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

A

Permit Number
HS002548

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 26688 SW 58th (no rural route) City Hallam NE Zip

Legal Description S30 T7 R6 Pella Hills, Outlot A

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

PID

B. Owner

Name Ryan Bahl Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Scott Moeller Signature Scott Moeller

Address 1345 N 96th City/State/Zip Syracuse NE 68446

Work Phone 402-430-2946

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 3 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres

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

1. Health Department
Site visits Date rec'd
Date frwd
Comments
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

Business Office Use Only
Date Received 5-26-23 Amount Paid $460.00
Received By JAO Cash/Check No. CC 7982

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. HS002548

System Type: Lagoon

Situs: No Site Address Specified

Issued: 5/31/2023

Expires: 5/31/2024

Description: PELLA HILLS, OUTLOT A

Owner: CHUCK SWAB INVESTMENTS LLC
11050 NW 121 ST
MALCOLM, NE 68402

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

SCOTT MUELLER
1345 N 26TH RD
SYRACUSE, NE 68446

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

SCANNED

A

Permit Number
#S002548

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 26688 SW 58th (no rural route) City Hallam NE Zip

Legal Description S30 T7 R6 Pella Hills, ~~Outlot A~~ 8 Lot

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

PID

B. Owner

Name Ryan Bohl Signature 499-1153 Chan

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Scott Moeller Signature Scott Moeller

Address 1345 N 96th City/State/Zip Syracuse NE 68446

Work Phone 402-430-2946

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 3 Whirlpool Bathtub? ☐ Yes ☐ No Total Acres 4.34

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

1. Health Department
Site visits 9/15/23 DS
Comments
Date rec'd 5/31/23
Date frwd 5/31/23
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

Business Office Use Only
Date Received 5-26-23 Amount Paid $460.00
Received By JAO Cash/Check No. CC-7982

Installation Final Written Approval
By Casey Thun
Date 11/21/23

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: HS002548

Onsite Wastewater Treatment System

Inspection Sheet

Date 11/21/23 Legal Description _____
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 26688 SW 58th 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 plus 1000 gal. Pump tank

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

_____

No. of Absorption Laterals 3 Width 45 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 DD Date 11/15/23

Follow-Up _____ Date _____

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Mues

Date 11/21/23

Field Note Drawing (See Reverse Side):

Updated 4/15

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 26688 SW 58th (no rural route) City Hallam NE, Zip _____

Owner _____ Address _____

Date of Tests 8-29 to 8-30 Weather: Precipitation N/A Temperature 80's

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	36	~~8-24 10:00~~	10:00	8-30	14:00	8-30	14:00	6	8-30	14:30	30	5/8	52
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	5/8	52
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	3/4	45
	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃		
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Scott Mitchell
Phone: 402-430-2946
Address: Syracuse NE

Sum of Percolation Rates: 149
Average of Rates: 49.67
Rate Used for Calculation: 50-60 mpi

