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

SCANNED
SCANNED

A

Permit Number #5002253

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☒ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 5620 W. Adams St (no rural route) City Lincoln, NE Zip

Legal Description 12 (1/4) 10 (1/4) 5 (Section) 6th Principal Meridian (Township) (Range) (Subdivison) (Addition) 37 SE (Block) (Lot)

PID 04124000030 00 *Approx. Address (If to be determined)

B. Owner

Name Shawn & Janna Meyer Signature

Address Kenny Gearman (Builder) City/State/Zip

Home Phone Work Phone 402-440-6121

C. Certified Installer

Name: Scott Mueller Signature

Address 1345 N 26th Rd City/State/Zip Syracuse NE 68446

Work Phone 402-430-2946

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 3 or 4 Whirlpool Bathtub? ☐ Yes ☒ No Garbage Grinder? ☐ Yes ☒ No Total Acres 2.72

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day

Type of Wastewater ☐ Domestic ☐ Non-Domestic

NH

DO NOT WRITE BELOW THIS LINE

Approval Process

1. Health Department

Site visits 4/18/22 DS

Comments

Date rec'd 7/8/21
Date frwd 7/8/21

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

Issued 11/4/21

Installation Final Written Approval

By Doug Smith

Date 4/18/22

Business Office Use Only

Date Received 7-01-21 Amount Paid $440.00

Received By JMO Cash/Check No CC Check

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

Form A Updated: 4/15

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

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 5620 W Adams ST (no rural route) City Lincoln NE, Zip

Owner Shawn & Jana Meyer Address

Date of Tests 4-15 to 4-16 Weather: Precipitation N/A Temperature 70's

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					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)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	36	4-15	9:00	4-16	1:00	4-16	1:00	6	4-16	1:30	30	3/4	45
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	3/4	45
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	1	30
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Scott Mueller
Phone: 402-436-2946
Address Syracuse NE 68446

Sum of Percolation Rates: 120
Average of Rates: 40
Rate Used for Calculation: 40-50 MPI

Soil type (NRCS Maps/Other)
Groundwater Depth 12+

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

3440 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

SCANNED

Permit Number: HS002253

Onsite Wastewater Treatment System

Inspection Sheet

Date 4/18/22 Legal Description ¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 5620 W Adams 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 1,440 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 320' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☐ Other (describe) E-Z flow

No. of Absorption Laterals 3 Width 4.5 factor No. of Drop Boxes Distribution Box 1

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:

Note Drawing (See Reverse Side):

