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

A

Permit Number HS002609

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* 5400 W McKelvie Rd (no rural route) City Lincoln, NE Zip 68524

Legal Description SW (1/4) SW (1/4) 19 (Section) 11N (Township) 6E (Range) Virginia (Subdivison) 2 (Lot)

PID 12-19-301-002-000 *Approx. Address (If to be determined)

B. Owner

Name Jerrid Halvorsen Signature

Address 5400 W McKelvie Rd City/State/Zip Lincoln, NE 68524

Home Phone 402-730-8314 Work Phone

C. Certified Installer

Name: Terri Jakoubek Signature Terri L. 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 3 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 5.76

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 11-07-23 Amount Paid $410

Received By JAV Cash/Check No. CC5047

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

Form A Updated: 2/18

FORM HD- 43(73) 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 475-6221)

FILE NO. 1335

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).

Owner: _____
Address _____

Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☒

Dates of Tests: June 1 78 to June 2-78. Weather: Precip. 0 Temp. 70 F.

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings					Results		
		Start		End		Start			End				
Hole 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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	32"	6/1	5 PM	6/2	4 3⅝ PM	6/2	4 3⅝ PM	12"	7 3⅝ PM	3	30 M	1	30
2										5		3¼	40
3										5¼		3¼	40
4										5⅛		1⅛	34
5										5		¾	40
6										3½		1	30

Sum of Percolation Rates 214
Average of Rates: 37
Mean of Rates: 37

Robert D Johnson
Signature of Person Conducting Test

Address 2618 No 3rd
Phone: 432 3595

(Do not write below this line)

REVIEWING ACTION

REMARKS: Harpersburg Silty Clay Loam (S.C.S.)

DATE: June 6, 1978

Approved Percolation Rate(s)
A. 34 min./inch
B. _____ min./inch
C. _____ min./inch

Gerald C. Hood
Signature of Reviewing Official

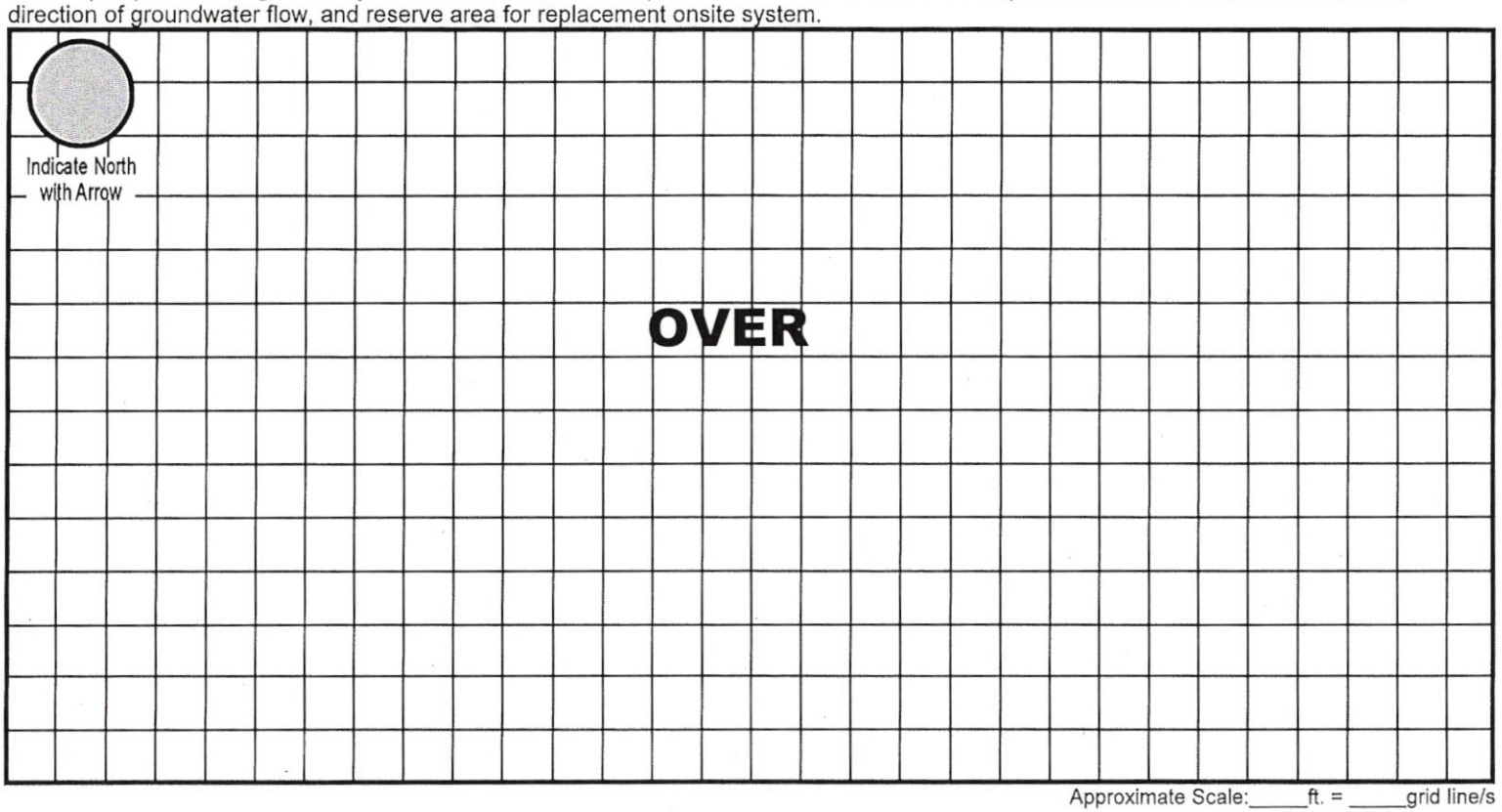
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

