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

$450.00
A

Permit Number
HS 002447

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* 17359 Birdsong PL (no rural route) City Hickman, NE Zip 68372

Legal Description SE 1/4 23 8 7 Cedar Woods Estates 3
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 15-23-401-003-000 *Approx. Address (If to be determined)

B. Owner

Name Tyler Hernandez Signature

Address 6931 LaCroix Dr. City/State/Zip Lincoln, NE 68526

Home Phone 402-310-4335 Work Phone

C. Certified Installer

Name: Brandon Selacek SE trenching & Excavating Signature

Address 11185 East State Hwy 41 City/State/Zip 11185 E State Hwy 41

Work Phone ~~Adams, NE 68301~~ 402 9888425

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 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 4.52
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 1-28-22 Amount Paid $450.00
Received By JAD Cash/Check No. 2211

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

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

PLEASE PRINT OR TYPE

Onsite System Location

Address 17359 Birdsong Pl (no rural route) City Roca NE Zip 68372

Owner Tyler Hernandez Address 6931 Lacroix Drive Lincoln, NE 68526

Date of Tests 7-28-21 to 7-29-21 Weather: Precipitation 0" Temperature 95°

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			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"	7-28	12pm	7-29	1pm	7-29	1pm	6	7-29	1:30	30	1/4"	120 mpi
2	"	"	"	"	"	"	1:01	6	"	1:31	30	0"	N/A
3	"	"	"	"	"	"	1:02	6	"	1:32	30	0"	N/A
4	"	"	"	"	"	"	1:03	6	"	1:33	30	1/4"	120 mpi
5	"	"	"	"	"	"	1:04	6	"	1:34	30	1/4"	120 mpi
6	"	"	"	"	"	"	1:05	6	"	1:35	30	1/4"	120 mpi
7	"	"	"	"	"	"	1:06	6	"	1:36	30	0"	N/A
8	"	"	"	"	"	"	1:07	6	"	1:37	30	1/4"	120 mpi

Person Conducting Percolation Test

Name: Brandon Sedlacek
Phone: 402-988-8425
Address 11185 E State Hwy 41
Adams, NE 68301

Soil type (NRCS Maps/Other)
Groundwater Depth 7 9'

Sum of Percolation Rates:
Average of Rates: N/A
Rate Used for Calculation:

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 (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS002447

System Type: Lagoon

Situs: No Site Address Specified

Issued: 7/29/2022

Expires: 7/29/2023

Description: CEDAR WOODS ESTATES ADDITION, Lot 3

Owner: HERNANDEZ, TYLER & HANNAH
6931 LACROIX DR
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

BRANDON SEDLACEK
11185 E STATE 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

SCANNED

$450.00

A

Permit Number
HS 002447

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* 17359 Birdsong PL City Hickman, NE Zip 68372
(no rural route)

Legal Description SE 1/4 23 8 7 Cedar Woods Estates 3
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 15-23-401-003-000 *Approx. Address (If to be determined)

B. Owner

Name Tyler Hernandez Signature
Address 6931 LaCroix Dr. City/State/Zip Lincoln, NE 68526
Home Phone 402-310-4335 Work Phone

C. Certified Installer

Name: Brandon Selacek SE trenching & Excavating Signature Email
Address 11185 East State Hwy 41 City/State/Zip 11185 E State Hwy 41
Work Phone Adams, NE 68301 402 9888425

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 4 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 4.52
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 11/4/22 DC
Comments
Date rec'd 7/29/22
Date frwd 7/29/22
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 11/28/22

Business Office Use Only
Date Received 7-28-22 Amount Paid $450.00
Received By JAD Cash/Check No. 2211

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

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

Exhibit 5

Permit Number: H5002447

Onsite Wastewater Treatment System

Inspection Sheet

Date 11/28/2r Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 17359 Bird Song Pl. 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 1,800 Sq. Ft. Tank Size 2,000 gals

Total length of laterals 400' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E2 flow

