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

A

Permit Number HS002387

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* 13600 W lakeview Rd City Raymond, NE Zip 68428
(no rural route) ~~R10519~~ T12 R5

Legal Description Branched oak lakeside Acres lot 4

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

PID 06 19 101 004 000 *Approx. Address (If to be determined)

B. Owner

Name Mark Snyder Signature

Address 13600 W Lakeview Rd City/State/Zip Raymond Ne. 68428

Home Phone 636 542 2360 Work Phone 785 452 8457

C. Certified Installer

Name: Kevin Lewis Signature

Address 4810 W Claire Ave City/State/Zip lincoln Ne 68523

Work Phone 402 310 9160

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 10.95 MOL
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

1. Health Department
Site visits
Comments
Date rec'd
Date frwd
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

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 4-20-22 Amount Paid $456.00
Received By JBO Cash/Check No. 9727

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

Form A Updated: 4/15

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. HS002387

System Type: Lagoon

Situs: No Site Address Specified

Issued: 4/20/2022

Expires: 4/20/2023

Description: BRANCHED OAK LAKESIDE ACRES, Lot 4

Owner: SNYDER, MARK
13600 W LAKE VIEW RD
RAYMOND, NE 68428

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

KEVIN LEWIS
4810 W CLAIRE AVE
LINCOLN, NE 68523

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

SCANNED

A

Permit Number HS002387

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* 13600 W lakeview Rd City Raymond , NE Zip 68428
(no rural route) T10 S19 T12 R5

Legal Description Branched oak lakeside Acres lot 4
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 06 19 101 004 000 *Approx. Address (If to be determined)

B. Owner

Name Mark Snyder Signature
Address 13600 W Lakeview Rd City/State/Zip Raymond Ne. 68428
Home Phone 636 542 2360 Work Phone 785 452 8457

C. Certified Installer

Name: Kevin Lewis Signature
Address 4810 W Claire Ave City/State/Zip lincoln Ne 68523
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Date frwd 4/20/22
ACTION ☒ Approved ❑ Disapproved
Signature

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

Installation Final Written Approval
By
Date 9/19/22

Business Office Use Only
Date Received 4-20-22 Amount Paid $450.00
Received By JDE Cash/Check No. 9727

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

Form A Updated: 4/15

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

SEP 19 2022 **D** Exhibit 4

Permit Number:

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) 06 19 101 004 000

Owner: Mark Snyder Address 13600 W Lakeview rd, Raymond

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 66 ft.

B. Septic Tank

1. Material Poly
2. Capacity: 1500
3. Depth to top of tank, below unfinished grade: 8 in.
4. Distance to:
   Well 200 ft.
   Pressure line Over 100 ft
   Property Line 100 ft.
   Foundation 65+ ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 3 ft. 6"

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: 3
3. Length of each lateral (linear): ft. 130 ft 130 ft. 130 ft.
4. Drainfield size: 1755 sq. ft. (175 Rapid approved for 1755 sq ft)
5. Distance to:
   Well Over 200 ft.
   Pressure line " ft.
   Property line " ft.
   Depth of Groundwater Over 10

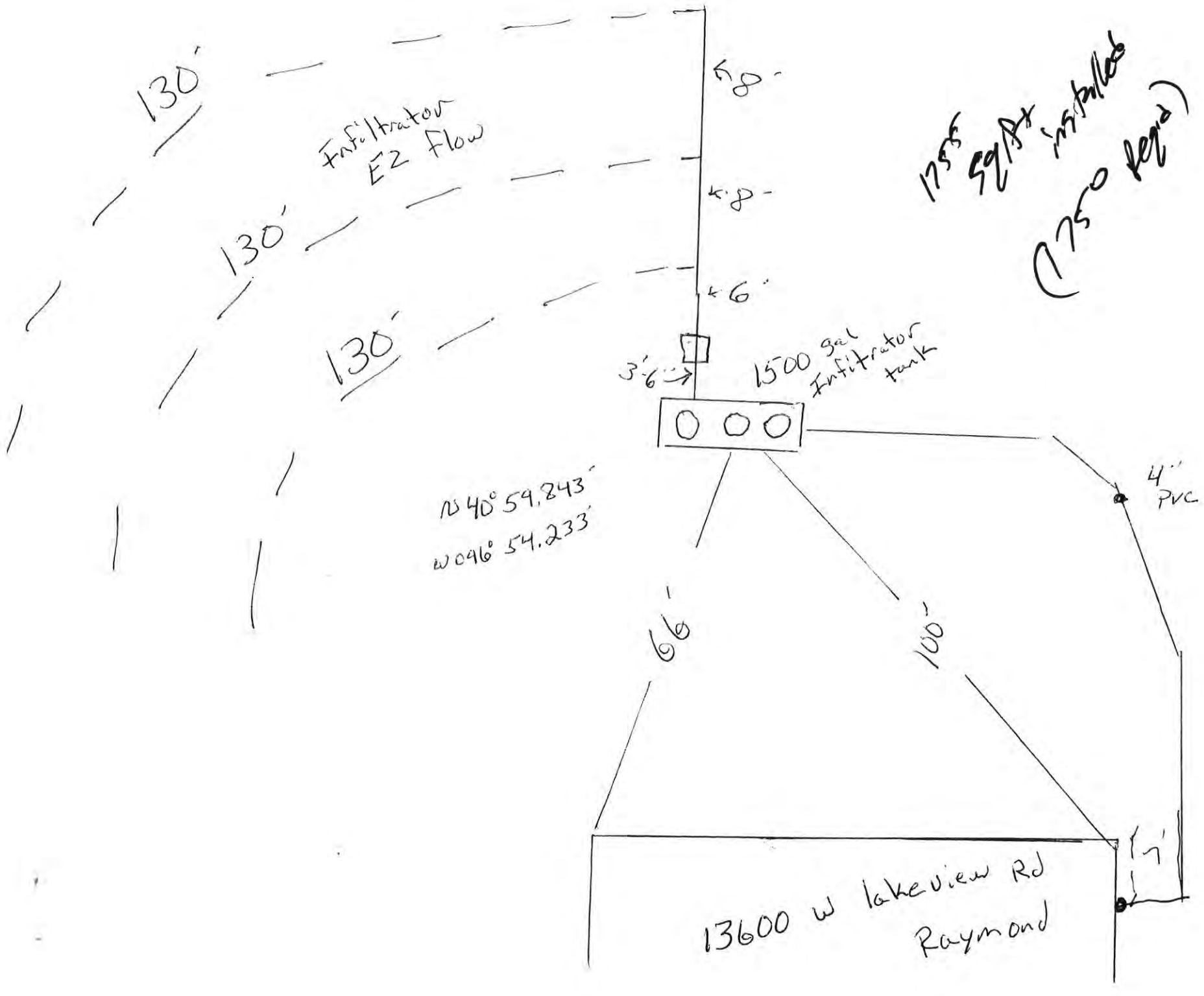
Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No

