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

A

Permit Number HS002545

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* 13700 W Lake View Rd (no rural route) City Raymond, NE Zip 68428

Legal Description SW 1/4 NW 1/4 Section 19 Township 12 N Range 5E Subdivison Branched Oak Lakeside Acres Addition 2 Block Lot

PID 06-19-101-002-000 *Approx. Address (If to be determined)

B. Owner

Name James A McKeown / Geraldine McKeown Signature Geraldine McKeown / James A McKeown

Address 13700 W Lake View Rd City/State/Zip Raymond, NE 68428

Home Phone 402-429-8664 Work Phone

C. Certified Installer

Name: Terri Jakoubek Signature Terri 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 4 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 5.67
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 5-24-23 Amount Paid $446
Received By JAD Cash/Check No. 20470

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

Form A Updated: 2/18

FORM 20105-0477

Original

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: 471-7800

B

FILE NO. 023802426

PROPERTY WHERE SOIL TESTED:

Location: Township_____; Range_____; Section & ¼ Section_____.
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 12-8 to 12-10-00. Weather: Precip. — Temp. _____.

13700 W Lake View X OWNER: _____

Address: _____

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings							
		Start		End		Start			End			Results	
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.)
X 1	22	12-8	11:00	12-10	8:10	12-10	1040	6	1140	5 6/8	30	3/4	
2	30							6		5 6/8		1	30MIN/IN
3	30									6		5/8	48MIN/IN
4	30									6		7/8	34MIN/IN
5	30									6		3/4	40MIN/IN
6	30									6		5/8	48MIN/IN
7	30									6		3/4	40MIN/IN
8	30									6		1/2	60MIN/IN
9	30									6		3/4	40MIN/IN
10	30									6		3/4	40MIN/IN

Larry Schwarck
Signature of Person Conducting Test

Address 8200 old Cheney Rd Phone 489-7294

Sum of Percolation Rates: _____
Average of Rates: 60
Mean of Rates: _____
60

(Do not write below this line)

REVIEWING ACTION

Remarks: FIELD CHECK SOIL
Soil Type (SCS): PAWNEE CLAY LOAM
Date: FEBRUARY 26, 2002

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

Jerrold C. Haas
Signature of Reviewing Official

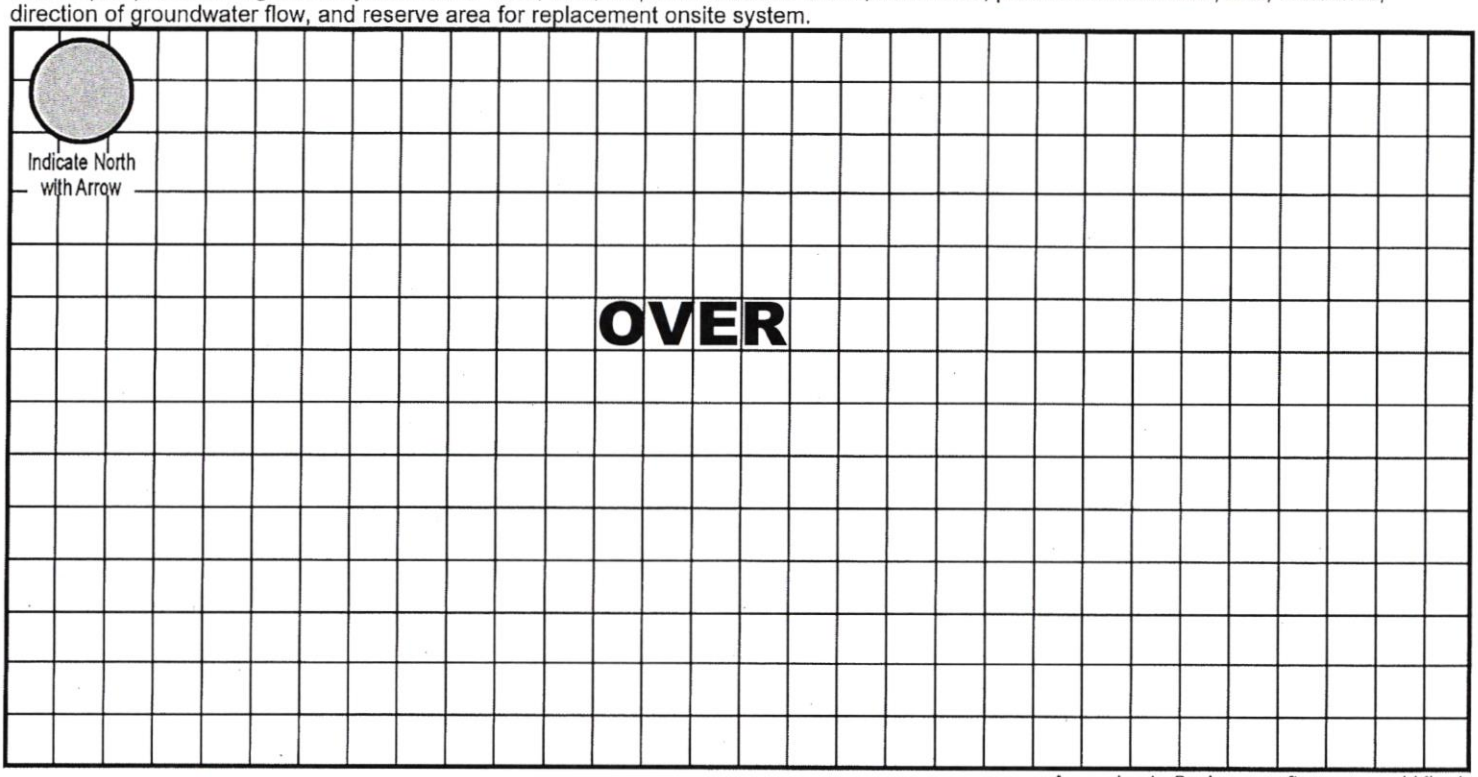
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

