Lincoln-Lancaster County Health Department

ENVIRONMENTAL PUBLIC HEALTH DIVISION

3140 N STREET · LINCOLN, NE 68510-1514

008195

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 05380309101

Issued 09/07/05
Expires 09/07/06
Revenue Code 3157

Establishment: CHAD IDEUS
T7N R8E SEC 34 QTR SW
28888 S 148 ST

FEES: $200.00

Permittee: CHAD IDEUS
340 S 53 ST
LINCOLN NE 68510

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

SEP 0 6 2005

A

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

Permit Number: 05380309101

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 28888 S. 148th St. (no rural route) City Adams NE, Zip NE 68301

Legal Description SW/4 34 7N 8E SEE ATTACHED
1/4 | 1/4 | Section | Township | Range | Subdivision | Addition | Block | Lot

Geographical Location (if known): Longitude _____ Latitude _____

☒ Check if system mail address is not the same as the owner's address

B. Owner

Name Chad Ideus Signature _____

Address 340 S. 53 City/State/Zip Lincoln NE 68510

☐ Check if owner designed system Home Phone 402-327-8697 Work Phone 402-416-1488.

C. Contractor

Name Butch Jobman Company Name Jobman Enterprises

Address _____ City/State/Zip Adams, NE 68301

☐ Check if contractor designed system Work Phone 402-525-6216

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name Same Firm _____ Work Phone _____

E. This System Will Serve a

☒ Residential Dwelling Number of Bedrooms 4 Is there a Whirlpool Bathtub 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. 2832

1. **Health Department** Date rec'd 9/6/05 Date frwd 9/7/05 ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ ACTION ☒ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd 9-7-05 Date frwd 9-7-05 ACTION ☒ Approved ☐ Disapproved Signature Jim Blouzek

10/27/05 Need letter from ~~Engineer~~, etc. & E.H.

Installation Final Written Approval

By Jerrold C. Hood R.E.H.S.

Date August 29, 2006

Business Office Use Only
Date Rec'd 09/07/05
Amt Paid 200.00
Rec'd By _____ Cash/Check No. 1436

