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

A

Permit Number HS002625

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* 9255 SW 98th St (no rural route) City Denton, NE Zip 68339

Legal Description: NE (1/4) SE (1/4) 28 (Section) 9N (Township) 5E (Range) Tall Grass Hills (Subdivison) 2 (Block) (Addition) (Lot)

PID 03-28-401-002-000 *Approx. Address (If to be determined)

B. Owner

Name Matt & Traci Mellor Signature DocuSigned by: Matthew Mellor C03736D6E53C409...

Address 6552 Las Verdes Ln City/State/Zip Lincoln, NE 68523

Home Phone Matt 402-309-0261 Traci 307-690-2645 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 5 Whirlpool Bathtub? ☑ Yes ☐ No Total Acres 3.79

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 Date frwd 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
Date

Business Office Use Only
Date Received 3-01-24 Amount Paid $470
Received By JAC Cash/Check No. cc 5040

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

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 Tall Grass Hills Lot 2 (no rural route) City Denton NE, Zip NE

Owner Matt & Traci Mellor Address 6552 Las Verdes, Lincoln, NE 68523

Date of Tests 9/5/23 to 9/6/23 Weather: Precipitation 0 Temperature 73°

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	72	9/5	1:30p	9/6	9:00a	9/6	12:30p	6	9/6	1:00p	30	1	30
2	72	9/5	1:30p	9/6	9:00a	9/6	12:30p	6	9/6	1:00p	30	1/2	60
3	72	9/5	1:30p	9/6	9:00a	9/6	12:30p	6	9/6	1:00p	30	2-1/2	12
4	72	9/5	1:30p	9/6	9:00a	9/6	12:30p	6	9/6	1:00p	30	1-1/4	24
5								6			30		-
6								6			30		-
7								6					
8								6					

Person Conducting Percolation Test

Name: Vern Jakoubek

Phone: 402-783-2663

Address 13800 NW 70th St Raymond, NE 68428

Sum of Percolation Rates: 126

Average of Rates: 32

Rate Used for Calculation: 60 (20 mpi variance)

Soil type (NRCS Maps/Other) Burchard CL

Groundwater Depth >12'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

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

Signature of Reviewing Official Date

DocuSign Envelope ID: 5C315686-7ED1-499A-96AD-72826407C944

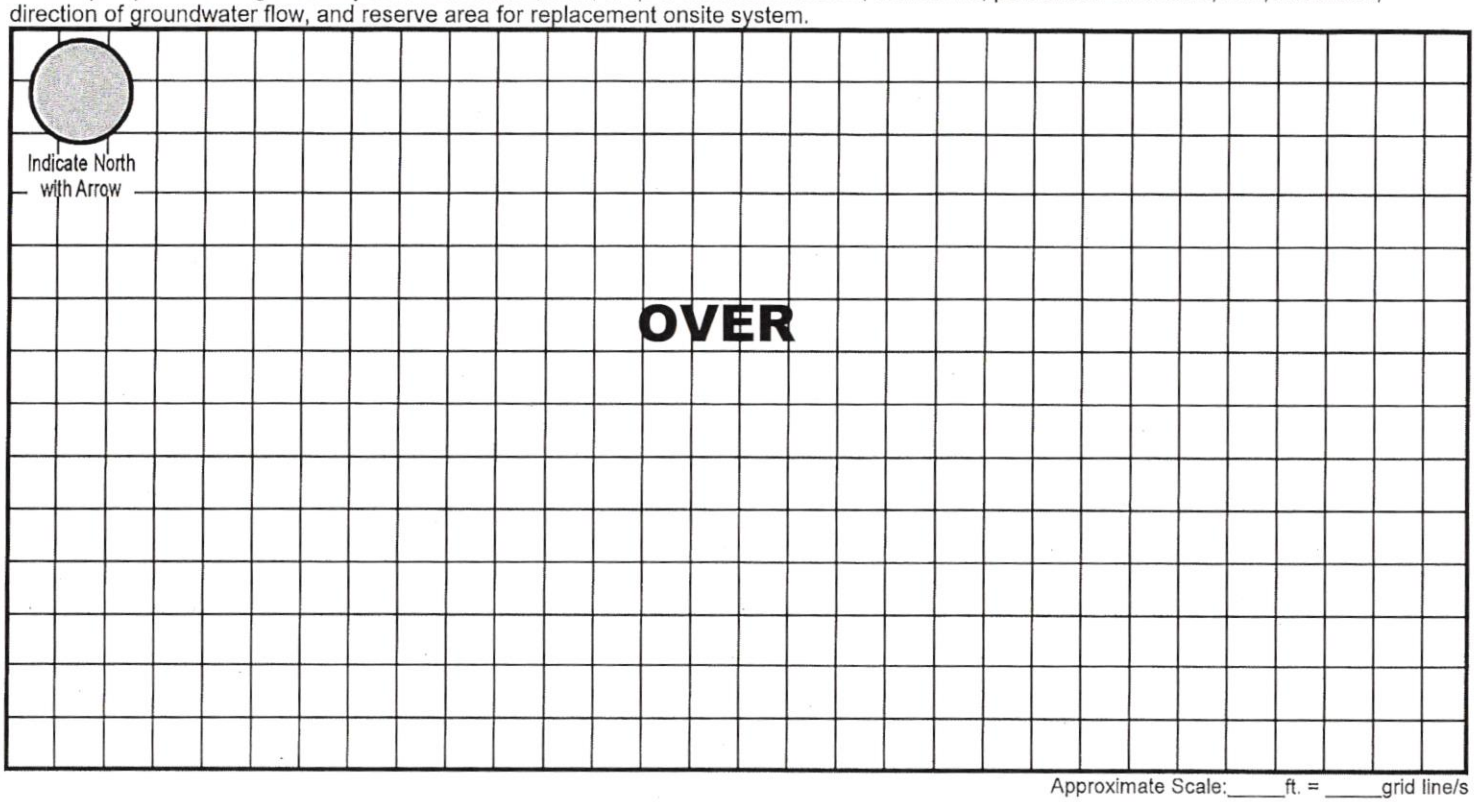
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

