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. HS002322

System Type: Lagoon

Situs: No Site Address Specified

Issued: 11/4/2021

Expires: 11/4/2022

Description: S22, T9, R8, Acres 6th Principal Meridian, LOT 21 NE

Owner: JOHNSON, DAVID L & LISA
DARLINGTON
7130 S 89 ST UNIT 1204
LINCOLN, NE 68526

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, 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

BLAIN JOHNSON
8533 EAST STAKE HWY 41
ADAMS, NE 68301

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

A

Permit Number
HS02322

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 _____ (inc rural route) City _____ NE Zip _____

Legal Description _____ 1/4 22 1/4 9 Section 8 Township Range Subdivision Addition Block 21 Lot

Geographical Location (if known) Lat Long: _____ PID 222220000500

B. Owner

Name Dave Johnson Signature _____

Address _____ City State Zip _____

Home Phone _____ Work Phone 402 617 6944

C. Certified Installer

Name Blain Johnson Signature _____

Address 8533 East State Hwy 41 City State Zip Adams NE 68301

Work Phone 402 610 2270

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 Is there a Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 20

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

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

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 _____

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 11-1-21 Amount Paid 450.00
Received By LC Cash/Check No CC2157

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

Form A Updated 5-11

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

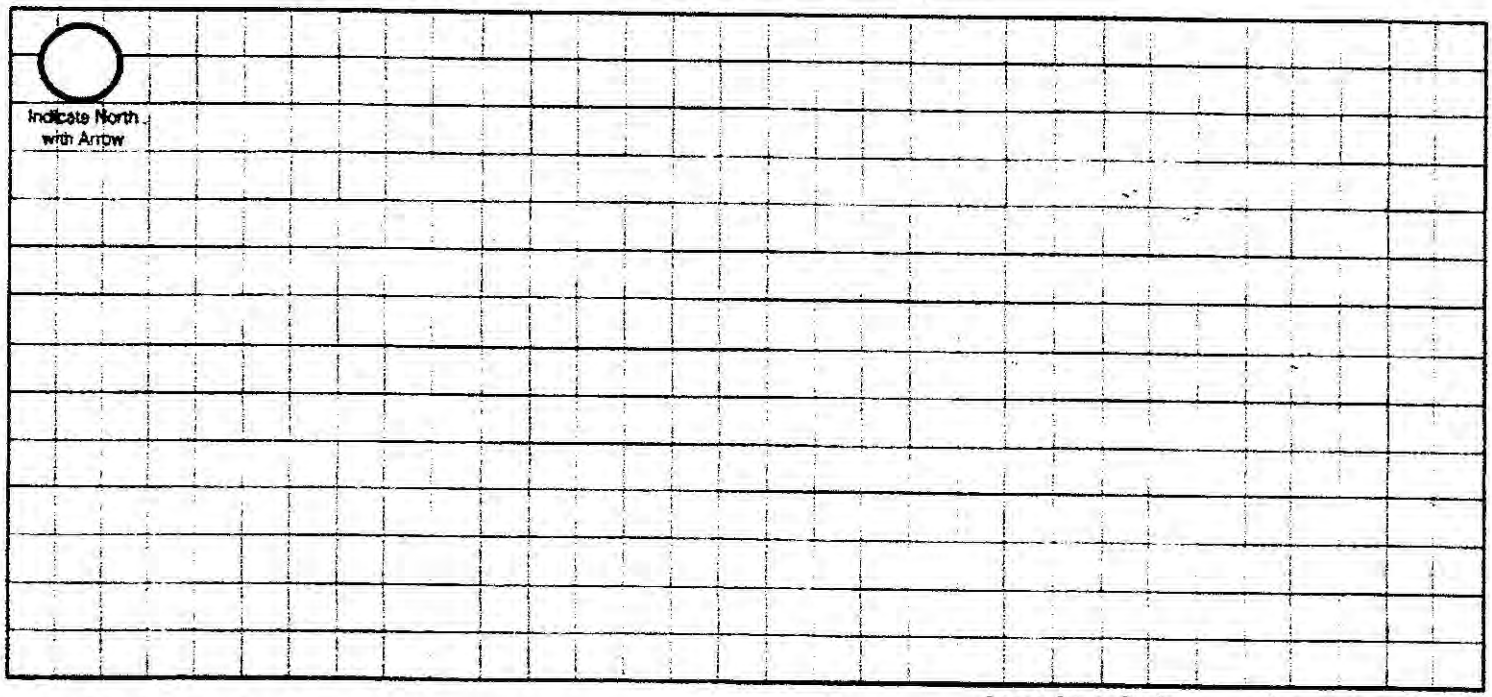
C

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) _____ City _____ NE, Zip _____