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

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

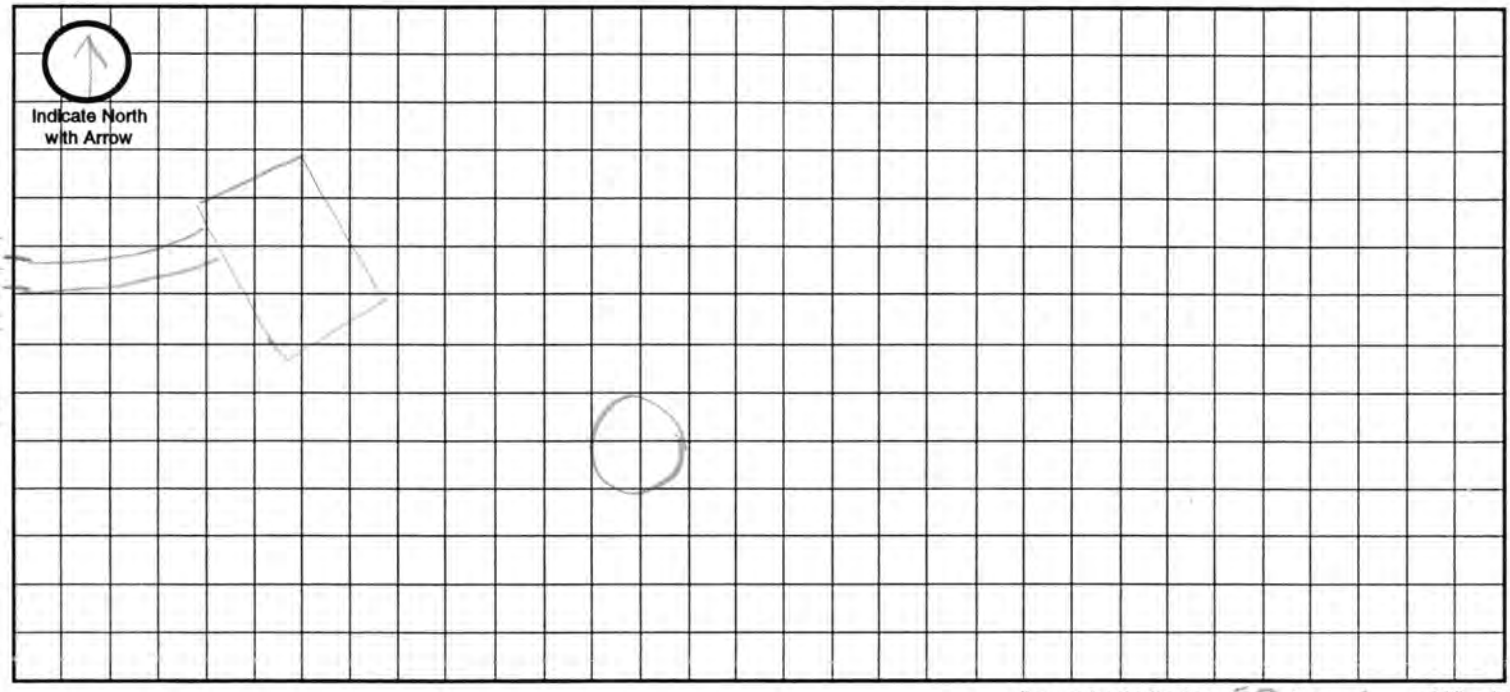
SEP 0 8 2005

C

Permit Number: 05380309/

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: 50 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 28888 S 148th Rd City Adams NE, Zip 68301

B. Proposed Septic Tank/s

Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate _____ (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☐ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: _____ sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank _____ gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals _____ ft. Number of Trenches _____ Trench Width _____

D. 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 ☐	30 ☐	20 ☐	30 ☐	40 ☐	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor _____ Date 9/6/05

Installer _____ Date 9/6/05

FORM 23-102 10-96

SEP 0 6 2005

Nebraska Department of Environmental Quality

Onsite Wastewater Treatment System Program

Be it known that

Richard A. Jobman

has met the requirements for provisional certification as an onsite wastewater system

Installer - Layout Specialist - Site Evaluator - Inspector

as required by the Nebraska Private Onsite Wastewater Treatment System Contractors Certification and System Registration Act, and is hereby certified as a Certified Onsite Wastewater Treatment System Professional in the category or categories listed herein.

Provisional Certificate No. P1714

Date: September 6, 2005
Expiration Date: December 31, 2005

Signature of Certified Professional

Mary Wilson
NDEQ Staff

Nebraska Department of Environmental Quality
Richard A. Jobman
is hereby certified as a
Certified Onsite Wastewater Treatment System Professional
in the following categories:
Installer - Layout Specialist - Site Evaluator - Inspector
Provisional Certificate No. P1714
Issue Date: 9/6/2005
Expiration Date: 12/31/2005