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

***Replacing collapsing fiberglass tank, adding 100' of EZFlow to bring drainfield into compliance with state code.

A. Onsite System Location

Address (no rural route) 13700 W Lake View Rd City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Septic Tank Cap. 2000 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 (NEW)

Percolation Rate 60 (min/inch = mpi) No. of Bedrooms 5 Soil Type Steinauer Loam/Mayberry SCL Land Slope _____ %

☐ Trench ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) Total square feet of drainfield 450 Sq. Ft.

Total length of laterals 100 Type of Distribution: ☐ Perforated Pipe ☐ Half-Round ☐ Chambers ☐ Other EZFlow 1203H Bundles

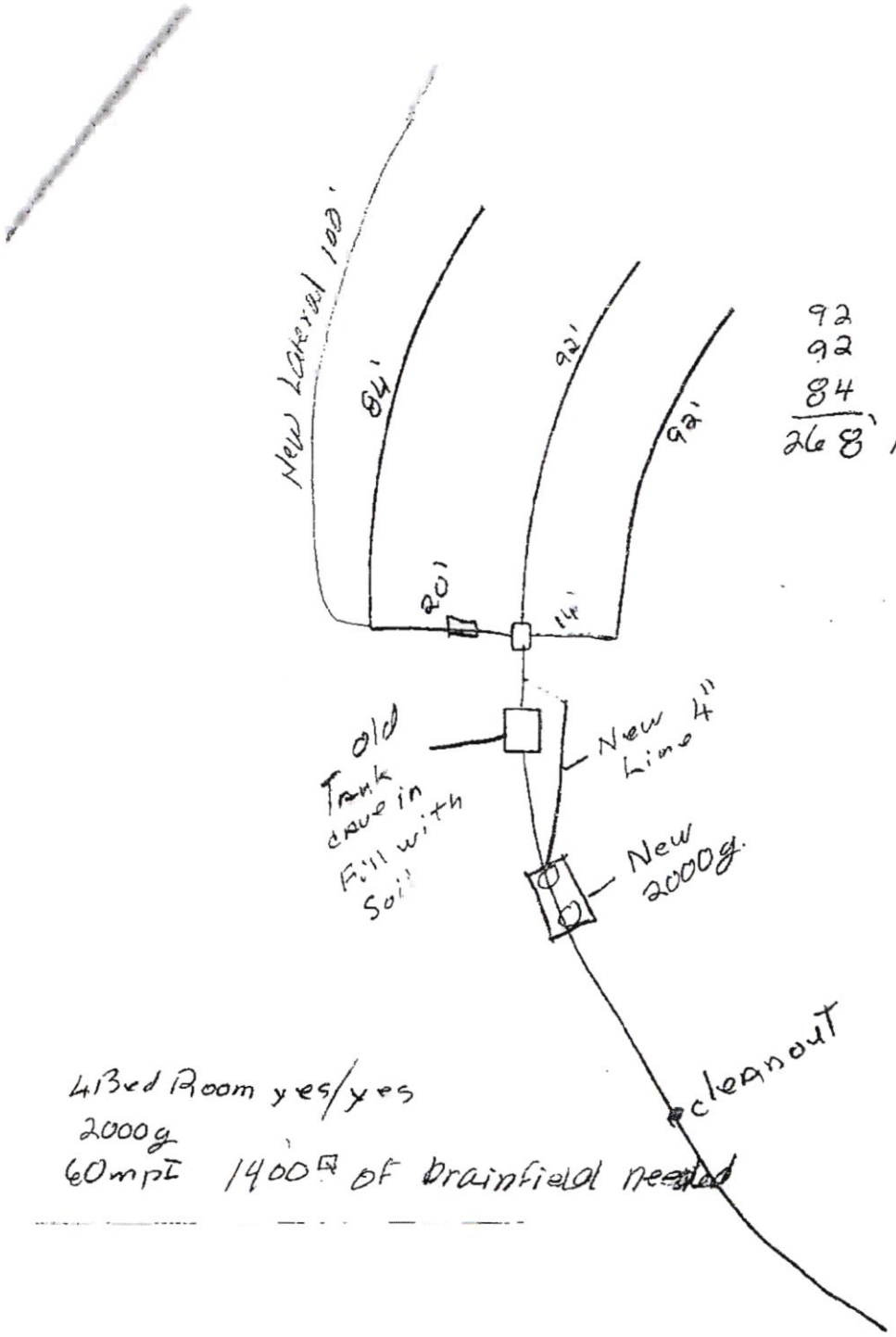
No. of Absorption Trenches 1 Width 38" No. of Drop Boxes 1 Distribution Box _____