Soil type (NRCS Maps/Other) _____
Groundwater Depth 12+

DO NOT WRITE BELOW THIS LINE

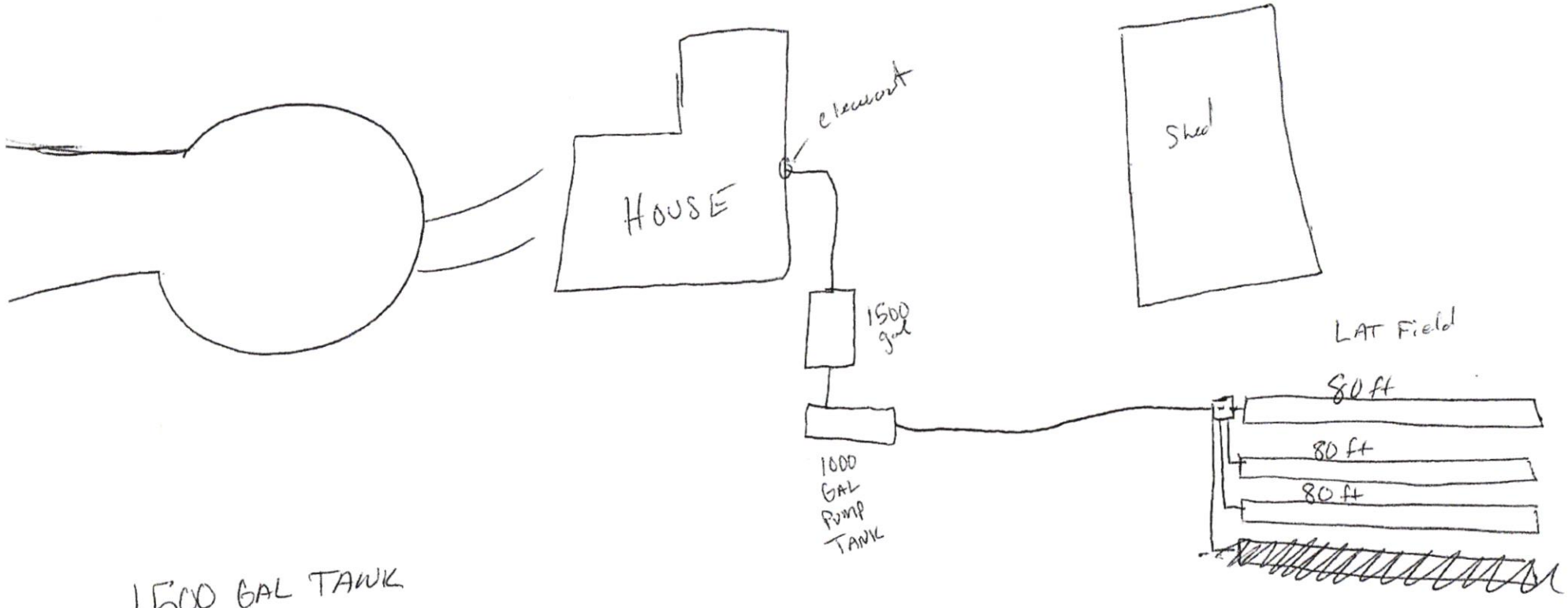
Reviewing Action

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

Signature of Reviewing Official _____ Date _____

26688 SW 58TH

HALLAM, NE / Ryan Bull



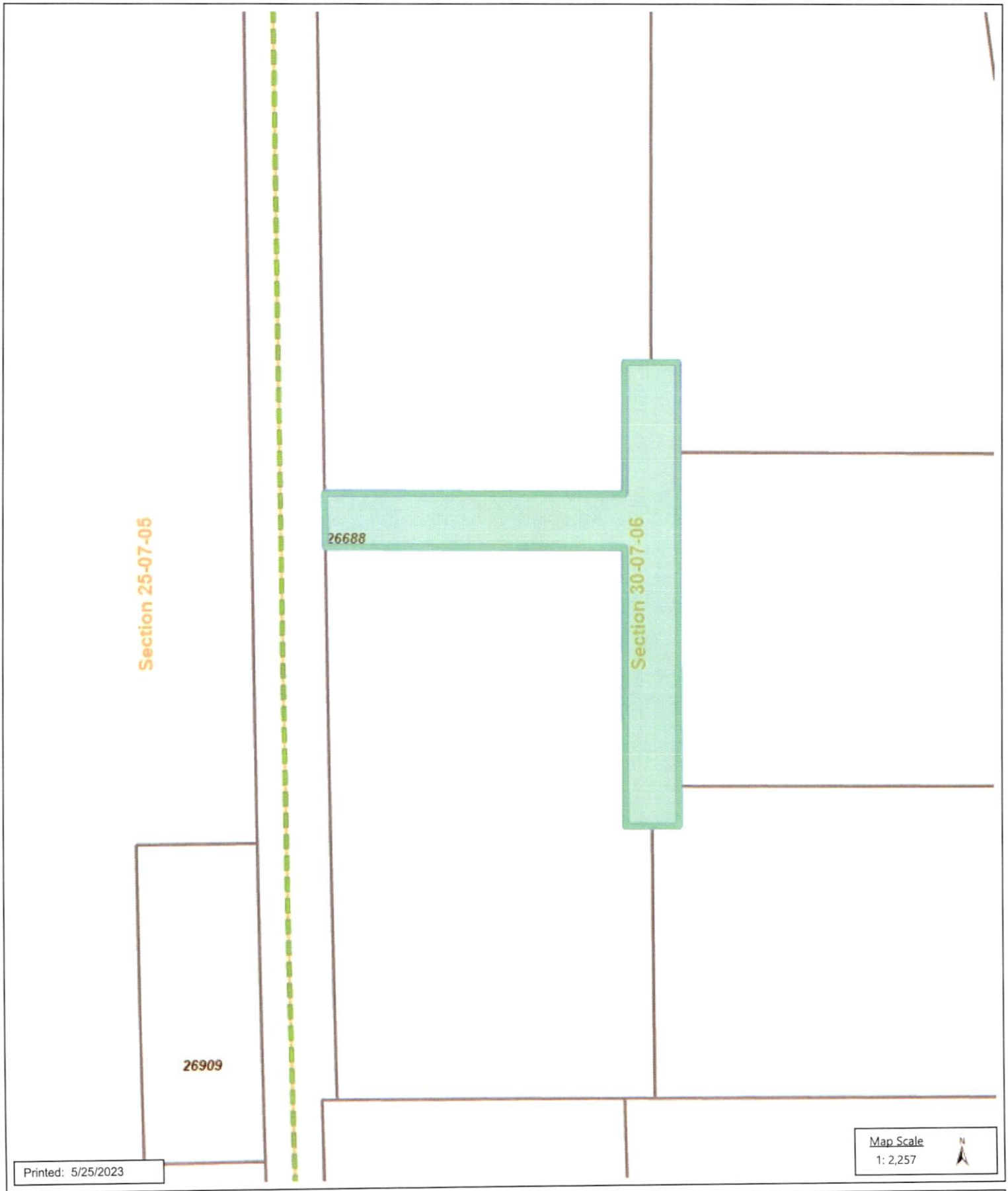
1500 GAL TANK

1000 GAL PUMP TANK

240 ft EZ flow LAT

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



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.

Nate C. Hartman

To: Tod Stertz
Subject: RE: Pella Hills Approvals

A permit application for an onsite wastewater system to be located on Lot 8 of Pella Hills has been received, reviewed, approved and issued. Permit number HS002548 for reference.

I will send these to you as they trickle in. Please continue to hold building permits until permit numbers for individual lots are received.

Thanks Tod!

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
3131 'O' Street, Lincoln, NE 68510
O: 402-441-8643 F: 402-441-3890

From: Tod Stertz <stertzfamilyhomes@yahoo.com>
Sent: Wednesday, May 31, 2023 12:50 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: Re: Pella Hills Approvals

Nate,

I have no objections. Let me know if any further action is required.

Tod Stertz

Sent from Yahoo Mail on Android

On Wed, May 31, 2023 at 12:42 PM, Nate C. Hartman <nhartman@lincoln.ne.gov> wrote:

Please let me know if you have any objections (as speaking for the village of Hallam) to the construction of onsite wastewater systems being constructed within this subdivision.

Let me know if you have any questions.

Thanks!

Nate Hartman REHS, QCIS, QPSWPPP

Senior Environmental Health Specialist

3131 'O' Street, Lincoln, NE 68510

O: 402-441-8643 F: 402-441-3890

CONFIDENTIALITY NOTICE: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.