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

A

Permit Number HS002411

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* 9600 W Denton Rd (no rural route) City Denton, NE Zip 68339

Legal Description SW 1/4 SW 1/4 Section 15 Township 9N Range 5E Subdivison ____ Addition ____ Block ____ Lot 83

PID 03-15-300-024-000 *Approx. Address (If to be determined) ____

B. Owner

Name Leland Sullivan Signature Leland E Sullivan

Address 9600 W Denton Rd City/State/Zip Denton, NE 68339

Home Phone 402-429-9342 Work Phone ____

C. Certified Installer

Name: Terri Jakoubek Signature Terri L. Jakoubek

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 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 2 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 22.13
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 ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved
Date frwd ____ Signature ____
Comments ____

2. Supt. Bldg. Insp. or Village Clerk
Comments ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved
Date frwd ____ Signature ____

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

Installation Final Written Approval
By ____
Date ____

Business Office Use Only
Date Received 6-11-20 Amount Paid $450.00
Received By JKC Cash/Check No. 5040

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

Form A Updated: 2/18

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3131 "O" Street • Lincoln, NE 68510-1514
Phone: 402-441-8643

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

Salt Creek Reserve Lot 4

PLEASE PRINT OR TYPE

Onsite System Location

Address 9600 W Denton Rd (no rural route) City Denton NE, Zip 68339

Owner Leland Sullivan Address 9600 W Denton Rd, Denton, NE 68339

Date of Tests 4/27/22 to 4/28/22 Weather: Precipitation 0 Temperature 80°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					Results		
		Start		End		Start		Initial	End				
Hole No.	Hole Depth(in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	25	4/27	2:00p	4/28	11:30a	4/28	3:00p	6	4/28	3:30p	30	1-1/2	20
2	22	"	"	"	"	"	"	6	"	"	"	1-3/4	17
3	22	"	"	"	"	"	"	6	"	"	"	2	15
4								6					
5								6					
6								6					
7								6					
8								6					