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

A. Onsite System Location

Address (no rural route) 5400 W McKelvie Rd City Lincoln NE, Zip 68524

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 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

Existing 200' of laterals are concrete 1/2 moons in a 3' trench with gravel for 600sqft of drainfield.

D. Drainfield Absorption System NEW

Percolation Rate 37 (min/inch = mpi) No. of Bedrooms 3 Soil Type Aksarben 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

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

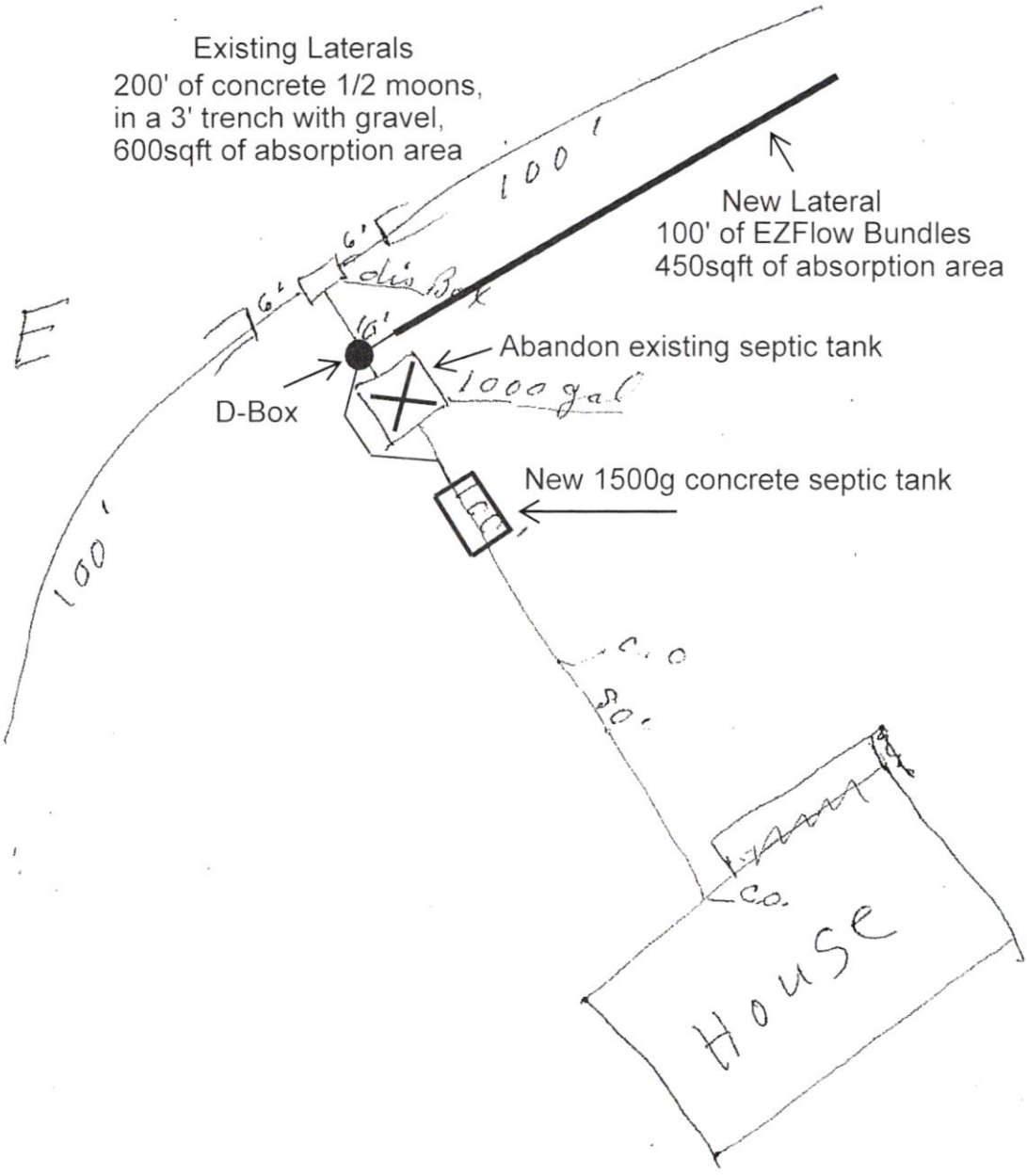
No. of Absorption Beds _____ Width _____ No. of Distribution Lines per Bed _____