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: 9-19-22

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


130'
130'
130'
Infiltrator
EZ Flow
8'
8'
6'
3'6"
1500 gal
Infiltrator
tank
1755 sq ft installed
(1750 req'd)
N 40° 59.843'
W 096° 54.233'
4"
PVC
66'
100'
7'
13600 W lakeview Rd
Raymond

SOIL ABSORPTION TEST DATA REPORT

Location: Precinct _____ Section _____
Township _____ Range _____
1/4 Section _____

Owner: Carla Waldbaum (Home Real Estate)
Address: 13600 W. Lakeview Rd
carla.waldbaum@homerealestate.com

Property Dimensions: _____ acres

Soil Type: Silty Clay ____ Silty Clay Loam ____ Sandy Loam ____ Silty Loam ____ Clay Loam X Sandy Clay ____

Dates of Tests: 4/22/17 to 4/23/17 **Weather:** Precip. 0 Temp. 60's

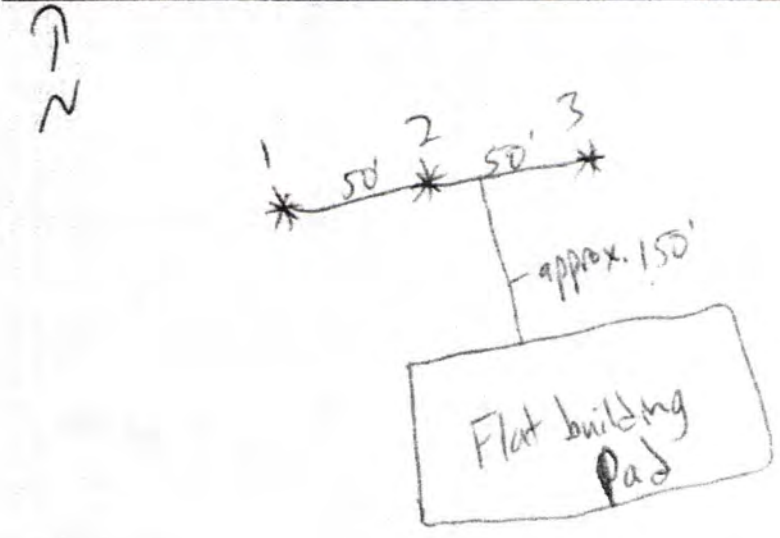
a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.
		Pre-Saturation Period				Percolation Readings					Results	
		Start		End		Start			End			Water
	Hole	Date	Time	Date	Time	Date	Time	Water	Time	Water	Elapsed	Level
Hole	Depth	(Mo.	(Hr.	(Mo.	(Hr.	(Mo.	(Hr.	Level	(Hr.	Level	Time	Drop
No.	(in.)	Day)	Min.)	Day)	Min.)	Day)	Min.)	(in.)	Min.)	(in.)	(Min.)	(in.)
1	36	4/22	10:30am	4/22	2:30pm	4/23	10:00am	6	10:30am	5½	30	½
2	36	4/22	10:30am	4/22	2:30pm	4/23	10:00am	6	10:30am	5½	30	½
3	36	4/22	10:30am	4/22	2:30pm	4/23	10:00am	6	10:30am	5½	30	½

Sum of Water Level Drops (in.) [Column m]: 1.5
Average of Water Level Drops (in.) [Column m]: .5
~~Inches per Minute:~~ _____
60 MPI

PERSON CONDUCTING TEST:
Name: Justyn L. Peterson
Address: 322 - 238th Rd
Milford, NE 68405
Phone: 402 - 641 - 6174
Signature: _____

Square Feet of Lateral per Bedroom: 350

SKETCH SHOWING HOLE LOCATION:



_____
Official's Signature