Person Conducting Percolation Test

Name: Terri Jakoubek #1198

Phone: 402-783-2663

Address 13800 NW 70th St, Raymond, NE 68428

Sum of Percolation Rates: 52

Average of Rates: 17

Rate Used for Calculation: 17

Soil type (NRCS Maps/Other) Wymore Silty Clay Loam

Groundwater Depth >8'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

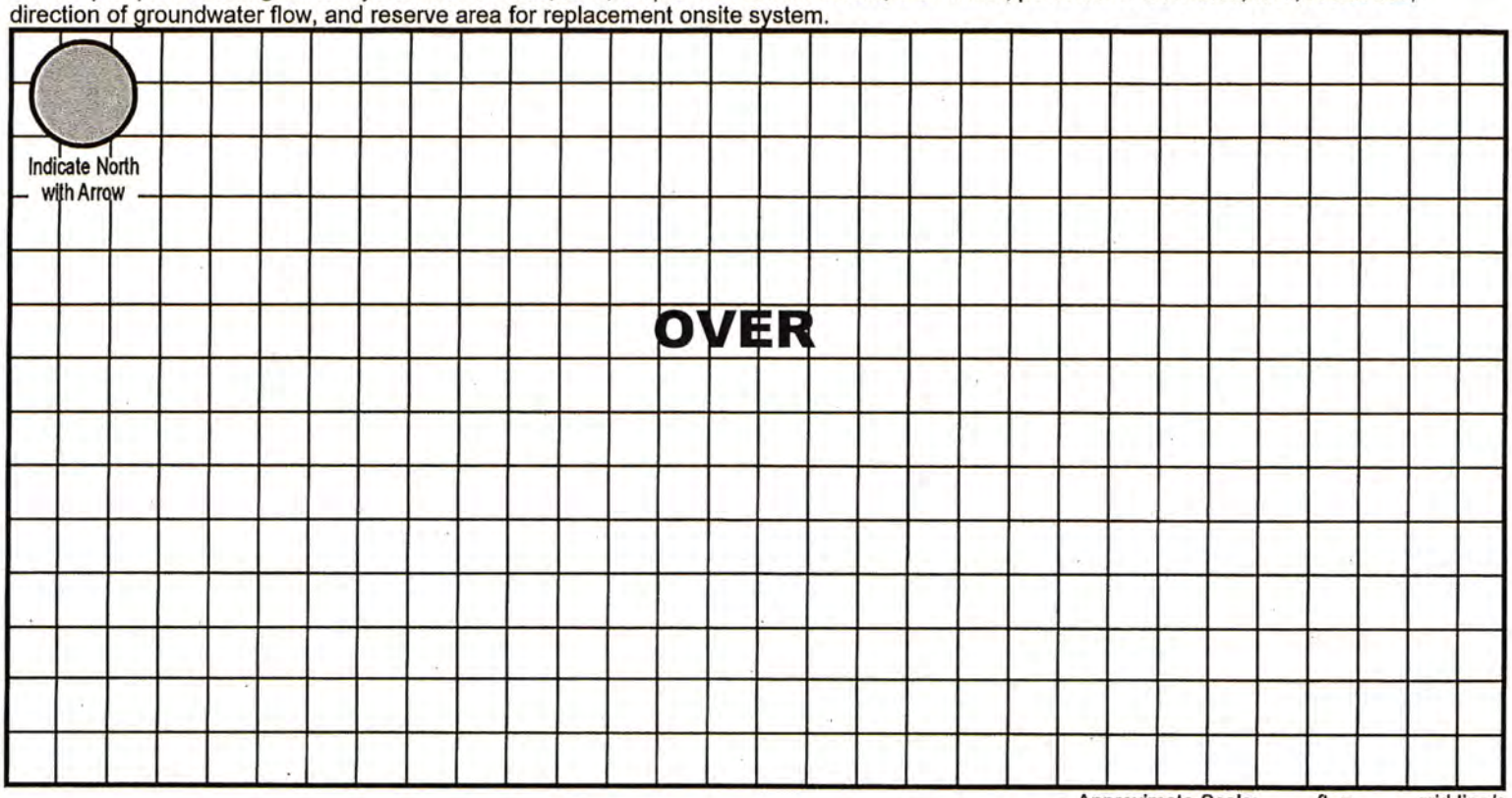
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

C

Permit Number

Onsite Wastewater Treatment System
Preliminary Plan Specification

Draw a plot plan showing onsite system sewer lines, tank, drop or distribution boxes, drainfields, percolation test holes, well, residence, direction of groundwater flow, and reserve area for replacement onsite system.



Approximate Scale: ____ft. = ____grid line/s

A. Onsite System Location

Address (no rural route) 9600 W Denton Rd City Denton NE, Zip 683391

B. Proposed Septic Tank/s

Septic Tank Cap. 1000 gals Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____ ☐ Lagoon (Max. Seepage 1/8"/day)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☑ Lagoon

D. Drainfield Absorption System

Percolation Rate 17 (min/inch = mpi) No. of Bedrooms 2 Soil Type Wymore SCL Land Slope ____ %

☑ Trench ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) Total square feet of drainfield 720 Sq. Ft.

Total length of laterals 160' Type of Distribution: ☐ Perforated Pipe ☐ Half-Round ☐ Chambers ☑ Other EZFlow 1203H

No. of Absorption Trenches 2 Width 38" No. of Drop Boxes 1 Distribution Box _____

No. of Absorption Beds _____ Width _____ No. of Distribution Lines per Bed _____

Installer Neil L. Jahnke Date: 5/12/22

9600 W Denton Rd, Denton, NE 68339

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



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.

Janet O'Neal

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Wednesday, June 1, 2022 11:03 AM
To: Nate C. Hartman
Cc: Janet O'Neal
Subject: Sullivan Septic Permit
Attachments: Sullivan Septic Permit.pdf

Hi Nate, going to be replacing a septic system for Lee Sullivan. He does have a 1000g tank we may be able to use but permitting with a new tank in case we need it.