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 _____ Date _____

Installer _____ Date 10/29/2021

SCANNED

A

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

Permit Number
HSO02322

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 7105 S. 162nd (no rural route) City _____ NE Zip _____

Legal Description _____ 22 9 8 _____ 21

1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Lat/Long: _____ PID 222220000500

B. Owner

Name Dane Johnson Signature _____

Address _____ City/State/Zip _____

Home Phone _____ Work Phone 402 617 6944

C. Certified Installer

Name: Blain Johnson Signature _____

Address 9533 East State Hwy 41 City/State/Zip Adams NE 68301

Work Phone 402 610 2270

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 6e Is there a Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 20

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

Type of Wastewater ☒ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

19.52

* N/A

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 11/4/21
Date fwd 11/4/21
ACTION ☒ Approved ☐ Disapproved
Signature _____

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 8/4/22

* Test holes witnessed

Business Office Use Only
Date Received 11-1-21 Amount Paid 450.00
Received By LC Cash/Check No 22157

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

Form A Updated 8/10

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

PID 22222000500

Address 7105 South 162nd (no rural route) City NE Zip

Owner Dave Johnson Address

Date of Tests 7/6/22 to 4/7/22 Weather Precipitation Cloudy Temperature 70

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"	4/6	3p	4/7	1:30p	4/7	5:00	6	4/7	5:30p	30	1"	30
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	〃	〃
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	〃	〃
4	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	〃	〃
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Blair Johnson
Phone: 402 610 2270
Address 9533 E Hwy 41
Adams NE 68301

Soil type (NRCS Maps/Other) Sandy loamy Clay
Groundwater Depth < 7' as witnessed by lancaster county inspector

Sum of Percolation Rates: 120
Average of Rates: 30
Rate Used for Calculation: 59

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Nate C. Hartman

From: Blain <xlcontracting10@gmail.com>
Sent: Wednesday, June 8, 2022 8:53 AM
To: Nate C. Hartman
Subject: 7105 south 162 perc sheet
Attachments: johnson d perc sheet06082022.pdf

Here's perc sheet for that job, you said you were going to email copies of new application forms, could you please do that.

Thanks, Blain.

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

Address or Legal Description or Parcel Identification Number (PID): 22222000005000

Owner: Dave Johnsen Address: 7105 South 162nd

A. Wastewater Piping

1. Material: Plastic Diameter: 4" in.
2. Distance between dwelling and septic tank: 200 ft.

B. Septic Tank

1. Material: concrete
2. Capacity: 2000, 1000
3. Depth to top of tank, below unfinished grade: 36 in.
4. Distance to:
   Well: NA ft.
   Pressure line: 150 + ft.
   Property Line: + 150' ft.
   Foundation: 200 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 130 ft. NE

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material, brand and inside width of Chamberless: EZ flow
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 120 ft. 120 ft. 120 ft. 120
4. Drainfield size: 2100 sq. ft. (2100 per id) 2160 ✓
5. Distance to:
   Well: NA ft.
   Pressure line: 100 + ft.
   Property line: ≈ 10' ft.
   Depth of Groundwater: 7' + ft.

✓ unable to inspect prior to cover

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

If Yes, the Certified Professional must sign below for final approval.

