HS0025DD

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☐ALTER ☒REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 5501 BENNET RD

   Legal Description of Property: Township: 8 Range: 7 Section: 9

   Block ____ Lot 2 NW SubDivision 6TH PRINCIPAL MERIDIAN Add: ____

   ***Parcel ID** 15-09-100-004-000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: ____)
   Number of bedrooms 3 Does the system have a: ☐ Garbage Grinder ☐ Large Capacity Tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** ADD TANK & LATERAL FOR NEW ADDITION ON HOUSE 1500 GALLON TANK 1050 sq ft LATERAL

5. **Current Type of Lateral-** ____ **Current Linear Ft. Of Lateral -** ____

   Current Tank Gallonage- ____

6. Print Name JAIME KUBIK Address [redacted] 105 LOCUST STREET Phone: 402-475-2462

Applicant Signature: Jaime Kubik

Please contact LLCHD for the current permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received ____/____/____ REVIEW: ☐ Approved ☐ Disapproved By: ____

Comments (if any): ____

Site visits
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date ____/____/____ By ____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only
Received: Date: 1/3/23 Amount $245.00 Check No. CCD214 Initials LC

Revised 4/8/13

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
ALTERATION PERMIT
No. HS002500

System Type: Standard

Situs: No Site Address Specified

Issued: 1/4/2023

Expires: 1/4/2024

Description: S9, T8, R7, 6th Principal Meridian, LOT 2 NW

Owner: PLATT, PATTY JO & DOUGLAS J
5801 BENNET RD
ROCA, NE 68430

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Health Director

Dear Applicant:

The above document is your permit to alter an existing On-site Waste Water System at the location listed. Please contact this office once the alteration is complete to obtain final approval before use.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Health Director

SOUTHWICK SEWER & DRAIN
JAMIE KUBIK
105 LOCUST ST
HICKMAN, NE 68372

SCANNED

H5002500

Application to Alter or Repair an Onsite Wastewater Treatment System

The applicant is applying for a permit to: ☐ALTER ☒REPAIR an existing Onsite Wastewater Treatment System, and agrees to comply with LMC 24.38 or County Resolution 02-0030.

1. **Street Address (No Rural Route):** 5801 BENNET Rd

   Legal Description of Property: Township: 8 Range: 7 Section: 9

   Block ____ Lot 2 NW SubDivsion 6TH PRINCIPAL MERIDIAN Add: ____

   ***Parcel ID** 15-09-100-004-000 (i.e. 99-99-999-999-999)

2. **Property use:** ☒ Residential ☐ Commercial ☐ Other use (Describe: ____)

   Number of bedrooms 3 (4 as per Bid) Does the system have a: ☐ Garbage Grinder ☐ Large Capacity Tub

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration or repair:** ADD TANK & LATERAL FOR NEW ADDITION ON HOUSE 1500 GALLON TANK 1050 sq ft LATERAL

5. **Current Type of Lateral-** ____ **Current Linear Ft. Of Lateral -** ____

   Current Tank Gallonage- ____

6. Print Name JAIME KUBIK Address [redacted] 105 LOCUST STREET Phone: 402-475-2462

   Applicant Signature: Jaime Kubik

Please contact LLCHD for the current permit fee for this application

Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

☐Municipal Code 24.38 ☐County Resolution Number 02-30

Date received 1/4/23 REVIEW: ☒ Approved ☐ Disapproved By: [signature]

Comments (if any): ____

Site visits

Date 5/11/23 By DS

Date ___/___/___ By ____

Installation final written approval

Date 5/12/23 By [signature]

Return application to:

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: (402) 441-8643

Business Office Use Only

Received: Date: 1/3/23 Amount $245.00 Check No. CC0214 Initials LC

Revised 4/8/13

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

Exhibit 5

Permit Number: H5002500

Onsite Wastewater Treatment System

Inspection Sheet

Date 5/12/23 Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 5801 Bennet 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 1,080 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 240' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ Flow

No. of Absorption Laterals 2 Width 4.5 factor 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 N.A.

