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

A

Permit Number HS002576

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 7230 W Ranger Ridge Rd (no rural route) City Lincoln, NE Zip 68523

Legal Description: 1/4 S2 1/4 Section T9 Township R5 Range Ridge Park 1st Add Subdivison 4 Addition 6 Block Lot

PID 03-02-210-006-000

B. Owner

Name Fred Beck Signature

Address City/State/Zip

Home Phone Work Phone

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

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
Comments
Date rec'd
Date frwd
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 8-07-23 Amount Paid $460
Received By JM Cash/Check No. 008764

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

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 7230 W Ranger Ridge Rd (no rural route) City Lincoln NE, Zip 68523

Owner Fred Beck Address

Date of Tests 7/14/23 to 7/15/23 Weather: Precipitation 0 Temperature 89

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		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	36	7/14	1330	7/15	1330	7/15	1330	6	7/15	1400	30	3/4	40
2	36	7/14	1330	7/15	1330	7/15	1330	6	7/15	1400	30	3/4	40
3	36	7/14	1330	7/15	1330	7/15	1330	6	7/15	1400	30	1/2	60
								6					
								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: 140

Average of Rates: 47

Rate Used for Calculation: 40-50

Soil type (NRCS Maps/Other) 7684, Wymore Silty Clay Loam

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
CONSTRUCTION - INSTALLATION PERMIT
No. HS002576

System Type: Standard

Situs: No Site Address Specified

Issued: 8/8/2023

Expires: 8/8/2024

Description: RIDGE PARK 1ST ADDITION, BLOCK 4, Lot 6

Owner: BECK, FRED A & SANDRA L
7230 W RANGER RIDGE RD
LINCOLN, NE 68532

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
2
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 HS002576

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 7230 W Ranger Ridge Rd (no rural route) City Lincoln, NE Zip 68523

Legal Description: S2 (1/4) T9 (1/4) R5 (Section/Township/Range) Ridge Park 1st Add (Subdivison/Addition) 4 (Block) 6 (Lot)

PID 03-02-210-006-000

B. Owner

Name Fred Beck Signature

Address City/State/Zip

Home Phone Work Phone

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

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 8/3/23, 8/4/23
Comments
Date rec'd
Date frwd
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 8/14/23

Business Office Use Only
Date Received 8-07-23 Amount Paid $460
Received By JH Cash/Check No. 008764

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

Form A Updated: 1/13

* System Replacement

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

Exhibit 5

Permit Number: H5022576

Onsite Wastewater Treatment System

Inspection Sheet

Date 8/14/22 Legal Description _____
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) _____ 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 1,350 Sq. Ft. Tank Size 1,500 gals

Total length of laterals 300' Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) EZ Flow

_____

No. of Absorption Laterals 2 Width 45 factor No. of Drop Boxes _____ Distribution Box _____

Leveling Method Used base

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 DS Date 8/3/22

Follow-Up DS Date 8/4/22

Follow-Up _____ Date _____

Installation Final Written Approval
By Doug Rhoades

Date 8/14/22

Field Note Drawing (See Reverse Side):

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
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): 03-02-210-006-000

Owner: Fred Beck Address: 7230 W. Ranger Ridge Rd.

A. Wastewater Piping

1. Material: PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 67 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 134 ft.
   Pressure line – ft.
   Property Line – ft.
   Foundation 67 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 8 ft. NW

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. 150 ft. 150 ft. ____ ft. ____
4. Drainfield size: 1350 sq. ft.
5. Distance to:
   Well 148 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: 8-8-23

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


Tank to;
Well = 134'
Home = 67'
Lateral = 8'
1500g Infiltrator Tank
GPS;
N40.779418*
W-96.819789*
N
7230 W Ranger
Ridge Rd