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

A

Permit Number
#5002575

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* 12080 West Agnew Rd City _____, NE Zip _____
(no rural route)

Legal Description S8 T12 R5 15
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 060830000 8000 *Approx. Address (If to be determined) _____

B. Owner

Name Michael Murphy Signature _____
Address _____ City/State/Zip _____
Home Phone _____ Work Phone _____

C. Certified Installer

Name: Blain Johnson Signature _____
Address 8533 East State Hwy 41 City/State/Zip Adams NE 68301
Work Phone 402 610 2570

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

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 8-07-23 Amount Paid $460.00
Received By JAS Cash/Check No 10251

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

Form A Updated: 4/15

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

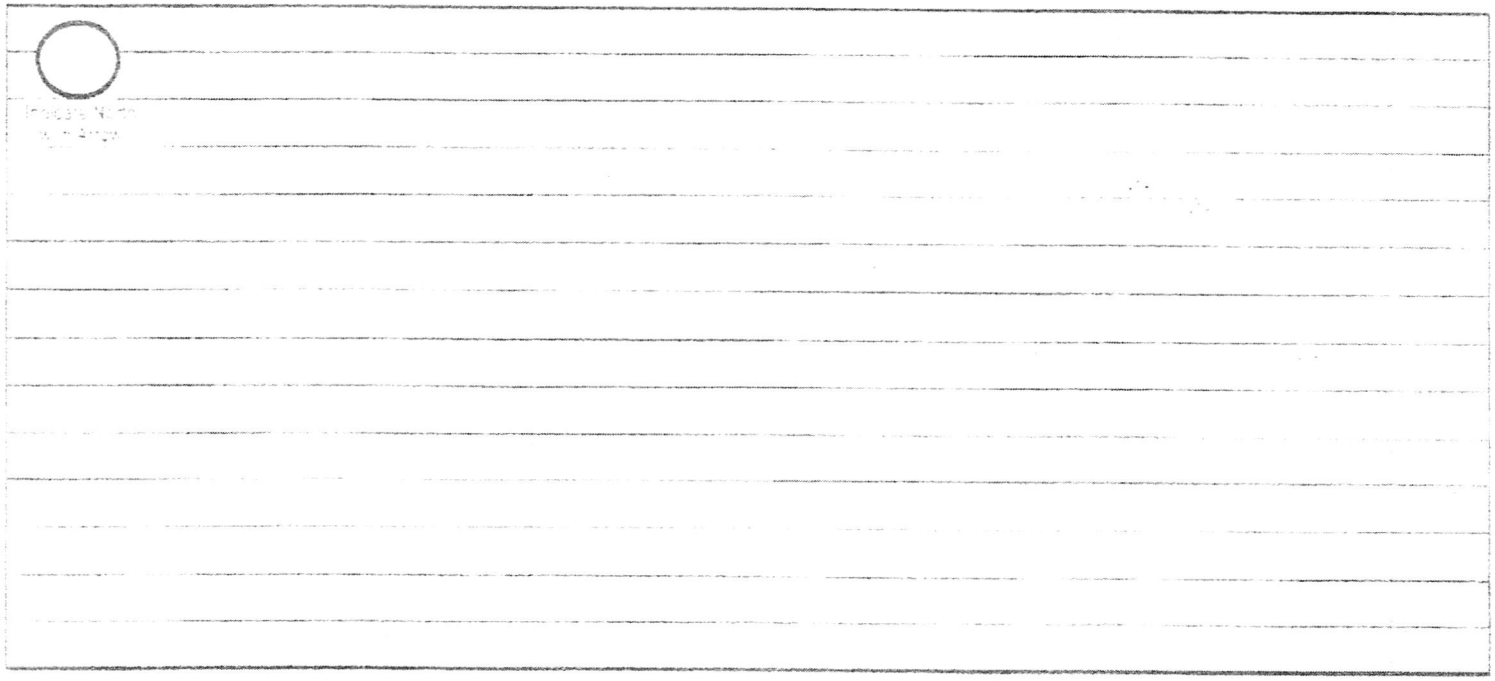
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop or distribution boxes, tank, drainfield, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ ft. = _____ grid line/s

