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

A

Permit Number HS002546

Onsite Wastewater Treatment System Request for Site Clearance and Permit

Include Form B and C. Submit correct fee with this Application

3 acres or more required for: ☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 16670 Pine Lake Rd. (no rural route) City Walton, NE Zip 68461

Legal Description S14 T9 R8 53

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

PID 22-14-300-007-000

B. Owner

Name Matt Remerfeldt Signature

Address 11821 Greyhawk cir. City/State/Zip Lincoln NE,

Home Phone Work Phone 402 580 1663

C. Certified Installer

Name: Steven C Lewis Signature

Address 1722 W. Avalanche Rd. City/State/Zip Lincoln NE, 68521

Work Phone 402 432 1082

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 19.54

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 500

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution No. 02-30

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 $460.00

Received By JAD Cash/Check No. 87644

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

Form A Updated: 1/13

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

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS002546

System Type: Standard

Situs: No Site Address Specified

Issued: 5/25/2023

Expires: 5/25/2024

Description: S14, T9, R8, Acres 6th Principal Meridian, LOT 53 SW

Owner: RENNERFELDT, MATTHEW
11821 GREYHAWK CIR
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

STEVEN LEWIS
1722 W AVALANCHE RD
LINCOLN, NE 68521

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

SCANNED

A

Permit Number HS002546

Onsite Wastewater Treatment System
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PLEASE PRINT OR TYPE

A. Onsite System Location

Address 16770 Pine Lake Rd. (no rural route) City Walton, NE Zip 68461

Legal Description S14 T9 R8 53

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

PID 22-14-300-007-000

B. Owner

Name Matt Remerfeldt Signature

Address 11821 Greyhawk cir. City/State/Zip Lincoln NE,

Home Phone Work Phone 402 580 1663

C. Certified Installer

Name: Steven C Lewis Signature

Address 1722 W. Avalanche Rd. City/State/Zip Lincoln NE, 68521

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☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 500

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 02-30

1. Health Department

Site visits 9/12/23 DS Date rec'd 5/25/23 Date frwd 5/25/23

ACTION ☒ Approved ☐ Disapproved Signature

Comments

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 Doug Anyan

Date 9/14/23

Business Office Use Only

Date Received 5-24-23 Amount Paid $460.00

Received By JAD Cash/Check No. 0711

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

Form A Updated: 1/13

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

Exhibit 5

Permit Number: HS002546

Onsite Wastewater Treatment System

Inspection Sheet

Date 9/14/23 Legal Description _____

¼ ¼ Section/Township/Range

Onsite System Location 16670

Address (no rural route) 16770 Pine Lake 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 1,260 Sq. Ft. Tank Size 1,500 gals

Total length of laterals _____ Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) E2 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 _____ NA

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

Inspections prior to Final Approval
Initial _____ Date 9/13/23

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Darcy Thum

Date 9/14/23

Field Note Drawing (See Reverse Side):

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): 22-14-300-007-000

Owner: Matthew Remetfeldt Address: 16720 Pine Lake Rd. 68461

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 45 ft.

B. Septic Tank

1. Material: Plastic
2. Capacity: 1500
3. Depth to top of tank, below unfinished grade: 36 in.
4. Distance to:
   Well 229 ft.
   Pressure line ____ ft.
   Property Line 108 ft.
   Foundation 45 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 17 ft. SE

D. Drainfield/Absorption Field

■ Trench ❑ Bed

1. Type: ❑ Perforated Pipe ❑ Chamberless ■ Other
   Material brand and inside width of Chamberless: EZ Flow
2. Number of Laterals: 2
3. Length of each lataral (linear): ft. 130 ft. 150 ft. ____ ft. ____
4. Drainfield size: 1260 sq. ft.
5. Distance to:
   Well 249 ft.
   Pressure line ____ ft.
   Property line ____ ft.
   Depth of Groundwater 28'