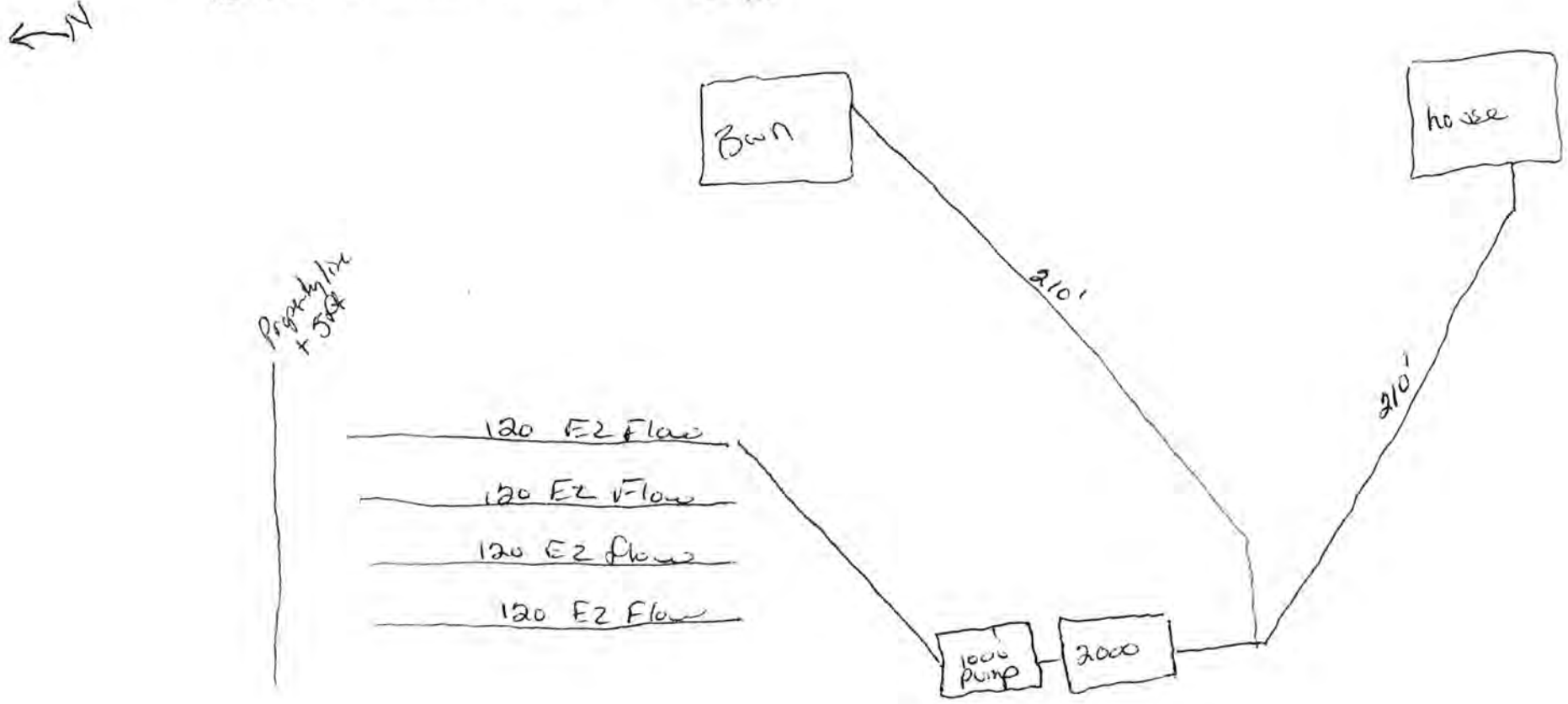
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: Blue John Date: 8/3/2022