A. Onsite System Location

Address and rural route: 12080 west Agnew Rd City _____ NE Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap._____ gals Tank Material: ☐ Concrete ☐ Plastic ☐ Other_____ ☐ Lagoon (Not assessable for pump)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☑ Lagoon

D. Drainfield Absorption System

Percolation Rate_____ min/inch (average) No. of Bedrooms_____ Soil Type_____ Land Slope _____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved) Total Square feet of drainfield_____ sq.ft.

Total length of laterals_____ Type of distribution: ☐ Perforated pipe ☐ Half-Round ☐ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distribution Box_____

No. of absorption beds_____ Width_____ No. of Distribution lines per bed_____

E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	25 ☐	20 ☐	15 ☐	25 ☐	☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	50 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☑	500 ☐	50 ☑	N/A ☐	30 ☑	30 ☑	100 ☑	200 ☑	☑

F. Required Signatures

Home Builder/Contractor _____ Date _____

Installer: Blank Date 8-7-23

Onsite Plan 10/2008

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. HS002575

System Type: Lagoon

Situs: No Site Address Specified

Issued: 9/5/2023

Expires: 9/5/2024

Description: S8, T12, R5, Acres 6th Principal Meridian, LOT 15 SW

Owner: MURPHY, MICHAEL
PO BOX 29191
ASHLAND, NE 68529

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

BLAIN JOHNSON
8533 E STATE HWY 41
ADAMS, NE 68301

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

SCANNED

A

Permit Number
#5002575

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

11900 W. Agnew Rd.

Address* ~~12060~~ West Agnew Rd (no rural route) City _____, NE Zip _____

Legal Description NW 1/4 SW 1/4 Section 8 Township T12 Range R5 Subdivison _____ Addition _____ Block _____ Lot 15

PID 0608300008000 *Approx. Address (If to be determined) _____

B. Owner

Name Michael Murphy Signature _____

Address _____ City/State/Zip _____

Home Phone _____ Work Phone _____

C. Certified Installer

Name: Blain Johnson Signature _____

Address 9533 East State Hwy 41 City/State/Zip Adams NE 68301

Work Phone 402 610 2270

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 Garbage Grinder? ☐ Yes ☐ No Total Acres 19.6

☐ 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 _____
Comments _____
Date rec'd 9/5/23
Date frwd 9/5/23
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 _____

Installation Final Written Approval
By _____
Date 1/10/24

Business Office Use Only
Date Received 8-07-23 Amount Paid $460.00
Received By JAS Cash/Check No 00251

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

Form A 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 11900 west Agnew Rd (no rural route) City Valparaiso NE Zip

Owner Address

Date of Tests Sept 21 to Sept 22 Weather: Precipitation Ø Temperature 80s

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			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	9/21	11A	9/22	1P	9/22	4:30P	6	9/32	5P	30	1	30
2	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	1	30
3	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	1.25	24
4	〃	〃	〃	〃	〃	〃	〃	6	〃	〃	〃	2	15
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Blain Johnson
Phone: 402 610 2270
Address 8583 E Hwy 41
Adams NE 68301

Sum of Percolation Rates: 99
Average of Rates: 24.8
Rate Used for Calculation: 59

Soil type (NRCS Maps/Other)

Groundwater Depth 170

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

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): _____

Owner: Taylor Cox Address: 11900 west Agnew Road

A. Wastewater Piping

1. Material: Plastic Diameter: 4 in.
2. Distance between dwelling and septic tank: 190 ft.

B. Septic Tank

1. Material: concrete
2. Capacity: 500
3. Depth to top of tank, below unfinished grade: 6 in
4. Distance to:
   Well ±200 ft.
   Pressure line NA ft.
   Property Line ±50 ft.
   Foundation ±100 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 60 ft. NESW