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial DS Date 5/11/23

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Rowe

Date 5/12/23

Field Note Drawing (See Reverse Side):

Updated 4/15

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1317-C

FOOD ESTABLISHMENT OPERATOR — November 15, 1979

TYPE OF PERMIT — THIS PERMIT EXPIRES

Harry Berhens %Pottyco Plumbing, 1520 Pioneers, Lincoln, NE 68502

ISSUED TO — ADDRESS

T8N, R7E, Section NW¼ of 9

LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00

ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH

ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

A

FILING FEE: $ 30.00

FILE NO. 1317-C

DATE: may 11, 1978

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 8N ; Range 7E ; Section NW¼ 9 ; Block _____ : Lot 2 I.T. : Addition _____
   Street Address SEE ATTACHED

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2. Describe _____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: N/A ft.

Harry Berkens
Signature of Applicant (Owner or Lessee)
mail to 1520 Pioneer Blvd.
RFD. Roca NE.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/15/78. Date Frwd. 5/15/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5/16/78. Date Frwd. 5/16/78. ACTION: Approved ☑ Disapproved ☐ Signature: Harry R. Sherwood

3. City or County Engineer: Date Rec'd. 5-15-78. Date Frwd. 5-15-78. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10-13-78 by: _____
Date: _____ by: _____
Date: _____ by: _____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10-13-78 By: James Tidwell

County Treasurer's Office
Lancaster County
Lincoln, Nebraska

MISCELLANEOUS RECEIPT

No. 5068

Date of Receipt: 5-16-78

Received of: Lanc-Lanc Health Dept

Amount

For		
	996-C	30 00
	1317-C	30 00
Fund Genl	**TOTAL**	60 00

FRANK GOLDEN
COUNTY TREASURER

By Weber

ORIGINAL

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

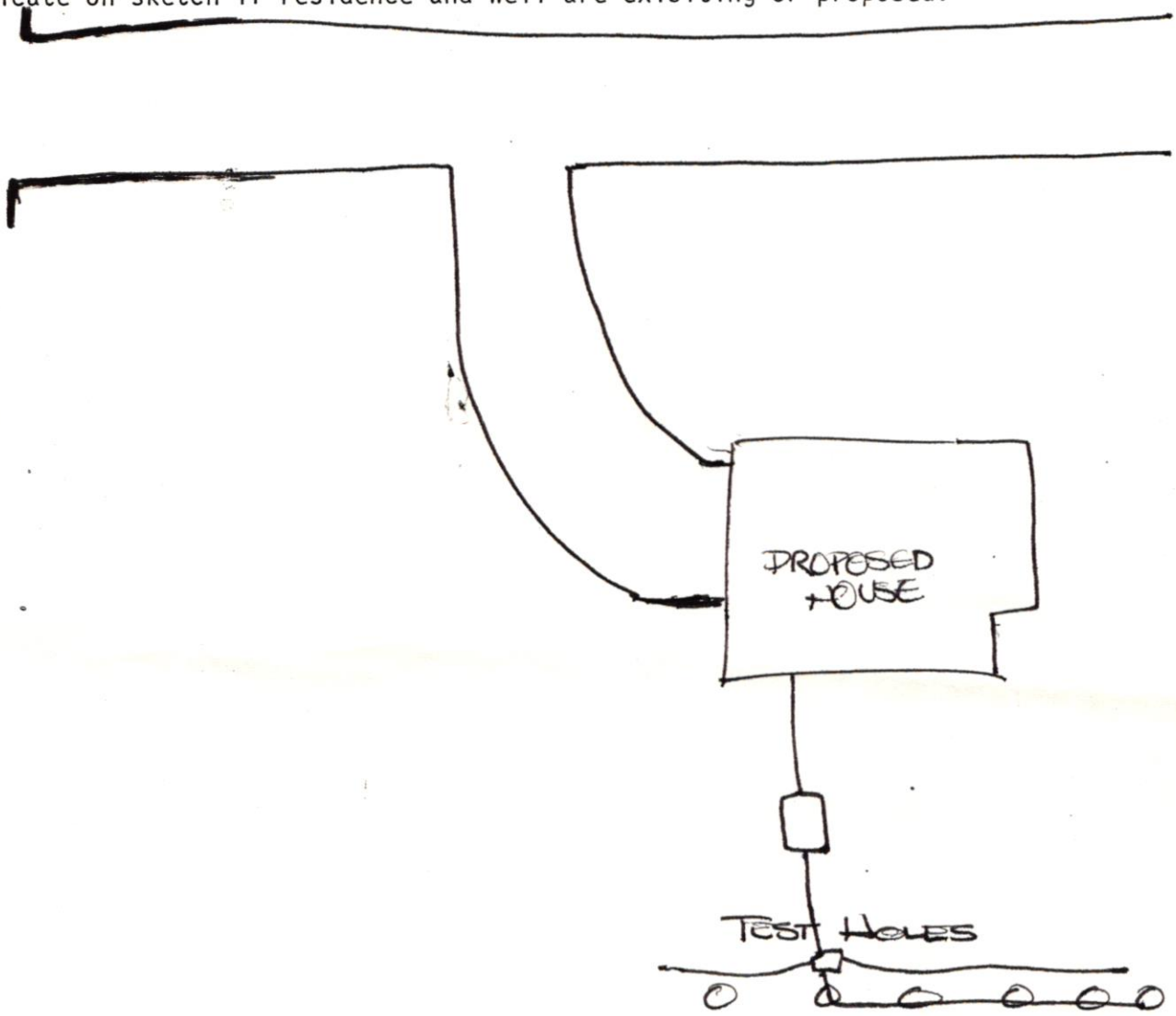
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska . 68502
Phone: 474-1541