Hi Janet, can you call for CC payment at your convenience. (I will be in a meeting from 11:30 to 12:15)

Thanks,

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-890-3870 (Mobile)
jakoubek63@windstream.net

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. HS002411

System Type: Standard

Situs: No Site Address Specified

Issued: 6/6/2022

Expires: 6/6/2023

Description: S15, T9, R5, 6th Principal Meridian, LOT 83 SW

Owner: SULLIVAN, LELAND & CATHERINE
9600 W DENTON RD
DENTON, NE 68339

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

TERRI JAKOUBEK
13800 NW 70TH ST
RAYMOND, NE 68428

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

A

SCANNED

Permit Number HS002411

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* 9600 W Denton Rd (no rural route) City Denton, NE Zip 68339

Legal Description SW 1/4 SW 1/4 Section 15 Township 9N Range 5E Subdivison ____ Addition ____ Block ____ Lot 83

PID 03-15-300-024-000 *Approx. Address (If to be determined) ____

B. Owner

Name Leland Sullivan Signature Leland E. Sullivan

Address 9600 W Denton Rd City/State/Zip Denton, NE 68339

Home Phone 402-429-9342 Work Phone ____

C. Certified Installer

Name: Terri Jakoubek Signature Terri L. Jakoubek

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 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 2 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 22.13
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 6/15/22 DS
Comments ____
Date rec'd 6/6/22
Date frwd 6/6/22
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 6/23/22

Business Office Use Only
Date Received 6-15-22 Amount Paid $450.00
Received By JAE Cash/Check No. 5040

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

Form A Updated: 2/18

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

Exhibit 5

Permit Number: HS002411

Onsite Wastewater Treatment System

Inspection Sheet

Date 6/23/22 Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) _____ 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 720 Sq. Ft. Tank Size 1,000 gals

Total length of laterals 160' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ flow

No. of Absorption Laterals 2 Width 4.5 facts 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:

Inspections prior to Final Approval
Initial DS Date 6/15/22

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Mrsny

Date 6/23/22

Field Note Drawing (See Reverse Side):

USE

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

D

Permit Number: HS002411

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 = 03-15-300-024-000

Address or Legal Description or Parcel Identification Number (PID) 9600 W Denton Rd, Denton, NE 683389

Owner: Leland Sullivan Address 9600 W Denton Rd, Denton, NE 683389

A. Wastewater Piping (New)

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 27 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1,000 gallon
3. Depth to top of tank, below unfinished grade: 30-36 in.
4. Distance to:
   Well 100 ft. +
   Pressure line N/A ft +
   Property Line 100 ft. +
   Foundation 80 ft. +

C Distribution Box or Drop Box

Distance and Direction from septic tank: 29 ft. NE
(Drainfield Control Valve)

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless:
   EZFlow 1203H Bundles
2. Number of Laterals: 2 Depth: 36" - 40"
3. Length of each lateral (linear): ft. 80 ft. 80 ft. _____ ft. _____
4. Drainfield size: 720 sq. ft.
5. Distance to:
   Well 100 ft. +
   Pressure line N/A ft. +
   Property line 60 ft. +
   Depth of Groundwater >10'

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☑ Yes (Partially) ☐ 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.