Inspections prior to Final Approval

Initial DS Date 4/18/22

Follow-Up Date

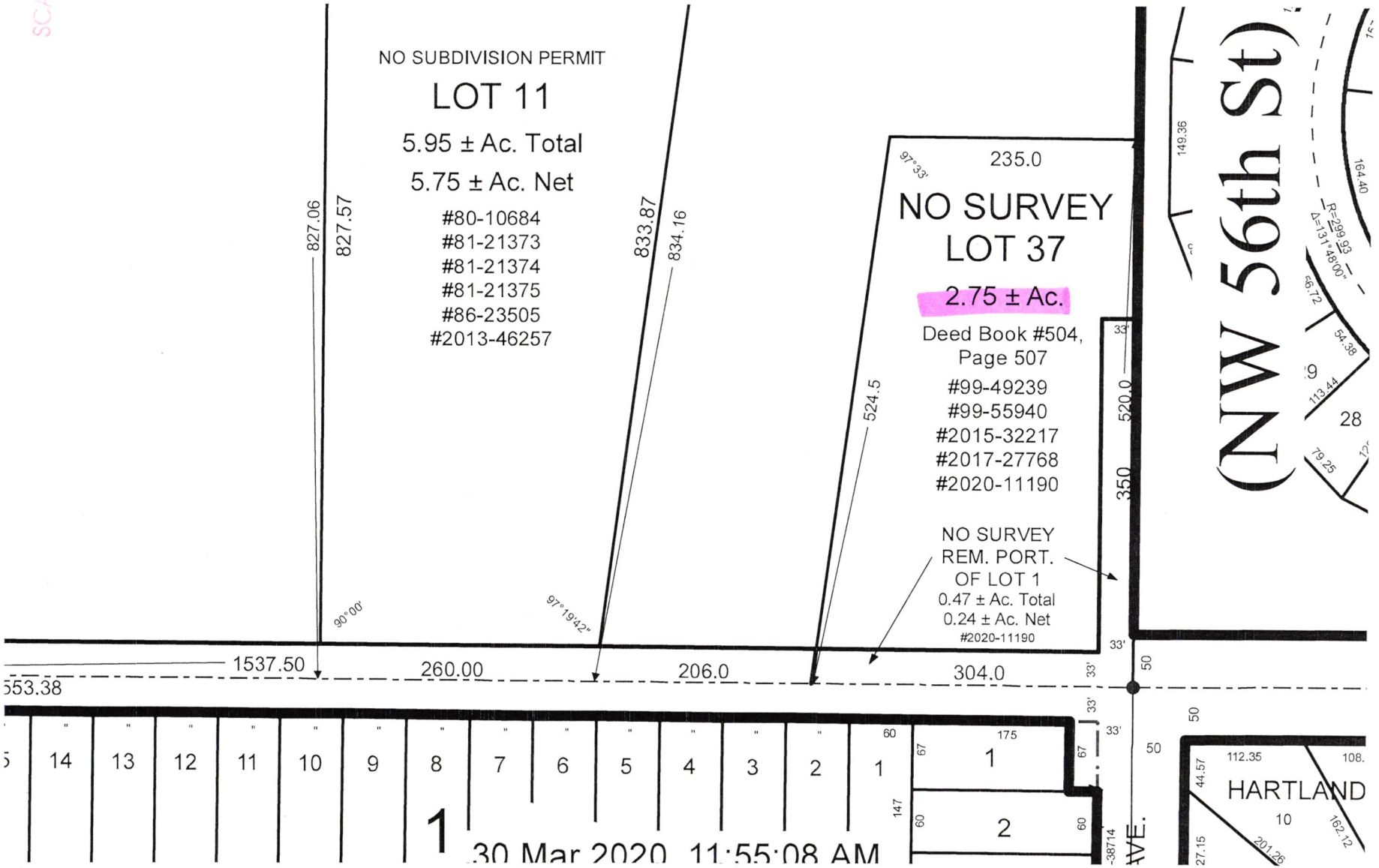
Follow-Up Date

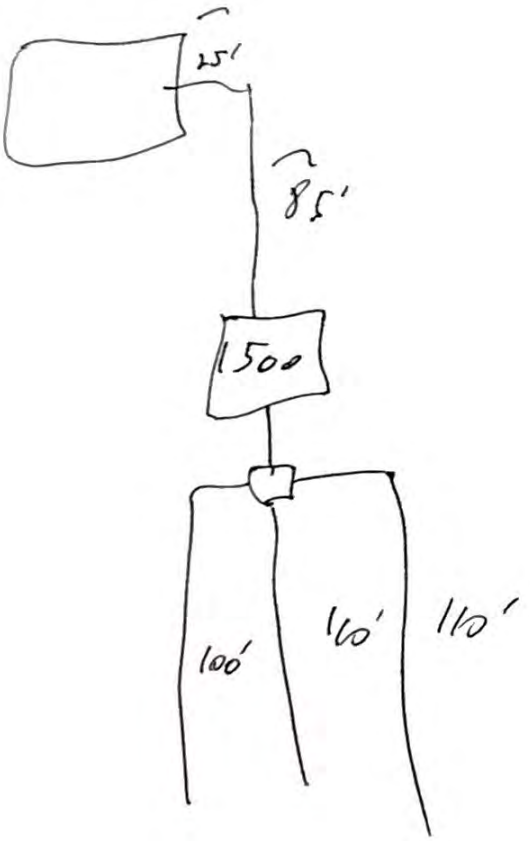
Installation Final Written Approval By Doug Arnold

Date 4/18/22

Updated 4/15

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NO SUBDIVISION PERMIT
LOT 11
5.95 ± Ac. Total
5.75 ± Ac. Net
#80-10684
#81-21373
#81-21374
#81-21375
#86-23505
#2013-46257
827.06
827.57
833.87
834.16
235.0
97°33'
NO SURVEY
LOT 37
2.75 ± Ac.
Deed Book #504,
Page 507
#99-49239
#99-55940
#2015-32217
#2017-27768
#2020-11190
524.5
520.0
350
NO SURVEY
REM. PORT.
OF LOT 1
0.47 ± Ac. Total
0.24 ± Ac. Net
#2020-11190
90°00'
97°19'42"
1537.50
260.00
206.0
304.0
553.38
33'
50
(NW 56th St)
149.36
164.40
R=299.93
Δ=131°48'00"
56.72
54.38
113.44
79.25
28
9
14 13 12 11 10 9 8 7 6 5 4 3 2 1
60
67
175
1
2
147
60
67
33'
50
112.35
108.
44.57
HARTLAND
10
162.12
27.15
201.26
-38714
VE.
1
30 Mar 2020 11:55:08 AM



← flow
1,440

HS002253