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other E-Flow
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: 2
3. Length of each latara (linear): ft. 120 ft. 120 ft. _____ ft. _____
4. Drainfield size: 10~~x~~0 sq. ft. 1080 (750 sq ft required) NA
5. Distance to:
   Well ±200 ft.
   Pressure line NA ft.
   Property line ±50 ft.
   Depth of Groundwater 149

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

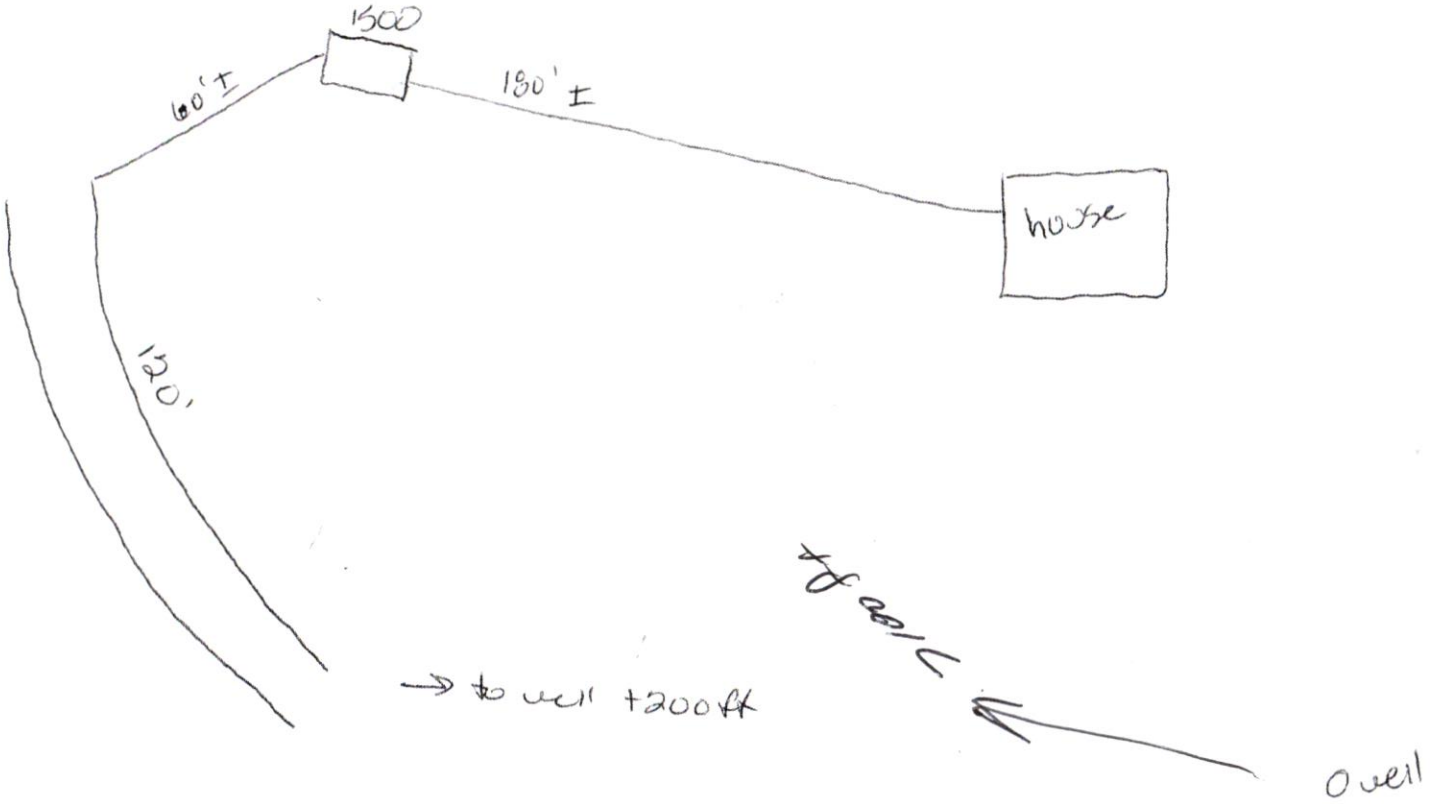
If Yes, the Certified Professional must sign below for final approval:

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: 1-9-2024

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

Updated 4.15


N
1500
60' ±
180' ±
house
120'
→ to well +200ft
well
0

Nate C. Hartman

From: RJ Hamilton
Sent: Friday, September 1, 2023 11:30 AM
To: Nate C. Hartman
Subject: 11900 W Agnew

Nate,
This address with PID **0608300008000** and legal description of **S8, T12, R5, Acres 6th Principal Meridian, LOT 15 SW** is a legal buildable lot. The lot is 20+ acres in the AG zoning district with a minimum of 550' of frontage. There is no floodplain on this property.

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

Nate C. Hartman

From: Blain <xlcontracting10@gmail.com>
Sent: Thursday, August 31, 2023 4:39 PM
To: Nate C. Hartman
Subject: Fwd: Valparaiso info

Looks like same pid, different address and same owner??

Thanks, Blain.

-------- Forwarded Message --------
Subject: Valparaiso info
Date: Thu, 31 Aug 2023 15:39:01 +0000
From: Beau Daffer <bdaffer@bicconstruction.net>
To: Blaine Johnson <xlcontracting10@gmail.com>

Nate C. Hartman

From: John V. Berry
Sent: Tuesday, August 8, 2023 10:17 AM
To: Nate C. Hartman
Subject: Sewage Disposal System PID #06-08-300-008-000

Nate,

Lancaster County Engineering Department indicates approval for a Sewage Disposal System for the property known as Lot 15 Irregular Tracts, located in the SW1/4 of Section 8, Township 12 North, Range 5 East, of the 6th Principal Meridian, Lancaster County, Nebraska. As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.

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: John V. Berry
Sent: Tuesday, August 8, 2023 10:18 AM
To: Nate C. Hartman
Subject: FW: Sewage Disposal System PID #06-08-300-008-000
Attachments: Lot 15 GIS map.pdf; Lot 15 Section Plat.PNG; Field note Lot 15.pdf

Please see the attachments

From: John V. Berry
Sent: Tuesday, August 8, 2023 10:17 AM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: Sewage Disposal System PID #06-08-300-008-000

Nate,

Lancaster County Engineering Department indicates approval for a Sewage Disposal System for the property known as Lot 15 Irregular Tracts, located in the SW1/4 of Section 8, Township 12 North, Range 5 East, of the 6th Principal Meridian, Lancaster County, Nebraska. As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.