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. 1317-C

Indicate on sketch if residence and well are exisiting or proposed.



REVIEWING ACTION

Remarks: _____

Date: May 15, 1978

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals ~~[illegible]~~ 165 ft.
3. With a Trench Width of 36 in.
4. Total Area of Lateral needed 832 sq.ft.

Gerrold C. Hood
Signature of Reviewing Official

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska .68502
Phone: 474-1541

B

FILE NO. 1317-C

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E ; Section & ¼ Section NW¼ 9.
Property Dimensions: 502 ft. x 624 ft. Area: 4.38 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay [X] ; Silty Clay Loam [ ] ; Sandy Loam [ ] ; Silt Loam [ ] ; Clay Loam [ ].
Dates of Tests: may 3 to may 4 - 78 Weather: Precip. none Temp. 60°.

OWNER: Harry Berhends
Address: 1520 Pioneer Blvd. Lincoln, Ne

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	30	may 3	10:00 AM	may 3	2:00 PM	may 4	8:00 AM	6"	8 30 AM	4¾	30	1¼	
2	36						8 00	6"	8 30	4⅜	30	1⅛	
3	36						8 10	6½"	8 40	5¾	30	¾	
4	32						8 10	6"	8 40	5⅛	30	⅞	
5	36						8 20	5"	8 50	4¾	30	¼	
6	31						8 20	5"	8 ∅	4½	30	½	

Don Prentice
Signature of Person Conducting Test
Address #1520 Pioneer Blvd. Phone 423-0121

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: May 15, 1978

Approved Percolation Rate (a)
A. 37 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hoob
Signature of Reviewing Official

