HS0025O4

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):** 5812 W Agnew Rd

   Legal Description of Property: Township: Valparaso 12 Range: 5 Section: 12

   Block ____ Lot 13 SubDivsion ____ Add: ____ HC

   ***Parcel ID** 06 . 12 . 400 . 005 . 000 (i.e. 99-99-999-999-999)

2. **Property use:** ☑ Residential ☐ Commercial ☐ Other use (Describe: ____)
   Number of bedrooms 2 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 100' EZ flow to Existing System

5. **Current Type of Lateral-** Pipe & gravel **Current Linear Ft. Of Lateral -** 50 - 5' wide

   Current Tank Gallonage- 1000

6. Print Name Steven Lewis Address 1722 W Avalanche Rd 68521 Phone: 402 432 1082

   Applicant Signature: [signature]

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: 1/27/23 Amount 245.00 Check No. CC8764 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

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) 06-12-400-005-000

Owner: Denis Craig Address 5812 W Agnew Rd.

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 140 ft.

B. Septic Tank

1. Material Concrete
2. Capacity: 1000
3. Depth to top of tank, below unfinished grade: 30 in.
4. Distance to:
   Well 160 ft.
   Pressure line NA ft.
   Property Line 140 ft.
   Foundation 30 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. E

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless: EZ-Flow - New, Pipe & gravel - Existing
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 50 ft. ____ ft. 50 ft. 50 - New w/EZ Flow - Existing
4. Drainfield size: 800 sq. ft.
5. Distance to:
   Well 180 ft.
   Pressure line NA ft.
   Property line 60 ft.
   Depth of Groundwater 8

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

If Yes, the Certified Professional must sign below for final approval:

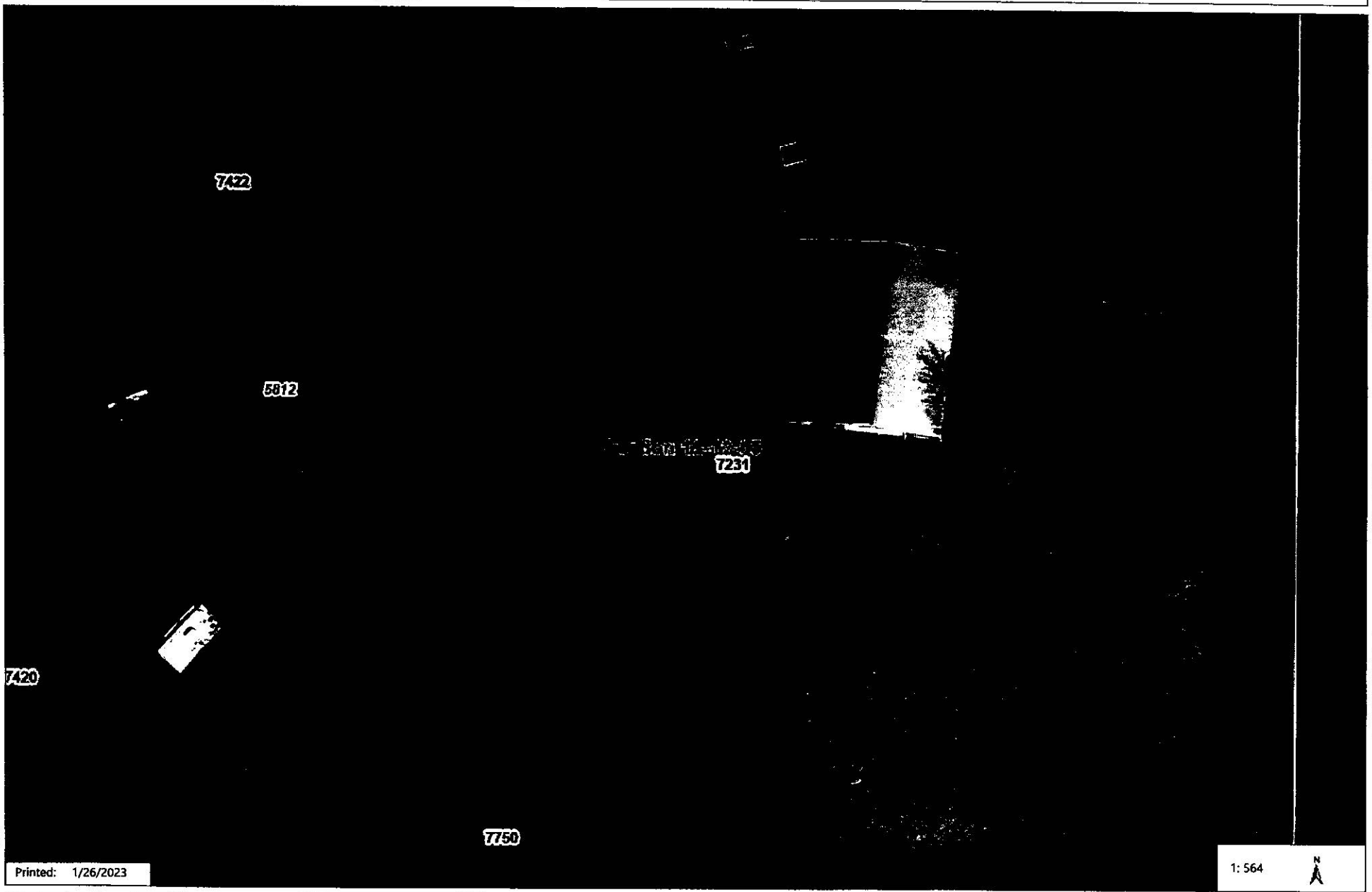
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date: 1-26-23