Installer Mark L. Jakobek Date: 11/6/23

AS BUILT DRAWING OF SYSTEM

DATE 6-22-78 INSTALLER Jims digging ~~Service~~.

50



NO

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. HS002609

System Type: Standard

Situs: No Site Address Specified

Issued: 11/15/2023

Expires: 11/15/2024

Description: VIRGINIA ADDITION, Lot 2

Owner: HALVORSEN, JERRID R
5400 W MCKELVIE RD
LINCOLN, NE 68524

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

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

SCANNED

A

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Onsite Wastewater Treatment System Permit Application

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B. Owner

Name Jerrid Halvorsen Signature

Address 5400 W McKelvie Rd City/State/Zip Lincoln, NE 68524

Home Phone 402-730-8314 Work Phone

C. Certified Installer

Name: Terri Jakoubek Signature Terri L. 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 3 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 5.76

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

Comments

Date rec'd 11/15/23
Date frwd 11/15/23

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 12/1/23

as-built

Business Office Use Only
Date Received 11-09-23 Amount Paid $470
Received By SAD Cash/Check No. cc5044

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

Form A Updated: 2/18

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

D

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 PID = 12-19-301-002-000

Address or Legal Description or Parcel Identification Number (PID) 5400 W McKelvie Rd, Lincoln, NE 68524

Owner: Jerrid R Halvorsen Address 5400 W McKelvie Rd, Lincoln, NE 68524

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 8 ft. New / 145 Existing

B. Septic Tank

1. Material Concrete
2. Capacity: 1500g
3. Depth to top of tank, below unfinished grade: 40 in.
4. Distance to:
   - Well 400 ft. +
   - Pressure line N/A ft +
   - Property Line 25 ft. +
   - Foundation 100 ft. +

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 30 ft. S

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other

   Material brand and inside width of Chamberless:
   New = EZFlow 1203H Bundles
   Existing = Concrete 1/2 moons
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 100 (new) ft. 100 (existing) ft. 100 (existing) ft. _____
4. Drainfield size: 1,050 sq. ft. (825 Required)
5. Distance to:
   - Well 500 ft. +
   - Pressure line N/A ft. +
   - Property line 5 ft. +
   - Depth of Groundwater >8'

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☑ Yes (Partially) ☐ 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: Kevin L. Jakowski Date: 11/8/23

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

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

A

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Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received Amount Paid
Received By Cash/Check No.