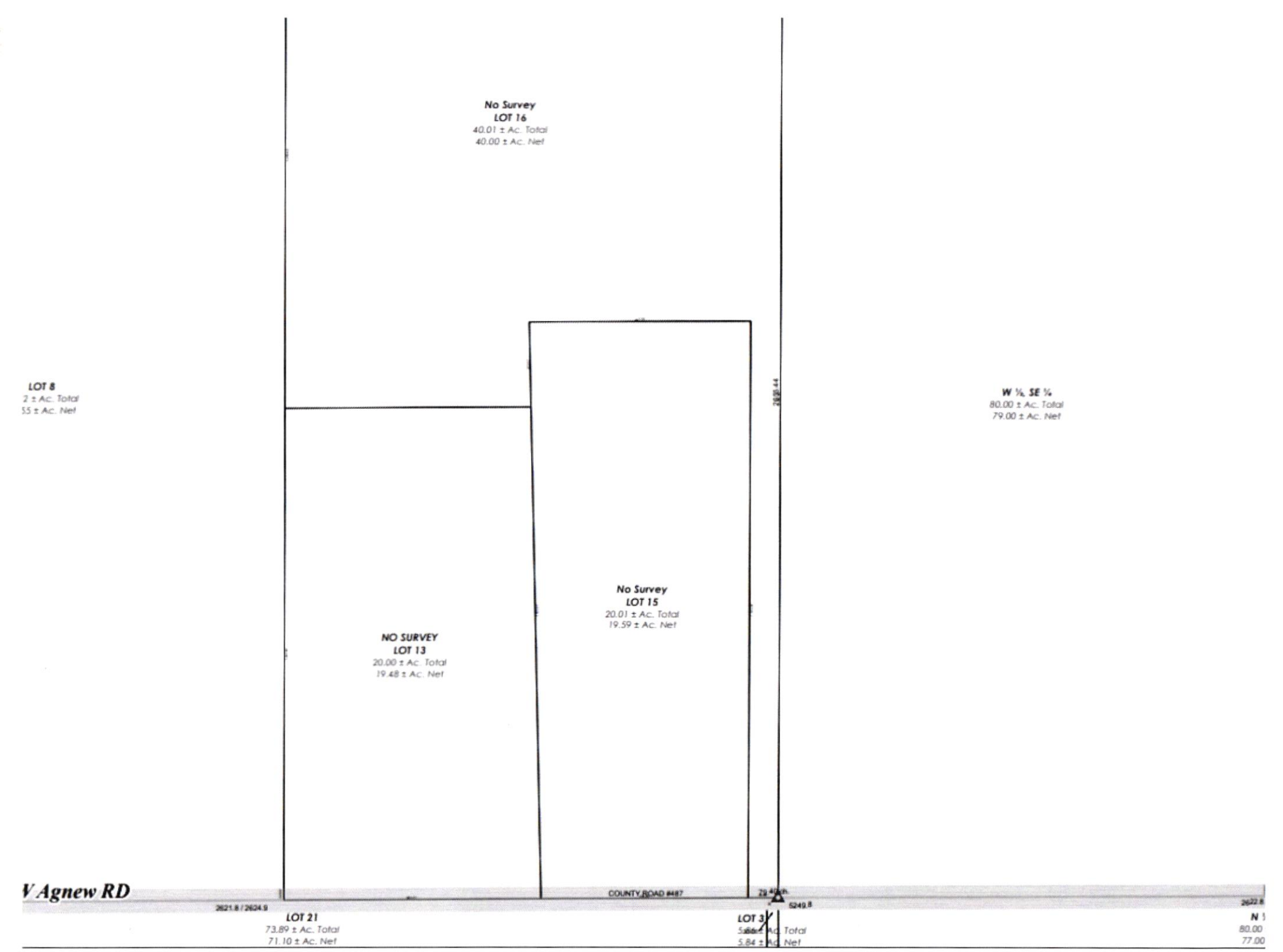
John V. Berry RLS #535
Lancaster County Surveyor
444 Cherrycreek Road, Bldg "C"
jberry@lancaster.ne.gov
Phone (402) 441-7681

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.


No Survey
LOT 16
40.01 ± Ac. Total
40.00 ± Ac. Net
LOT 8
2 ± Ac. Total
55 ± Ac. Net
W ½, SE ¼
80.00 ± Ac. Total
79.00 ± Ac. Net
No Survey
LOT 15
20.01 ± Ac. Total
19.59 ± Ac. Net
NO SURVEY
LOT 13
20.00 ± Ac. Total
19.48 ± Ac. Net
V Agnew RD
COUNTY ROAD #487
2621.8 / 2624.9
5249.8
LOT 21
73.89 ± Ac. Total
71.10 ± Ac. Net
LOT 3
5.84 ± Ac. Total
5.84 ± Ac. Net
80.00
77.00