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

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

0123-1018



Printed: 1/26/2023

1: 564

N

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.

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 5812 W Agnew Rd. (no rural routes) City Valparaiso NE, Zip 68065

Owner Dennis Craig Address

Date of Tests 1-24 to 1-25 Weather: Precipitation Ø Temperature 20°

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 (ft)	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	1-24	10:00	1-25	10:00	1-25	10:00	6	1-25	10:30	30	1	30
2								6				1	30
3								6				1	30
4								6				1	30
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 432 1082
Address 1722 W Avalanche Rd.
Lincoln NE 68521

Soil type (NRCS Maps/Other) 7231
Groundwater Depth 8'

Sum of Percolation Rates: 120
Average of Rates: 30
Rate Used for Calculation: 30 MPI

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

Application to Alter or Repair an Onsite Wastewater Treatment System

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1. **Street Address (No Rural Route):** 5812 W Agnew Rd

   Legal Description of Property: Township: Valparaiso Range:_____ Section:_____

   Block_____ Lot_____ SubDivsion_____ Add:_____

   ***Parcel ID** 06 . 12 . 400 . 005 . 000 (i.e. 99-99-999-999-999)

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

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

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5. **Current Type of Lateral-** Pipe & gravel **Current Linear Ft. Of Lateral -** 50 - 5' wide

   Current Tank Gallonage- 1000

6. Print Name Steven Lewis Address 1722 W Avalanche Rd Phone: 402 432 1082

   Applicant Signature: Steve

Please contact LLCHD for the current permit fee for this application
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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_____

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

Business Office Use Only

Received: Date:____/____/____ Amount_____ Check No._____ Initials_____

Revised 4/8/13

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

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) 06-12-400-005-000

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A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
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B. Septic Tank

1. Material Concrete
2. Capacity: 1000
3. Depth to top of tank, below unfinished grade: 30 in.
4. Distance to:
   Well 160 ft.
   Pressure line NA ft.
   Property Line 140 ft.
   Foundation 30 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. E

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless: EZ Flow - New Pipe & gravel - Exist
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 50 ft. ft. ft. 50 ft. 50 - New w/EZ Flow - Existing
4. Drainfield size: 800 sq. ft.
5. Distance to:
   Well 180 ft.
   Pressure line NA ft.
   Property line 60 ft.
   Depth of Groundwater 8

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

If Yes, the Certified Professional must sign below for final approval:

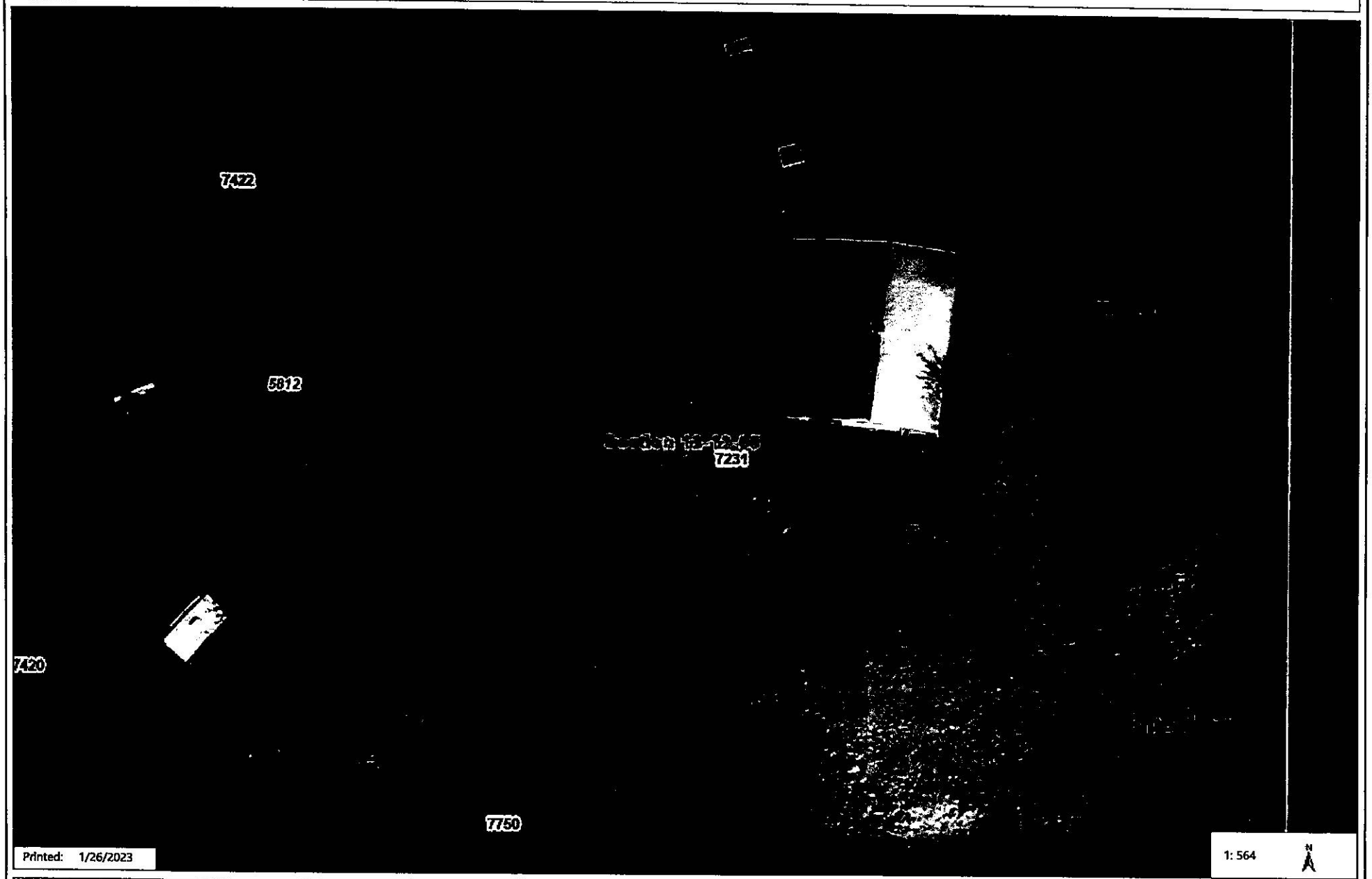
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: [signature] Date: 1-26-23

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

GIS Viewer

0123-1018



Printed: 1/26/2023

1: 564

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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 5812 W Agnew Rd. (no rural route) City Valparaiso NE, Zip 68065

Owner Dennis Craig Address

Date of Tests 1-24 to 1-25 Weather: Precipitation 0 Temperature 20°

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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)
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2								6				1	30
3								6				1	30
4								6				1	30
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Steven C Lewis
Phone: 402 432 1082
Address 1722 W Avalanche Rd.
Lincoln NE 68521

Sum of Percolation Rates: 120
Average of Rates: 30
Rate Used for Calculation: 30 MPI

Soil type (NRCS Maps/Other) 7231
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 (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
ALTERATION PERMIT
No. HS002504

System Type: Standard

Situs: No Site Address Specified

Issued: 1/31/2023

Expires: 1/31/2024

Description: S12, T12, R5, 6th Principal Meridian, LOT 13 SE

Owner: CRAIG, DENNIS R
5812 W AGNEW RD
VALPARAISO, NE 68065

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

STEVEN LEWIS
1722 W AVALANCHE RD
LINCOLN, NE 68521

SCANNED

HS002504

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):** 5812 W Agnew Rd

Legal Description of Property: Township: Valparaiso 12 Range: 5 Section: 12

Block ____ Lot 13 SubDivsion ____ Add: ____ HC

***Parcel ID** 06 . 12 . 400 . 005 . 000 (i.e. 99-99-999-999-999)

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Number of bedrooms 2 Does the system have a: ☐ Garbage Grinder ☐ Large Capacity Tub

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Current Tank Gallonage- 1000

6. Print Name Steven Lewis Address 1722 W Avalanche Rd Phone: 402 432 1082
68521

Applicant Signature: Steve L

Please contact LLCHD for the current permit fee for this application
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HEALTH DEPARTMENT USE ONLY

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

Date received 1/31/23 REVIEW: ☑ Approved ☐ Disapproved By: [signature]

Comments (if any): ____

Site visits Covered prior to inspection
Date ___/___/___ By ____
Date ___/___/___ By ____

Installation final written approval
Date 06/07/23 By Doug Sutter

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: 1/27/23 Amount 245.00 Check No. CC8764 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: #500254

Onsite Wastewater Treatment System

Inspection Sheet

Date 6/7/23 Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 5812 W Agnew Rd 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 _____ Sq. Ft. Tank Size 1,000 gals

Total length of laterals 150' new - added to exist Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ flow

No. of Absorption Laterals 3 Width _____ 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 _____ NA

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial _____ Date Covered prior to
Follow-Up _____ Date inspection
Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Thurn
Date _____

Field Note Drawing (See Reverse Side):

SCANNED

D Exhibit 4

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

Permit Number:

Onsite Wastewater Treatment System
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CITY OF LINCOLN - LANCASTER COUNTY, NE

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SCANNED