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

***Existing drainfield consists of 268' of gravelless chambers for a total of 970sqft.

Installer Neri L. Jahnsen Date: 5/24/23

Updated 2/18



92
92
84
268' Have

971.5 □ have

1400 □ needed
- 971.5
428.5 □ more

95.22'
4.5 | 428.5

need 100' of EZ Flow

4 Bed Room yes/yes
2000g
60 mpi 1400 □ of brainfield needed

Loeck

D AUG 3 0 2002

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Original

Permit Number: 02380242601

Sewage Disposal System
As Built Plans & Specifications

Date 8-27-2002

System Location (Indicate correct number and street)
Address 13700 W Lake View (no rural route) City _____ NE, Zip _____

A. Building Sewer
1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16 in.
3. Distance between dwelling and septic tank: 90' ft.
4. Number of clean-outs: 2
5. Distances to: well or suction line over 200 ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank
1. Material: Plastic
   Number of compartments: 1
2. Capacity: _____ gal.
3. Factory built: ☒ Yes ☐ No
4. Manholes: Over inlet, diameter 24 in.
   Over outlet, diameter 24 in.
   Riser: ☒ above ☐ below grade 4 in.
5. Inlet: ☐ baffle ☒ tee
6. Outlet: ☐ baffle ☒ tee
7. Depth to top of tank, below unfinished grade: 4 in.
8. Distances to: Well or suction line over 200 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

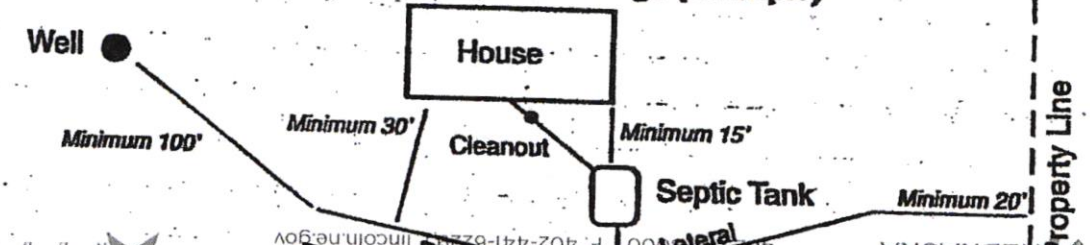
C. Distribution Box Drop Boxes
1. Material: Plastic
   Number available outlets: _____
2. Factory built: ☒ Yes ☐ No
3. Distance from septic tank: over 200 ft.

D. Absorption Field
(Provide as-built drawings on back of this form)
1. Type: ☒ Half rounds ☐ Perforated pipe
   Diameter of half round: 3011
   or perforated pipe: _____
   Material: ☐ fiberglass ☒ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 92 ft. 92 ft.
   84 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope 1' in/100 ft.
   Average depth 30 in
4. Filter material: dirt
   Depth of material 30 in.
5. Distances to: Well or suction line over 200 ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Indicate North with Arrow

Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)