_____

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

Leveling Method Used _____

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 _____

Lateral #1 N/A Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial D.C. Date 11/14/2r

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Mur

Date 11/28/2r

Field Note Drawing (See Reverse Side):

NOV 17 2022

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

D

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) 17359 Birdsong Pl. Rock, NE 68430

Owner: Tyler Hernandez Address 6931 Lacroix Dr. Lincoln, NE 68526

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 65 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 2000
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well N/A ft.
   Pressure line 80+ ft
   Property Line 160 ft.
   Foundation 65 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 5 ft. South

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: EZ-Flow 36"
2. Number of Laterals: 3
3. Length of each lataral (linear): ft. 140 ft. 140 ft. 120 ft.
4. Drainfield size: 1800 sq. ft.
5. Distance to:
   Well N/A ft.
   Pressure line 80+ ft.
   Property line 60 ft.
   Depth of Groundwater 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: Beth Dale Date: 11-15-22

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

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

PLEASE PRINT OR TYPE

Onsite System Location

Address 17359 Birdsong Pl. (no rural route) City Roca NE. Zip 68430

Owner Tyler Hernandez Address 6931 Lacroix Dr. Lincoln, NE 68526

Date of Tests 11-11-22 to 11-12-22 Weather: Precipitation 0" Temperature 35°

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	Water Level Drop G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Last 30 mins of 4 hr or last 10 mins of 1 hr					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	32"	11-11	2pm	11-12	3pm	11-12	3pm	6	11-12	3:30pm	30	1/2"	60 mpi
2	32"							6				5/8"	48 mpi
3	32"							6				1/2"	60 mpi
4	32"							6				5/8"	48 mpi
5	36"							6				1/2"	60 mpi
6	36"							6				1/2"	60 mpi
								6					
								6					

Person Conducting Percolation Test

Name: Braedon Sedlacek
Phone: 402-988-8925
Address 11185 E State Hwy 41
Adams, NE 68301
Soil type (NRCS Maps/Other)
Groundwater Depth 10+

Sum of Percolation Rates: 336
Average of Rates: 56 mpi
Rate Used for Calculation: 60 mpi