Plat Of Survey

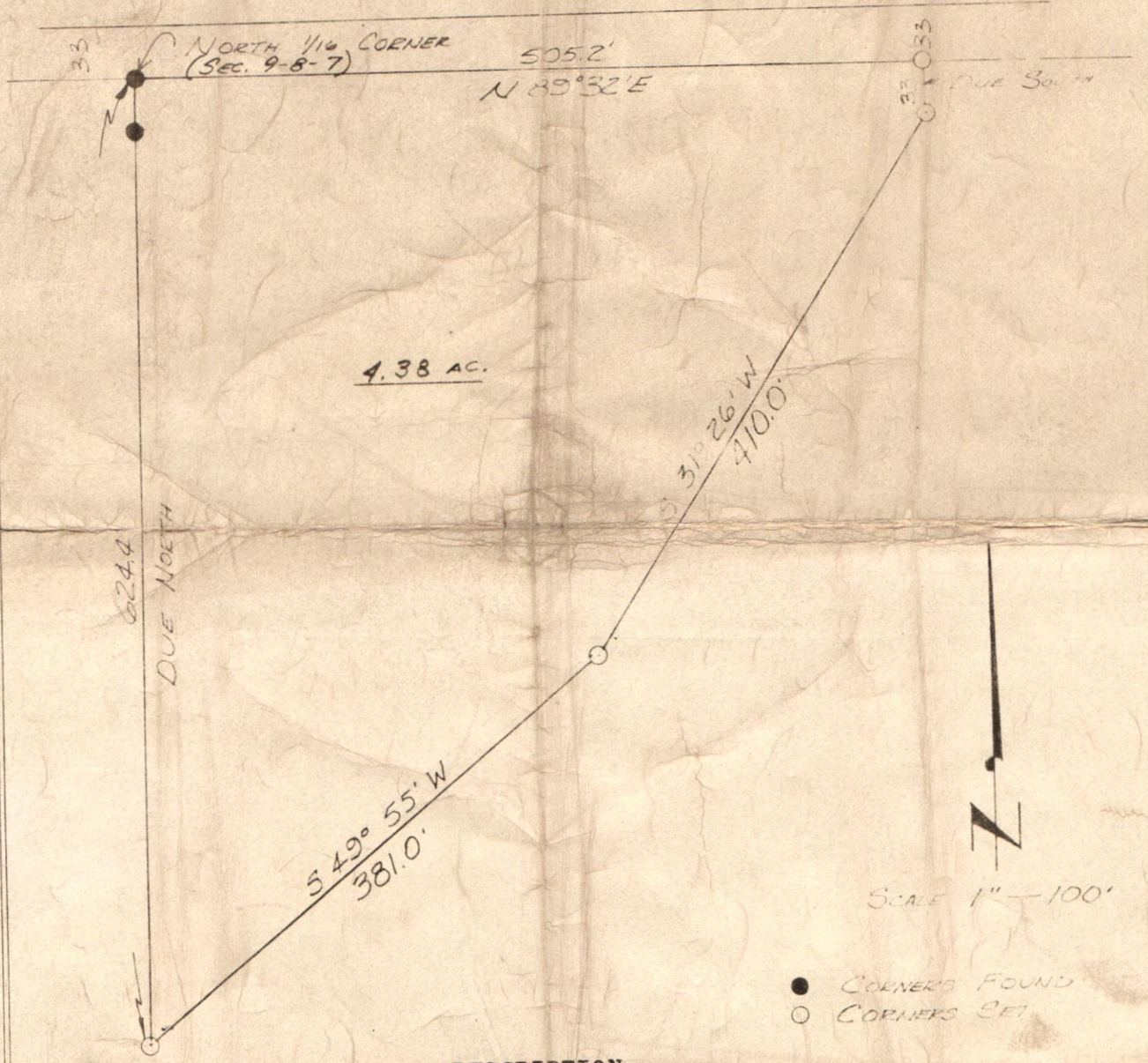
Survey of: NW ¼, NE ¼, NW ¼

Section 9 T 8 N, R 7 E of 6 th P.M. LANCASTER COUNTY, NEBRASKA

Date FEB 10 1969 Weather CLEAR & COLD

TRANSIT ENGINEERING COMPANY
Consulting Engineers – Planners – Land Surveyors

2547 North 33rd Street
Lincoln, Nebraska 68504



DESCRIPTION

A TRACT OF LAND LOCATED IN THE NW¼ NE¼ NW¼ SECTION 9 TOWNSHIP 8 NORTH RANGE 7 EAST 6TH P.M. LANCASTER COUNTY, NEBRASKA DESCRIBED AS FOLLOWS:
BEGINNING AT THE N 1/16 CORNER NW¼ SAID SECTION 9; THENCE DUE SOUTH ON AN ASSUMED BEARING A DISTANCE OF 624.4 FEET; THENCE NORTH 49° 55' EAST A DISTANCE OF 381.0 FEET; THENCE NORTH 31° 26' EAST A DISTANCE OF 410.0 FEET; THENCE DUE NORTH 33.0 FEET TO A POINT ON THE NORTH LINE SAID SECTION 9; THENCE WESTERLY ALONG SAID NORTH LINE, 505.2 FEET TO POINT OF BEGINNING. EXCEPT THE NORTH 33.0 FEET THEREOF FOR ROADWAY PURPOSES. A TRACT CONTAINING 4.38 ACRES MORE OR LESS INCLUDING ROADWAY RIGHT OF WAY.