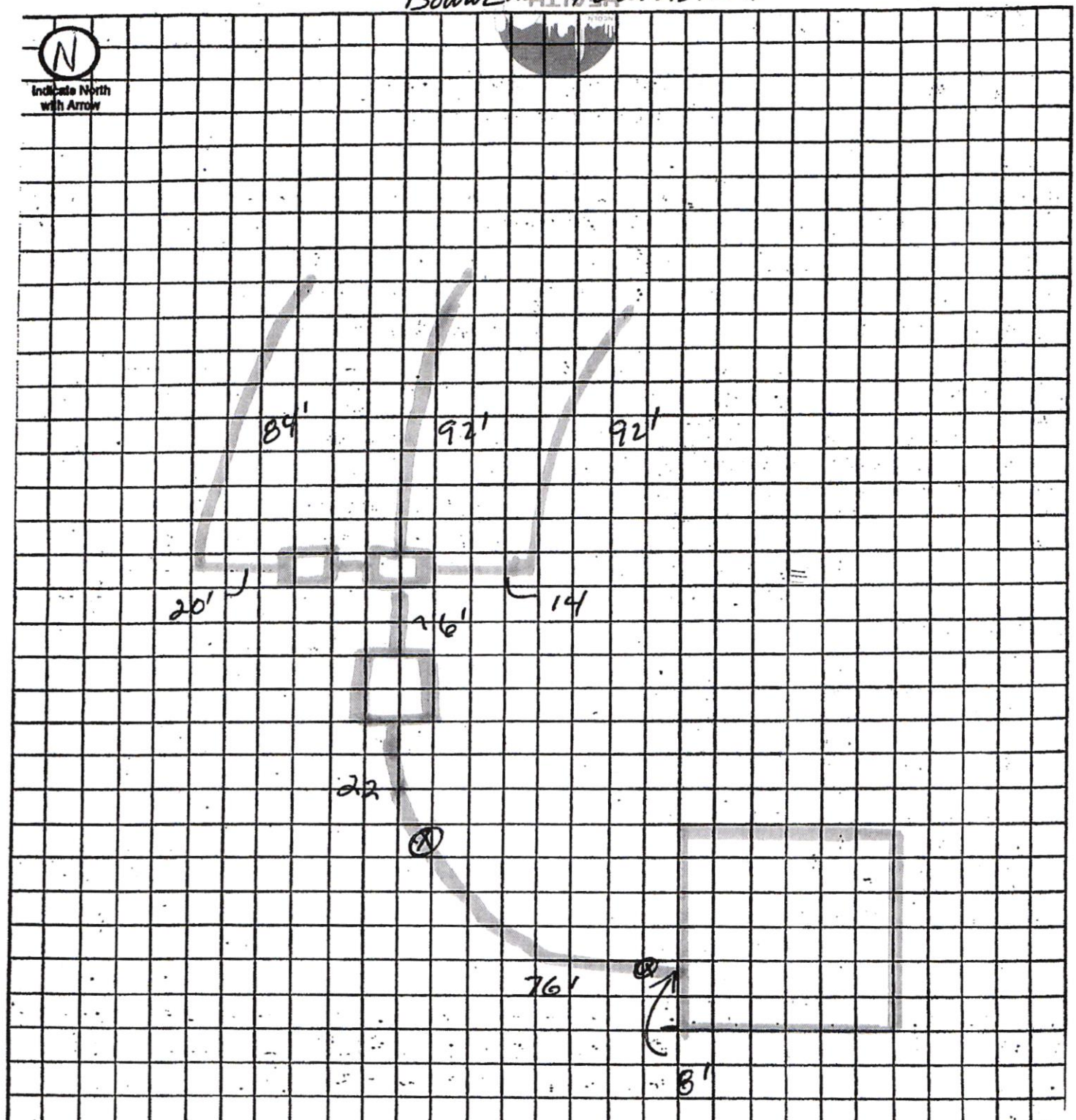


LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
3131 "O" Street • Lincoln, NE 68510-1514 P: 402-441-8000 F: 402-441-8238 lincoln.ne.gov
CITY OF LINCOLN NEBRASKA
LANCASTER COUNTY NEBRASKA

As Built Drawing

Original

Bouwens Plumbing



CITY OF LINCOLN NEBRASKA
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
3131 "O" Street | Lincoln, NE 68510-1514
402-441-8000 | F 402-441-8225 | lincolnne.gov
LANCASTER COUNTY NEBRASKA

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. HS002545

System Type: Standard

Situs: No Site Address Specified

Issued: 5/24/2023

Expires: 5/24/2024

Description: BRANCHED OAK LAKESIDE ACRES, Lot 2

Owner: MCKEOWN, JAMES A & GERALDINE
L FAMILY REVOCABLE TRUST
13700 W LAKE VIEW RD
RAYMOND, NE 68428

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

RAYMOND CONTRACTING INC
13800 NW 70TH ST
RAYMOND, NE 68428