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

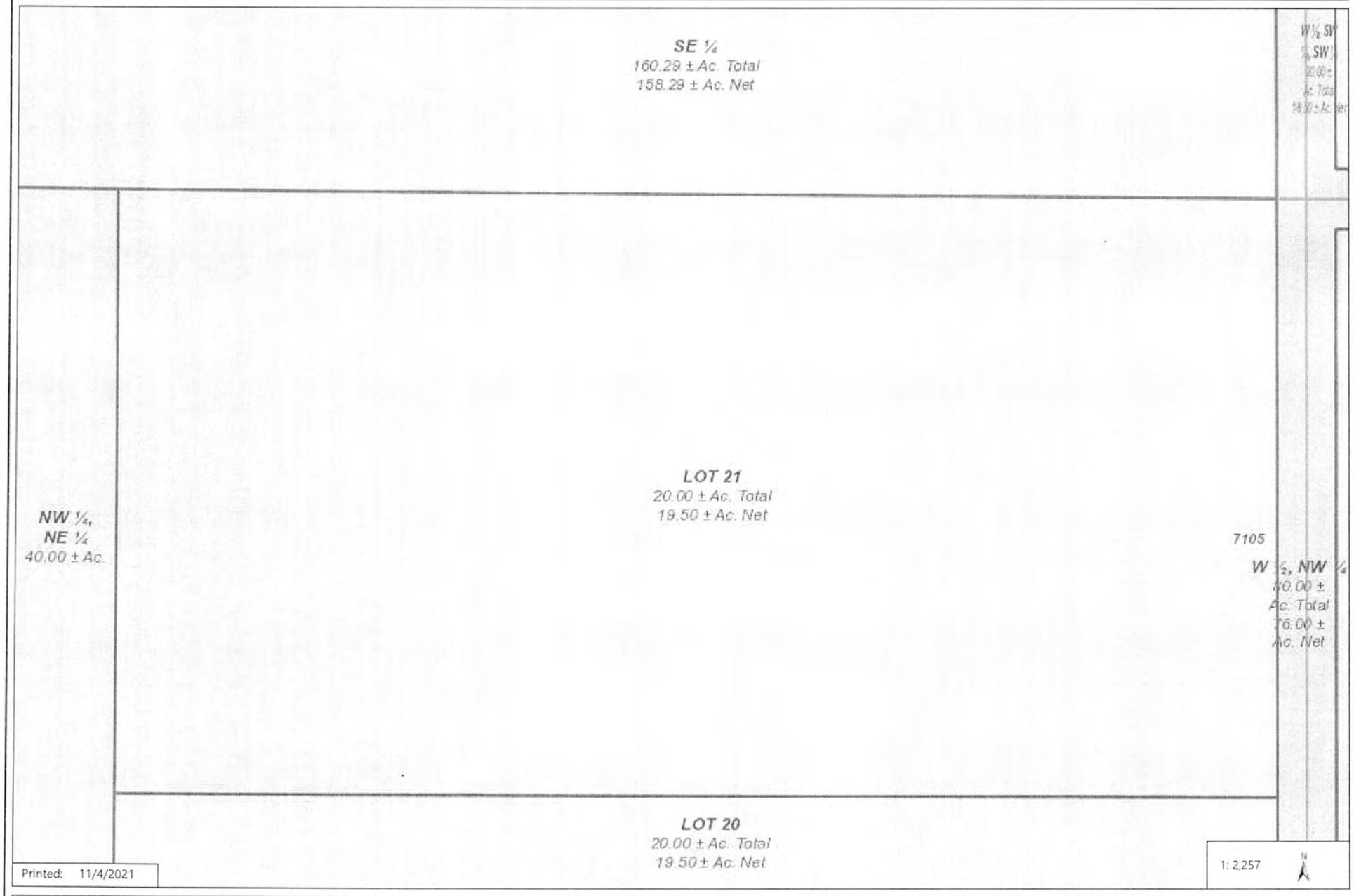
Updated 4-2

no well ✱ rural water



GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



Printed: 11/4/2021

1: 2,257

N

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.

Engineers Copy

22-9-8

Was NE1/4NE1/4
Now Lot 21 of Irregular Tracts, located in the NE1/4 of Section 22, Township 9 North, Range 8 East
#2021-27242

May 7, 2021

Chuck Swab Investments, LLC

The following description is based upon the information contained in Instrument Number: 2021-27242, all documents being filed with the Register of Deeds' Office.

A tract of land, located in the NE1/4 of Section 22, Township 9 North, Range 8 East of the 6th Principal Meridian, Lancaster County, Nebraska, more particularly described as follows:

All of the N1/2 of the NE1/4 of the said NE1/4.

Containing an area of 20.00 acres, and having a net area of 19.50 acres, more or less.

Nate C. Hartman

From: Todd A. Stutzman
Sent: Thursday, November 4, 2021 3:24 PM
To: Nate C. Hartman
Subject: Buildable lot

Nate,

7105 S 167th St. located in S22, T9, R8, Lot 21 is buildable.

Todd Stutzman
Plans Examiner II
402-441-7097
tstutzman@lincoln.ne.gov

Nate C. Hartman

From: John V. Berry
Sent: Thursday, November 4, 2021 1:49 PM
To: Nate C. Hartman
Subject: Sewage Disposal System PID# 22-22-200-005-000