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) 9255 SW 98th St City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. 2000 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

(5' - 6' deep drainfield trenches lined wth 1' - 2' of gravel)

D. Drainfield Absorption System

Percolation Rate 60 (min/inch = mpi) No. of Bedrooms 5 Soil Type Burchard CL Land Slope _____ %

☑ Trench ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) Total square feet of drainfield 1,755 Sq. Ft.

Total length of laterals 390 Type of Distribution: ☐ Perforated Pipe ☐ Half-Round ☐ Chambers ☑ Other EZFlow 1203H

No. of Absorption Trenches 4 Width 38" No. of Drop Boxes 1 Distribution Box _____

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

Installer Nesi L. Jahnsen Date: 1/24/23

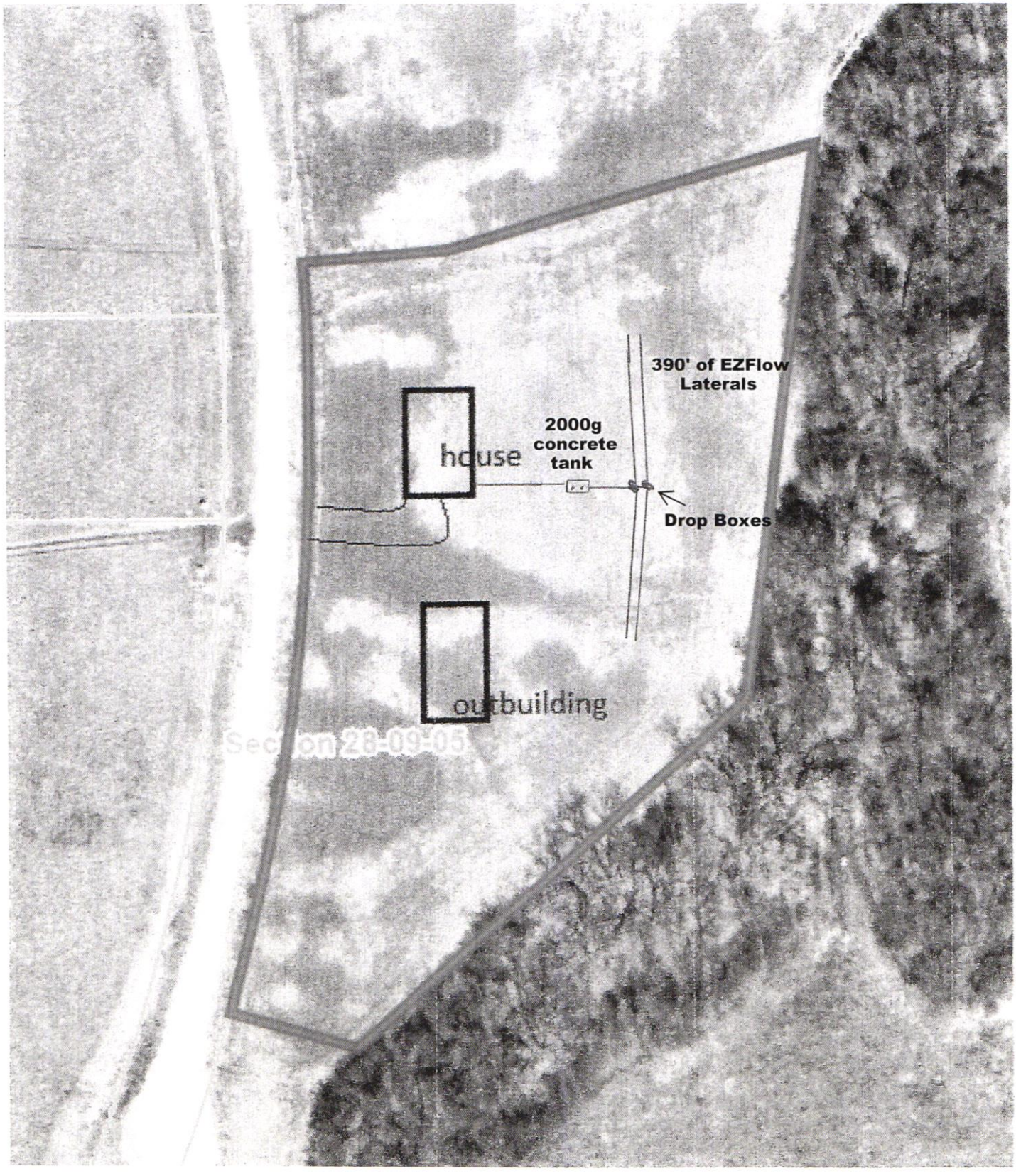
Updated 2/18

Builder Maria Semerad Date: 1/24/24

DS

MS

9255 SW 98th St, Denton, NE 68339



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. HS002625

System Type: Standard

Situs: No Site Address Specified

Issued: 2/7/2024

Expires: 2/7/2025

Description: TALL GRASS HILLS ADDITION, Lot 2

Owner:

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
MALCOLM, NE 68428