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

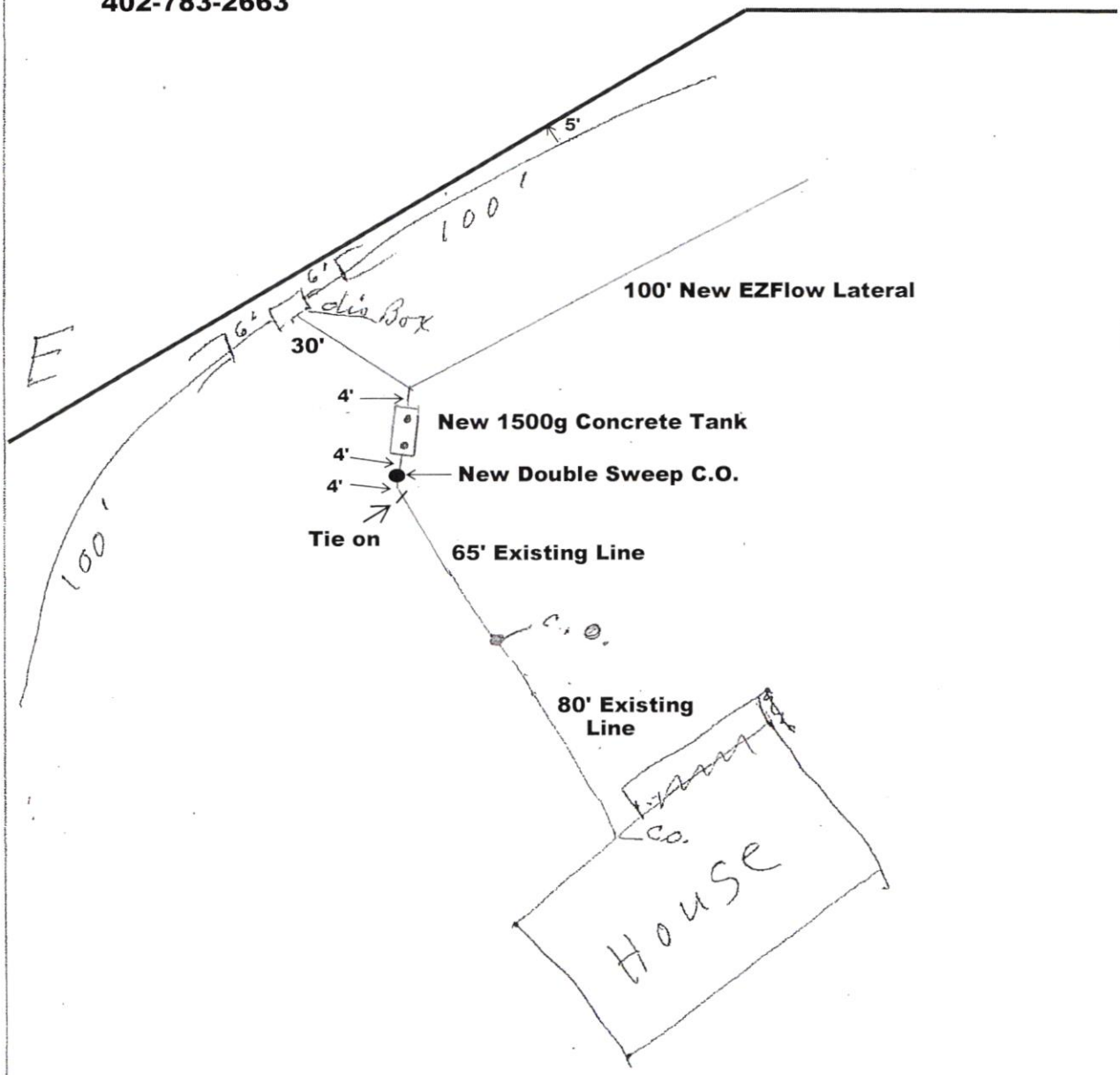
Form A Updated: 2/18

AS BUILT DRAWING OF SYSTEM

DATE 6-22-78. INSTALLER ~~Jims digging Ser~~.

50

Repair 11/8/23
Raymond Contracting Inc
13800 NW 70th St
Raymond, NE 68428
402-783-2663



NO

Nate C. Hartman

From: Terri Jakoubek <jakoubek63@windstream.net>
Sent: Tuesday, November 21, 2023 7:49 AM
To: Nate C. Hartman
Cc: Doug R. Smith
Subject: 5400 W McKelvie D-Sheet
Attachments: Halvorsen signed A Sheet.pdf; 5400 W McKelvie D-Sheet.pdf

5400 W McKelvie Rd D-Sheet is attached along with a copy of the signed A Sheet.

Thanks,

Terri Jakoubek
Raymond Contracting, Inc.
13800 NW 70th St
Raymond, NE 68428
402-783-2663 (Office)
402-890-3870 (Mobile)
jakoubek63@windstream.net