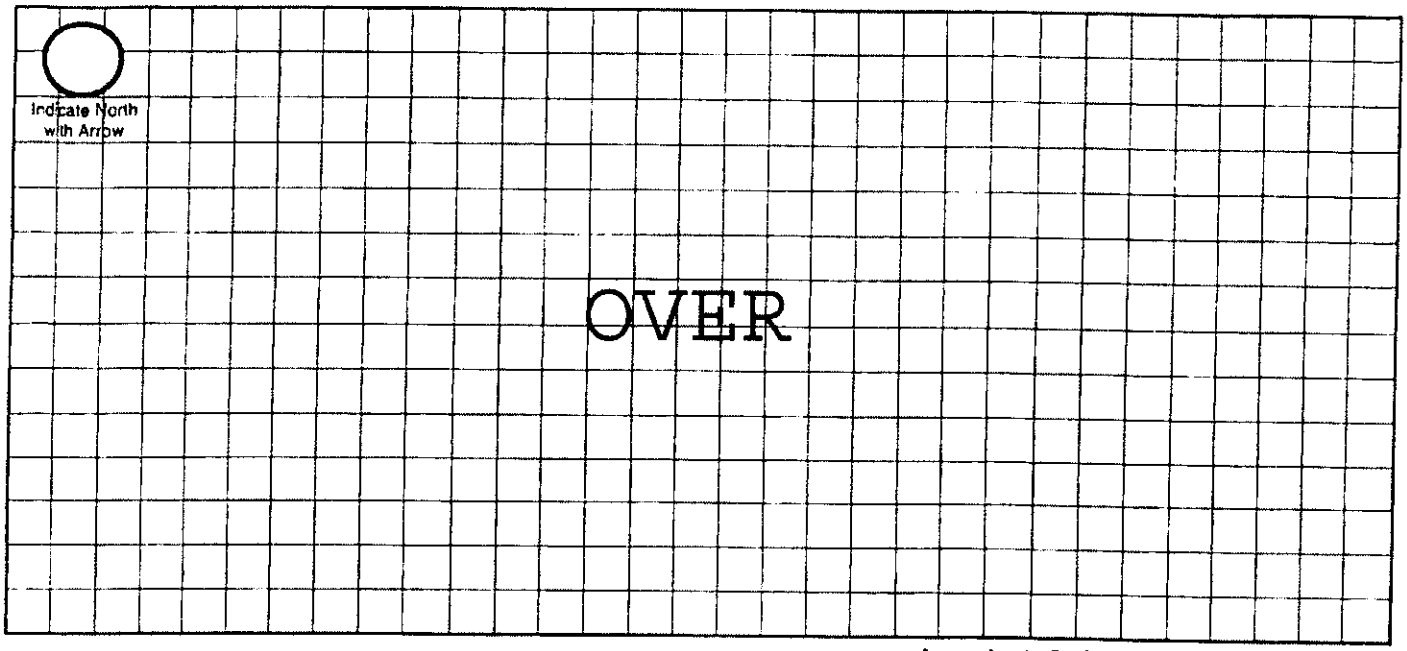
C

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) 10705 N 134th St City Waverly NE, Zip 68462

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

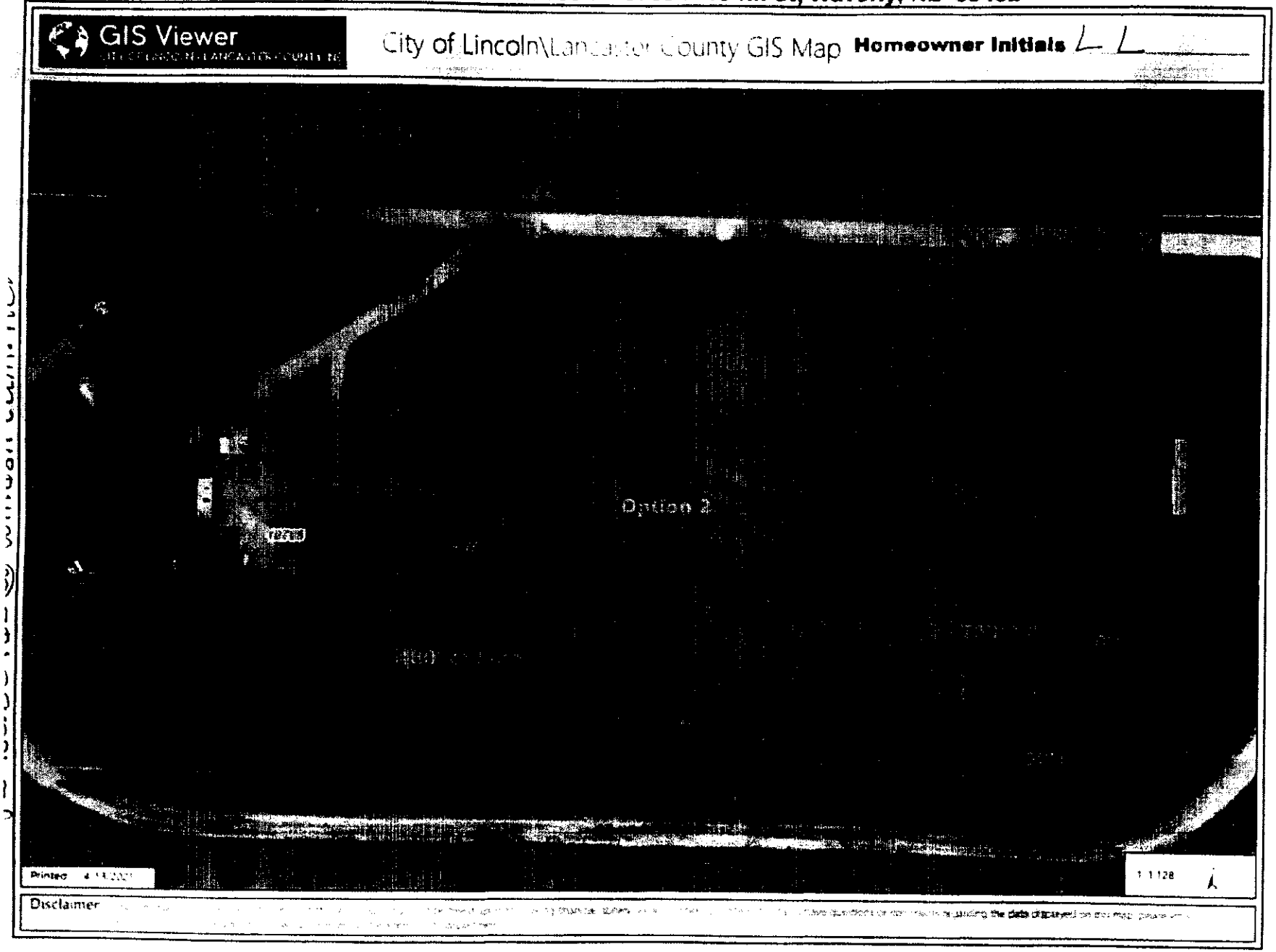
Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☒	500 ☒	50 ☒	N/A ☒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

F. Required Signatures

Home Building Contractor Existing Home Date _____

Installer _____ Date 5/3/21

Lynn Larsen 402-432-1584 10705 N 134th St, Waverly, NE 68462



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. HS002210

System Type: Lagoon

Situs: No Site Address Specified

Issued: 5/6/2021

Expires: 5/6/2022

Description: WIEBUSCH ACRES, Lot 2

Owner: LARSEN, LYNN M JR & KIMBERLY J
10705 N 134 ST
WAVERLY, NE 68462

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