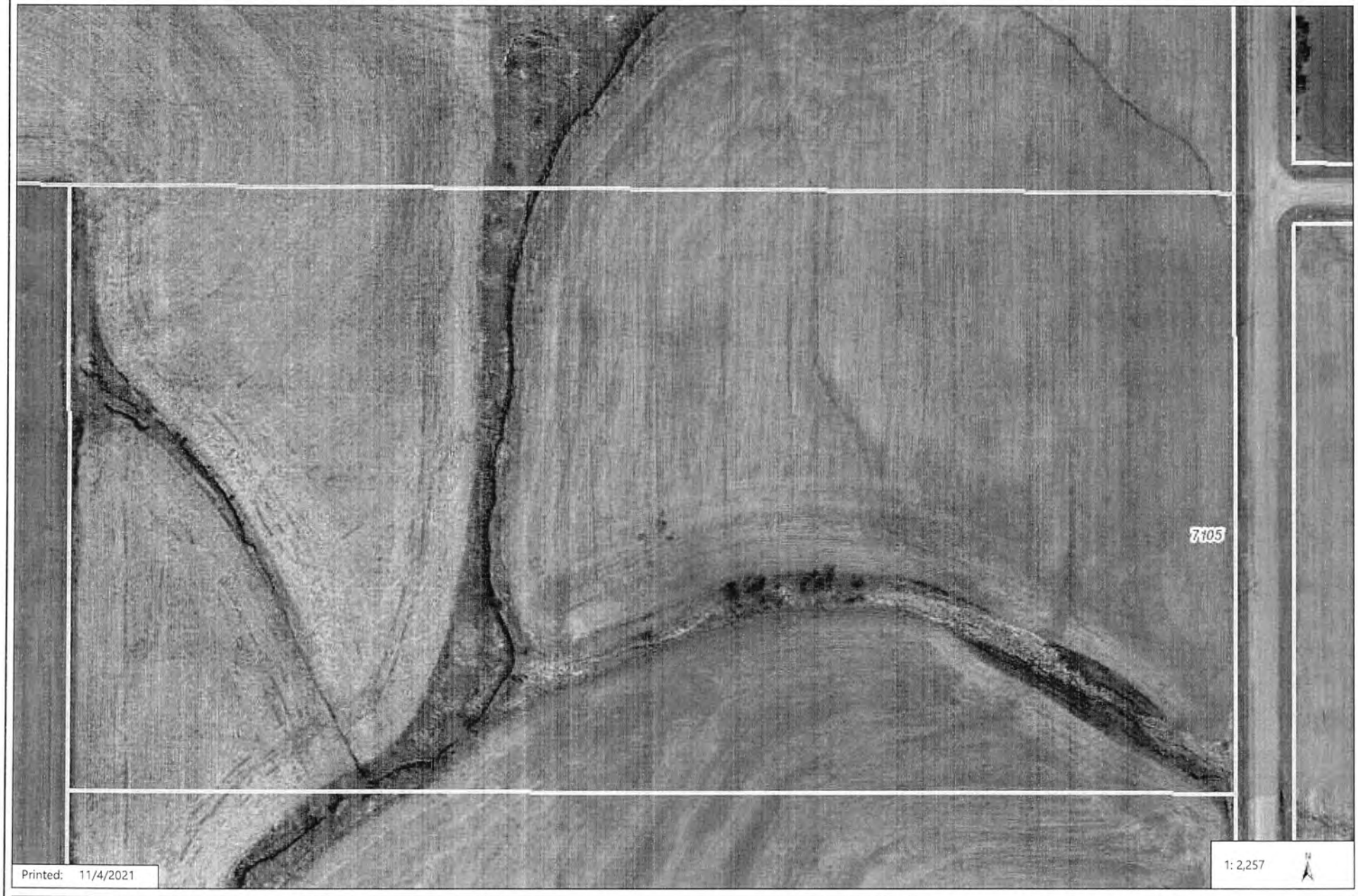
Nate,

Lancaster County Engineering Department indicates approval for a Sewage Disposal System for Lot 21, Irregular Tracts, located in the NE1/4 of Section 22, Township 9 North, Range 8 East, of the 6th Principal Meridian, Lancaster County, Nebraska
As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.

John V. Berry RLS #535
Lancaster County Surveyor
444 Cherrycreek Road, Bldg "C"
jberry@lancaster.ne.gov
Phone (402) 441-7681

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



Printed: 11/4/2021

1: 2,257

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