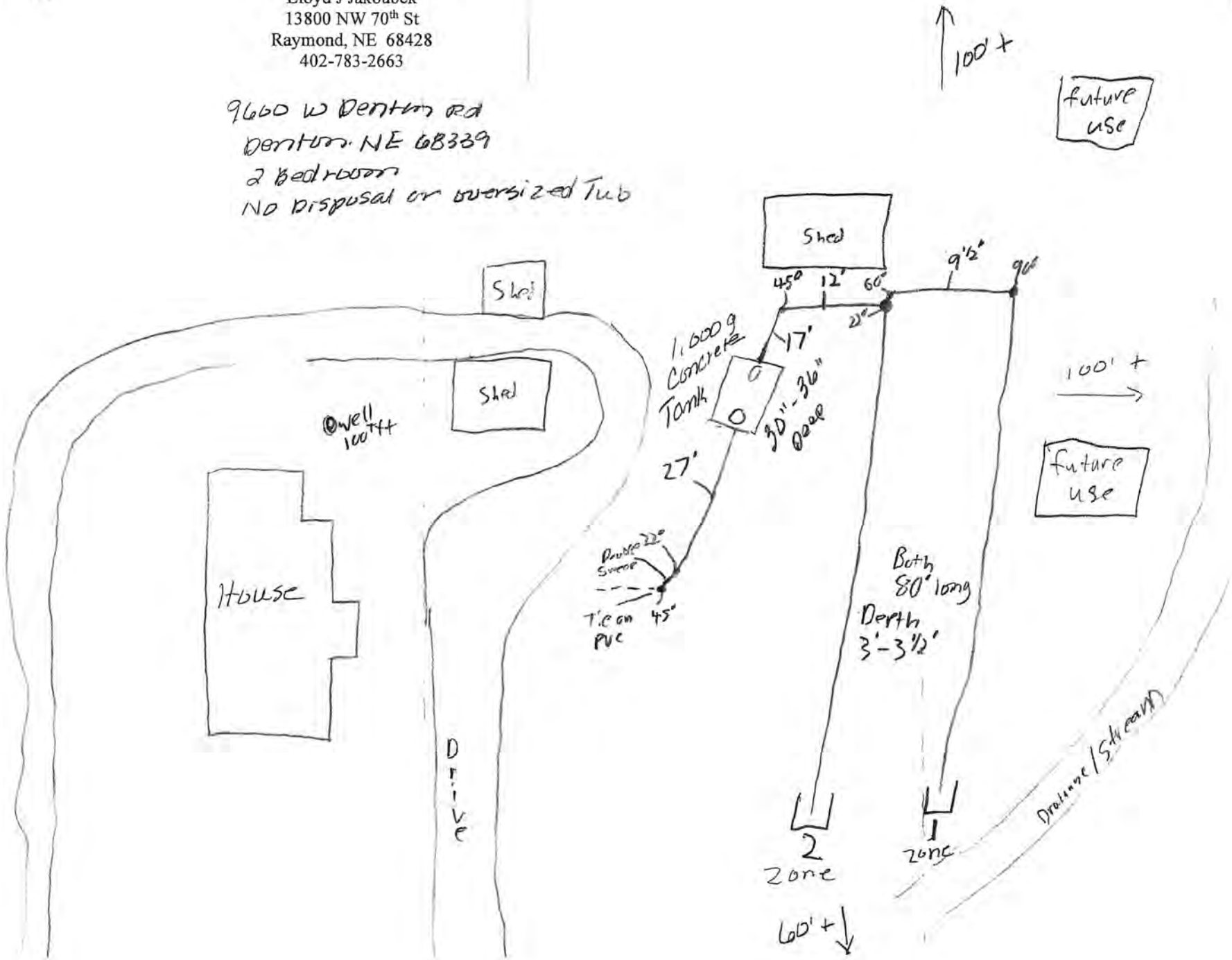
Certified Professional Signature: Neil L. Jakobsen Date: 6/15/22

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

6/15/22

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

9660 W Denton Rd
Denton. NE 68339
2 Bedroom
No Disposal or oversized Tub



Nate C. Hartman

From:	Terri Jakoubek <jakoubek63@windstream.net>
Sent:	Wednesday, June 22, 2022 5:49 PM
To:	Nate C. Hartman
Cc:	Doug R. Smith
Subject:	Re: 9600 W Denton Rd D-Sheet
Attachments:	9600 W Denton Rd D-Sheet.pdf

Had a couple errors on the 1st one I sent (# of trenches and square footage), sorry!!

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-890-3870 (Mobile)
jakoubek63@windstream.net

From: "Terri Jakoubek" <jakoubek63@windstream.net>
To: "Nate Hartman" <nhartman@lincoln.ne.gov>
Cc: "Doug Smith" <drsmith@lincoln.ne.gov>
Sent: Wednesday, June 22, 2022 5:11:29 PM
Subject: 9600 W Denton Rd D-Sheet

HS002411 is attached.

Thanks,

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-890-3870 (Mobile)
jakoubek63@windstream.net

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

D

Permit Number: HS002411

Onsite Wastewater Treatment System
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(Drainfield Control Valve)

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☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
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Certified Professional Signature: Neil L Jakobsen Date: 6/15/22

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

6/15/22

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

9660 W Denton Rd
Denton. NE 68339
2 Bedroom
No Disposal on oversized Tub

