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

A

Permit Number HS002478

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* 10720 YANKEE HILL RD (no rural route) City LINCOLN, NE Zip 68526

Legal Description 24 9 7 6TH PRINCIPAL MERIDIAN 3 & SE

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

PID 16-24-400-009-000 *Approx. Address (If to be determined)

B. Owner

c/o BARTLING, HINKLE PC ATTY

Name RODNEY HORNBY ESTATE Signature

Address 5801 S 58TH ST APT B City/State/Zip LINCOLN, NE 68516

Home Phone Work Phone 402-421-1600

C. Certified Installer

Name: JAIME RUBIK Signature

Address 105 10 WEST ST P.O. BOX 191 City/State/Zip HICKMAN, NE 68372

Work Phone 402-475-2462

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 10.05

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 10/21/20 Amount Paid $460.00

Received By JMO Cash/Check No. 10214

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. HS002478

System Type: Lagoon

Situs: No Site Address Specified

Issued: 10/24/2022

Expires: 10/24/2023

Description: S24, T9, R7, 6th Principal Meridian, LOT 36 SE

Owner: HORNBY, RODNEY SCOTT
TESTAMENTARY TRUST
5801 S 58 ST STE B
LINCOLN, NE 68516

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

JAIME KUBIK
105 LOCUST ST, PO BOX 191
HICKMAN, NE 68372

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

SCANNED

A

Permit Number
HS002478

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* 10720 YANKEE HILL RD City LINCOLN, NE Zip 68520
(no rural route)

Legal Description 24 9 7 6TH PRINCIPAL MERIDIAN 3 & SE
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 16-24-400-009-006 *Approx. Address (If to be determined)

B. Owner

c/o BARTLING, HINKLE PC ATTY

Name RODNEY HORNBY ESTATE Signature

Address 5801 S 58TH ST APT B City/State/Zip LINCOLN, NE 68512

Home Phone Work Phone 402-421-1600

C. Certified Installer

Name: JAIME KUBIK Signature

Address 105 LOCUST ST P.O. BOX 91 City/State/Zip HICKMAN, NE 68372

Work Phone 402-475-2262

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 Garbage Grinder? ☒ Yes ☐ No Total Acres 10.05

☐ 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 10/28/22 Liner + lagoon
Comments - Needs fence
Date rec'd 10/21/22
Date frwd 10/24/22
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 4/8/22

Business Office Use Only
Date Received 10/21/22 Amount Paid $460.00
Received By JMC Cash/Check No. 10214

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

Exhibit 6

Permit Number: HS002478

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 11/8/22 Legal Description _____
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 10720 Yankee Hill City _____

Owner _____ Address _____

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Repair

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): _____

Lagoon constructed so not to receive surface water	Yes X No ___
Lagoon floor is level	Yes X No ___
Lagoon is equipped with a depth gage/concrete slab	Yes X No ___
Influent line is at least 4 inches and slopes no less than 1/8 inch	
Clean outs located every 75 feet and one located 1 foot about highest water level	Yes X No ___
Inside slope not steeper than three horizontal to one vertical	Yes X No ___
Minimum width of the top of the dike shall be 4 feet	Yes X No ___
Fence installed	Yes X No ___

Top of the Dike 70 Bottom of Lagoon 34 Design Flow 450 gpd

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Surface Water distance from Water Mark	Private Drinking Water Wells	Public Drinking Water Supply Wells		All Other Water Wells	Property Lines	Trees and Brush	Neighbor's Foundation		All Other Setbacks
50 ft ☐	100 ft ☐	Non-Community	100ft ☐	100ft ☐	50ft ☐	50ft ☐	Class 1	200ft ☐	☐
		Community	* ☐				Class 2	200ft ☐	
							Class 3	100ft ☐	

*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: NA

Dike North side

Comments:

Inspections prior to Final Approval
Initial DC Date 10/28/22

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Huser
Date 10/28/22

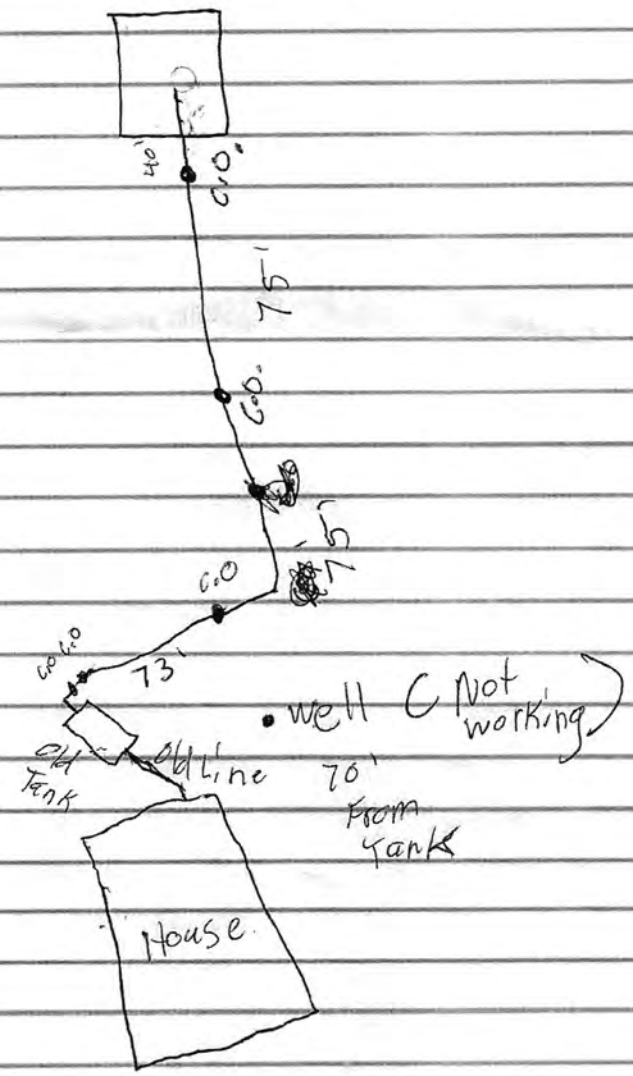
10720 Yankee Hill rd

ON Rural water

N
W + E
S

4" Pipe

278'
+ 7
5
2
292' 4"



Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 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) 16-24-400-009-000

Owner: ROD HORNBY TESTAMENTARY TRUST Address 10720 YANKEE HILL RD LINCOLN 68521

A. Wastewater Piping

1. Material: SCH40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 20 ft.

B. Septic Tank

1. Material EXISTING TANK
2. Capacity: _____
3. Depth to top of tank, below unfinished grade: _____ in.
4. Distance to:
   Well NA ft.
   Pressure line +50 ft
   Property Line +50 ft.
   Foundation 210 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

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: 10/31/2022

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

Doug R. Smith

From: Doug R. Smith
Sent: Monday, October 31, 2022 11:50 AM
To: Justine Sintek
Cc: Doug R. Smith
Subject: 10720 Yankee Hill

Justine,
The property located at 10720 Yankee Hill is excepted/exempt from the requirement for Property Transfer Inspection and Determination. The exception/exemption is based on the property being served by Lancaster Rural Water as the water supply for the dwelling and on the installation of a new onsite wastewater treatment system. Lancaster Rural Water is considered a community system and not subject to Property Transfer review. New onsite wastewater treatment system installations are exempt from the Property Transfer inspection requirement for a period of 3 years from the time of construction. You may use this email for your records. Please forward this email to other parties (buyer, realtor, etc.) as needed. Call or email if you have any questions. Thanks!

Doug R. Smith

From: Jason Kubik <southwicksewer@yahoo.com>
Sent: Monday, October 31, 2022 10:11 AM
To: Doug R. Smith
Subject: 10720 Yankee Hill Road

Doug,

You and I have talked several times about this place. They are closing tomorrow. You waived the inspection since we were installing a new lagoon. The wells were not in use and they work off rural water.

I got realtors and lawyers asking me when they will get the transfer letter -- no rush....but rush.

We have been dealing with Karen from Bartling and Hinkle Law offices. They are closing tomorrow -- using Charter Title and Justine is the closer.

Figured all that info would be helpful for you!

Jaime

Jason and Jaime Kubik

Southwick Liquid Waste
Office: 402-475-2462
www.southwickliquidwaste.com

Karen
421-1600