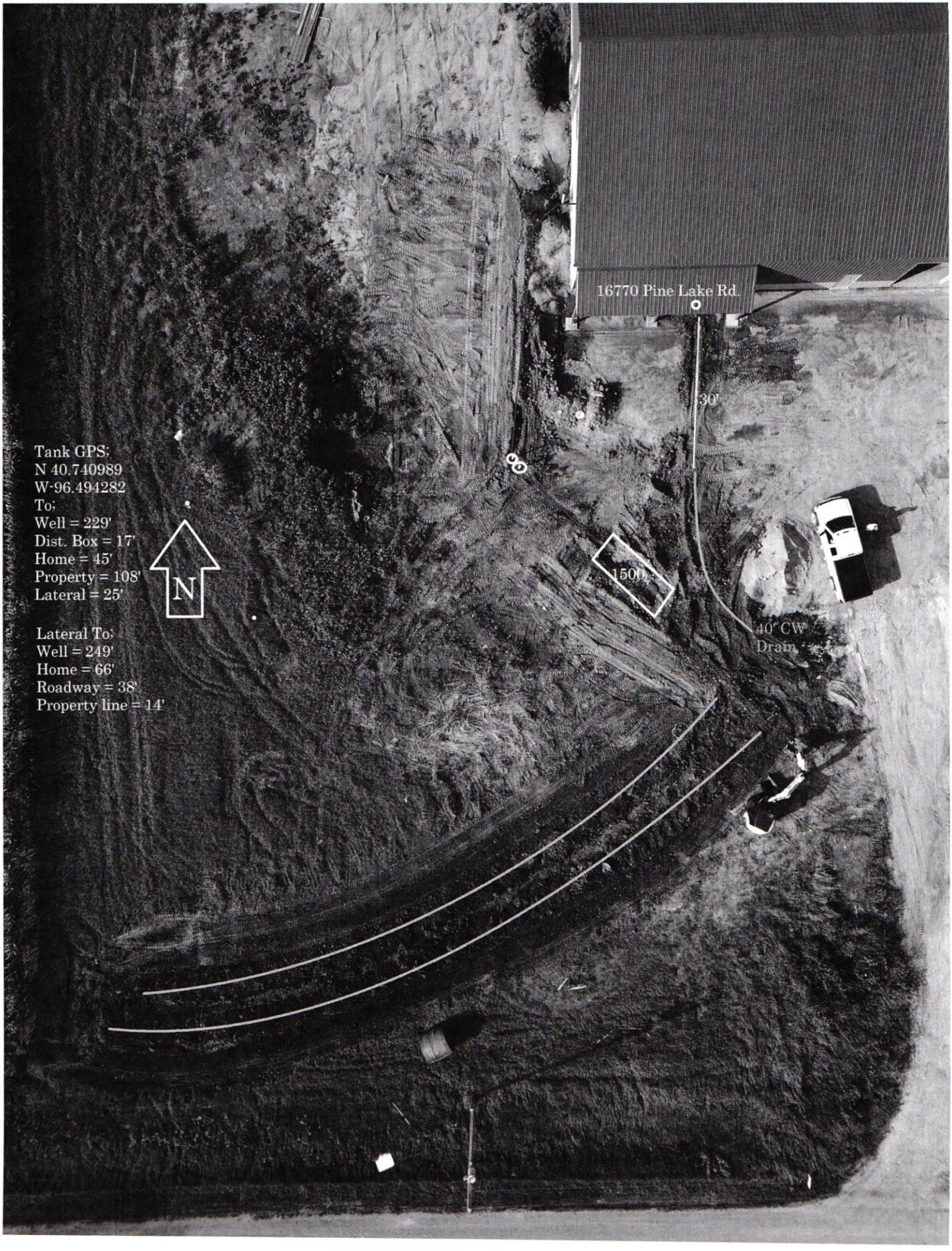
Was the Onsite Wastewater System covered prior to LLCHD inspection? ❑ Yes ■ No

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: 9-13-23

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


16770 Pine Lake Rd.
30'
Tank GPS:
N 40.740989
W-96.494282
To:
Well = 229'
Dist. Box = 17'
Home = 45'
Property = 108'
Lateral = 25'
N
1500 gal
40' CW
Dram
Lateral To:
Well = 249'
Home = 66'
Roadway = 38'
Property line = 14'

Nate C. Hartman

From: John V. Berry
Sent: Wednesday, May 24, 2023 3:05 PM
To: Nate C. Hartman
Subject: Sewage Disposal System PID #22 14 300 007 000
Attachments: Lot 53 Field Note.pdf; Lot 53 Section Plat.PNG; Lot 53 GIS.pdf

Nate,

Lancaster County Engineering Department indicates approval for a Sewage Disposal System for the property known as Lot 53 Irregular Tracts, located in the SW1/4 of Section 14, Township 9 North, Range 8 East, of the 6th Principal Meridian, Lancaster County, Nebraska. Property Address; 16670 Pine Lake Road, Walton, Nebraska. 68461, (address as shown on the Property Tax Information page) As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.
Winery

John V. Berry RLS #535
Lancaster County Surveyor
444 Cherrycreek Road, Bldg "C"
jberry@lancaster.ne.gov
Phone (402) 441-7681

Nate C. Hartman

From: RJ Hamilton
Sent: Wednesday, May 24, 2023 11:28 AM
To: Nate C. Hartman
Subject: 16770 Pine Lake Rd.

Nate,
This property with PID **2214300007000** is a legal buildable lot. There is no floodplain on the property.

Thanks,
RJ Hamilton
City of Lincoln/Building and Safety
Plans Examiner II
402-441-6424
555 S. 10th St., Ste. 203
Lincoln, NE 68508

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 16670 Pine Lake Rd (no rural route) City Walton NE, Zip 68526

Owner Matt Rennerfeldt Address 11821 Greyhawk Cir.

Date of Tests 5/18 to 5/19 Weather: Precipitation None Temperature 74°

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(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	32	5/18	9:30	5/19	9:30	5/19	9:45	6	5/19	10:15	30 min	1	30mpi
2	36	5/18	9:30	5/19	9:30	5/19	9:45	6	5/19	10:15	30 min	1.5	20mpi
3	32	5/18	9:30	5/19	9:30	5/19	9:45	6	5/19	10:15	30 min	2	15 mpi
4	34	5/18	9:30	5/19	9:30	5/19	9:45	6	5/19	10:15	30 min	1.5	20mpi
5	32	5/18	9:30	5/19	9:30	5/19	9:45	6	5/19	10:15	30 min	1.5	20mpi
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Matt Taylor
Phone: 402 450 6599
Address 2610 S 11 St
Lincoln NE 68502

Sum of Percolation Rates: 105 mpi
Average of Rates: 21 mpi
Rate Used for Calculation: 20-30 mpi

Soil type (NRCS Maps/Other)

Groundwater Depth

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date