DO NOT WRITE BELOW THIS LINE

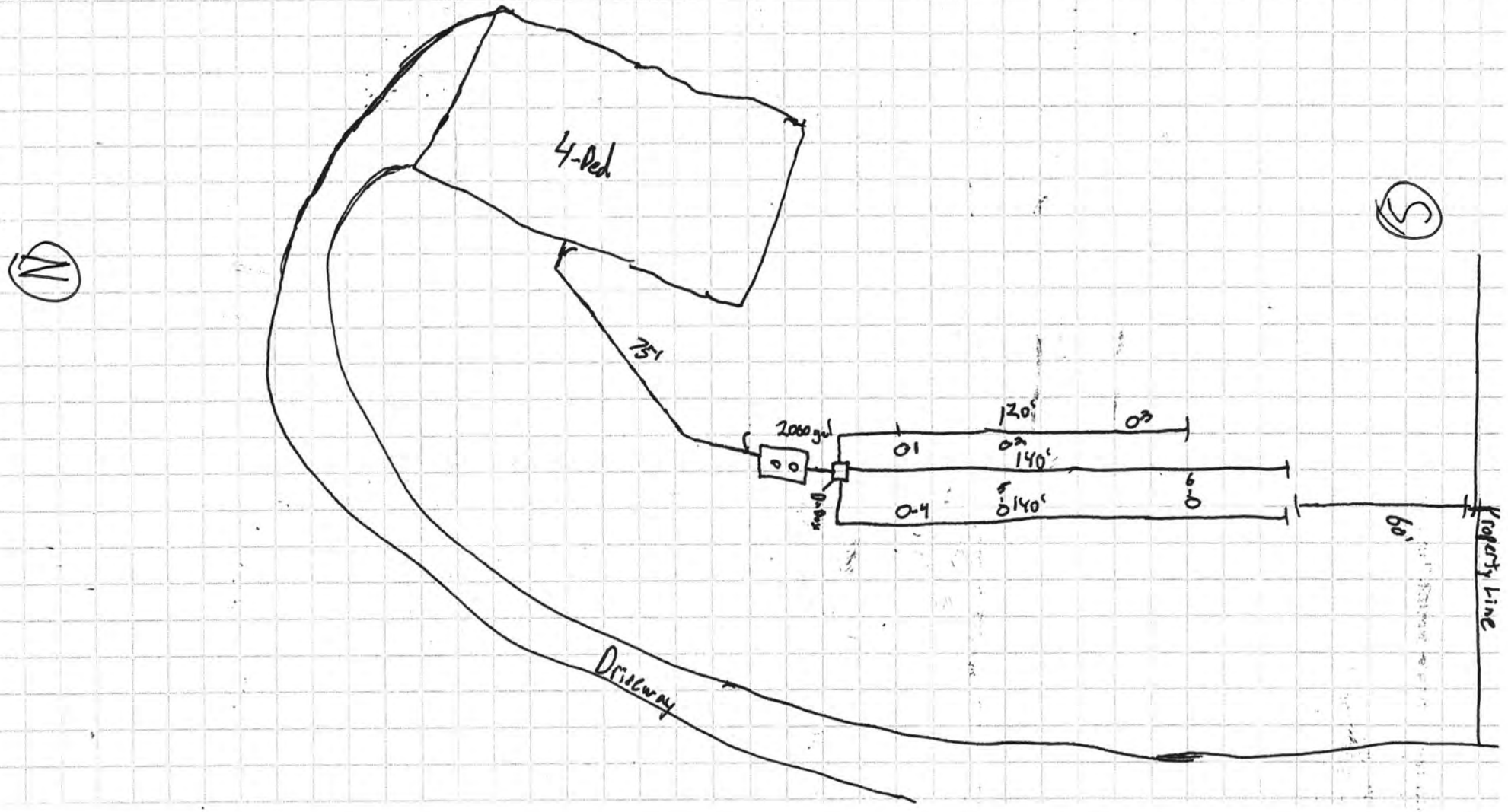
Reviewing Action

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

Signature of Reviewing Official Date

Onsite Form B 2018

Tyler Hernandez
17359 Birdsong Pl.
Roca, NE 68430



Nate C. Hartman

From: Brandon Sedlacek <southeast.sewer@yahoo.com>
Sent: Friday, July 29, 2022 11:41 AM
To: Nate C. Hartman
Subject: 17359 Birdsong Pl

Nate,

We will be doing the lagoon at 17359 Birdsong Pl
Roca, NE.

Thanks,
Brandon Sedlacek
Southeast Trenching and Excavating Inc.

Sent from Yahoo Mail for iPhone

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 17359 Birdsong Pl. (no rural route) City Hickman NE, Zip 68372

Owner Tyler Hernandez Address

Date of Tests 8/2/22 to 8/3/22 Weather: Precipitation 0 Temperature 96*

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		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	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	0	Fail
2	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/8	Fail
3	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/2	60
4	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/2	60
5	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/8	Fail
6	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/2	60
7	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/2	60
8	36	8/2	2/37	8/3	2/37	8/3	2/37	6	8/3	3/07	30	1/8	Fail

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402-432-1082
Address 3300 N 71st Street
Lincoln NE, 68507

Sum of Percolation Rates: 960
Average of Rates: 60
Rate Used for Calculation: 60 MPI

Soil type (NRCS Maps/Other) 7684 - Wymore
Groundwater Depth >10'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date


N
Est. Drive
Building Foundation
S
12" Below Grade
Pumped Basement or Exterior Lift Station Required
20' Min. Setback
Tank
Proposed Septic Absorption Area
Orange area must be protected from heavy equipment during building construction
3' Setback
Water Service
A
B
C
D
E
F
G
H