Signed this 10 day of FEB 1969

Name: _____

Land Surveyor's Seal

Surveyor's license No. L.S. 250

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: Oct 13 18

FILE NO. _____

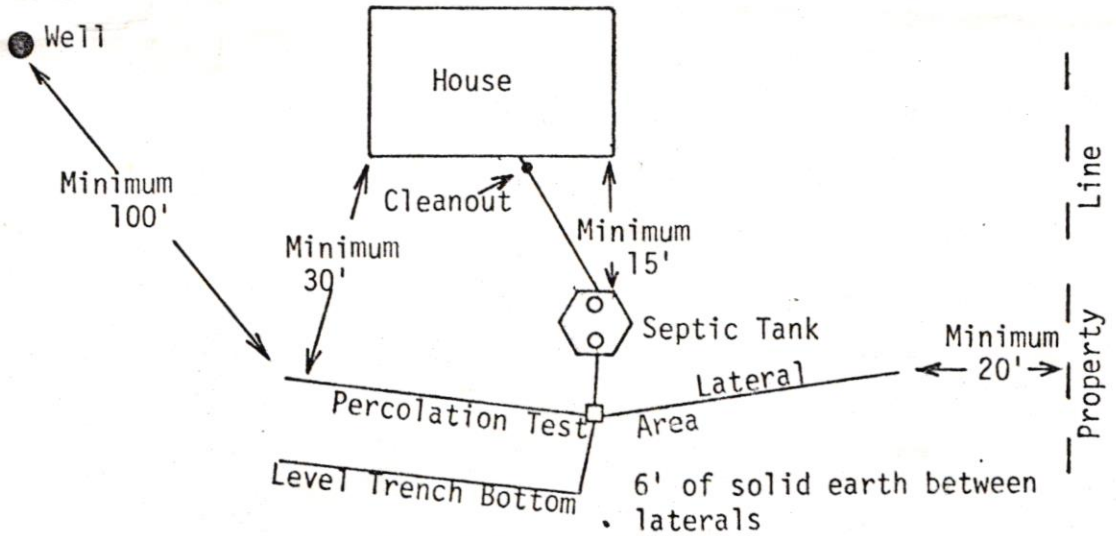
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 72 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 70 ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Fiberglass ; No. of compartments 2 SEC.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Missouri)
4. Manholes: Over Inlet; diam. — in.
Over Outlet; diam. 6" in.
Riser Above ☒ Below ☐ Grade 6 in.
5. Inlet: Baffle ☐ ; or Tee ☒
6. Outlet: Baffle ☐ ; or Tee ☒
7. Depth of top of tank below finished grade 32 in.
8. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 76 ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material Fiberglass ; Number - available outlets 3.
2. Factory Built: Yes ☒ No ☐
(Company " ")
3. Distance from Septic Tank 10 ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or
Perforated Pipe 4.
Material: fiberglass ☐ ; plastic ☒ ;
concrete ☐ ; other _____.
2. Lateral Lines:
Number 2 ; Length of each line 100, 85, _____, _____, _____ ft.;
Total length of laterals 185 ft.;
Distance between lateral lines — ft.
3. Trench dimensions: Width 3 ft.;
Slope 4 in/100 ft.; Average Depth 40 in.
4. Filter Material: Gravel
Depth of Material 18 in.
5. Distances to:
Well or Suction Line _____ ft.;
Stream _____ ft.; Pressure Line 90 ft.; Property Line _____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE Oct 13, 78 INSTALLER Pottgro (mule

N