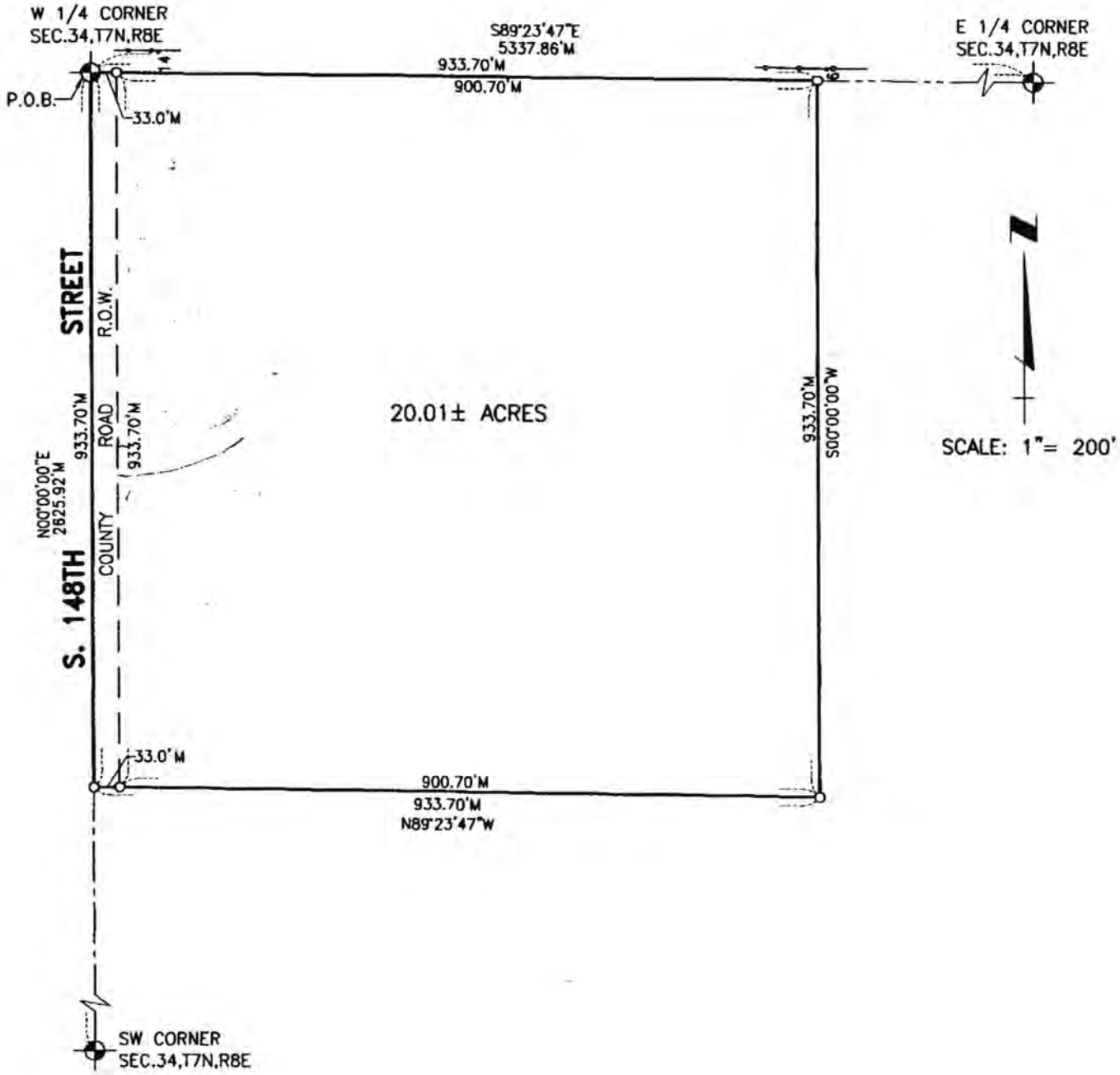
NDEQ

Nebraska Department of Environmental Quality

Suite 400, The Atrium
1200 "N" Street
P.O. Box 98922
Lincoln NE 68509-8922
402-471-2186
402-471-2909 (fax)
www.deq.state.ne.us

SURVEY RECORD

PREPARED BY
L & S SURVEYING
PO. BOX 354 CRETE, NE 68333
(402) 826-4620 FAX (402) 826-4646



LEGAL DESCRIPTION

A tract of land located in the SW¼ of Section 34, T7N, R8E of the 6th P.M., Lancaster County, Nebraska, described as follows:

Beginning at the NW Corner of said SW¼; thence S89°23'47"E (Assumed Bearing) on the north line of said SW¼, 933.70 feet; thence S00°00'00"W parallel with the west line of said SW¼, 933.70 feet; thence N89°23'47"W parallel with the north line of said SW¼, 933.70 feet to the west line of said SW¼; thence



LEGAL DESCRIPTION

A tract of land located in the SW¼ of Section 34, T7N, R8E of the 6th P.M., Lancaster County, Nebraska, described as follows:

Beginning at the NW Corner of said SW¼; thence S89°23'47"E (Assumed Bearing) on the north line of said SW¼, 933.70 feet; thence S00°00'00"W parallel with the west line of said SW¼, 933.70 feet; thence N89°23'47"W parallel with the north line of said SW¼, 933.70 feet to the west line of said SW¼; thence N00°00'00"E on said west line 933.70 feet to the point of beginning. Containing 20.01 acres more or less.

SURVEYOR'S CERTIFICATE

I, Leslie J. Siedschlag, a Registered Land Surveyor in the State of Nebraska, hereby certify that this survey was made under my direct supervision on, July 21, 2005 and that all dimensions shown are in feet and decimals of a foot and correct to the best of my knowledge and belief.

Leslie J. Siedschlag, Nebraska L.S. No. 469

NEBRASKA REGISTERED LS-469 LAND SURVEYOR LESLIE J. SIEDSCHLAG

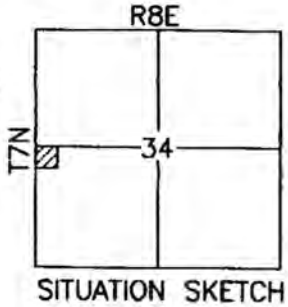
Date of Completion; July 27, 2005

SHEET 1 OF 1

OVER

LEGEND

- Corners Found
- Corners Found
- Corners Set (5/8"Rebar W/L&S Cap)
- Survey Marker W/Washer
- Temporary Point
- R Record Distance
- M Measured Distance
- Fence



SITUATION SKETCH

CAD by FLYING R (138-705)

Page: 003-003
Date: 9/6/05 Time: 4:16 PM To: @ 9441620 6 Attn: Jerry

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

D

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 10-25-05 chad Ideus

System Location (Indicate correct number and street)

Address 28888 S. 148 ST. (no rural route) City Firth NE, Zip 68358

A. Building Sewer

1. Material: _____
   Diameter: _____ in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: _____ ft.
4. Number of clean-outs: _____
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. Septic Tank

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

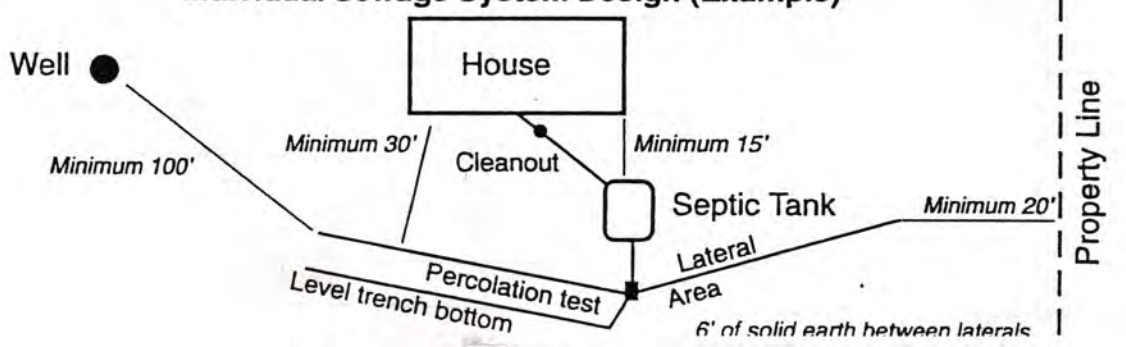
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Complete "As Built" drawing on back of this form.

Indicate North with Arrow

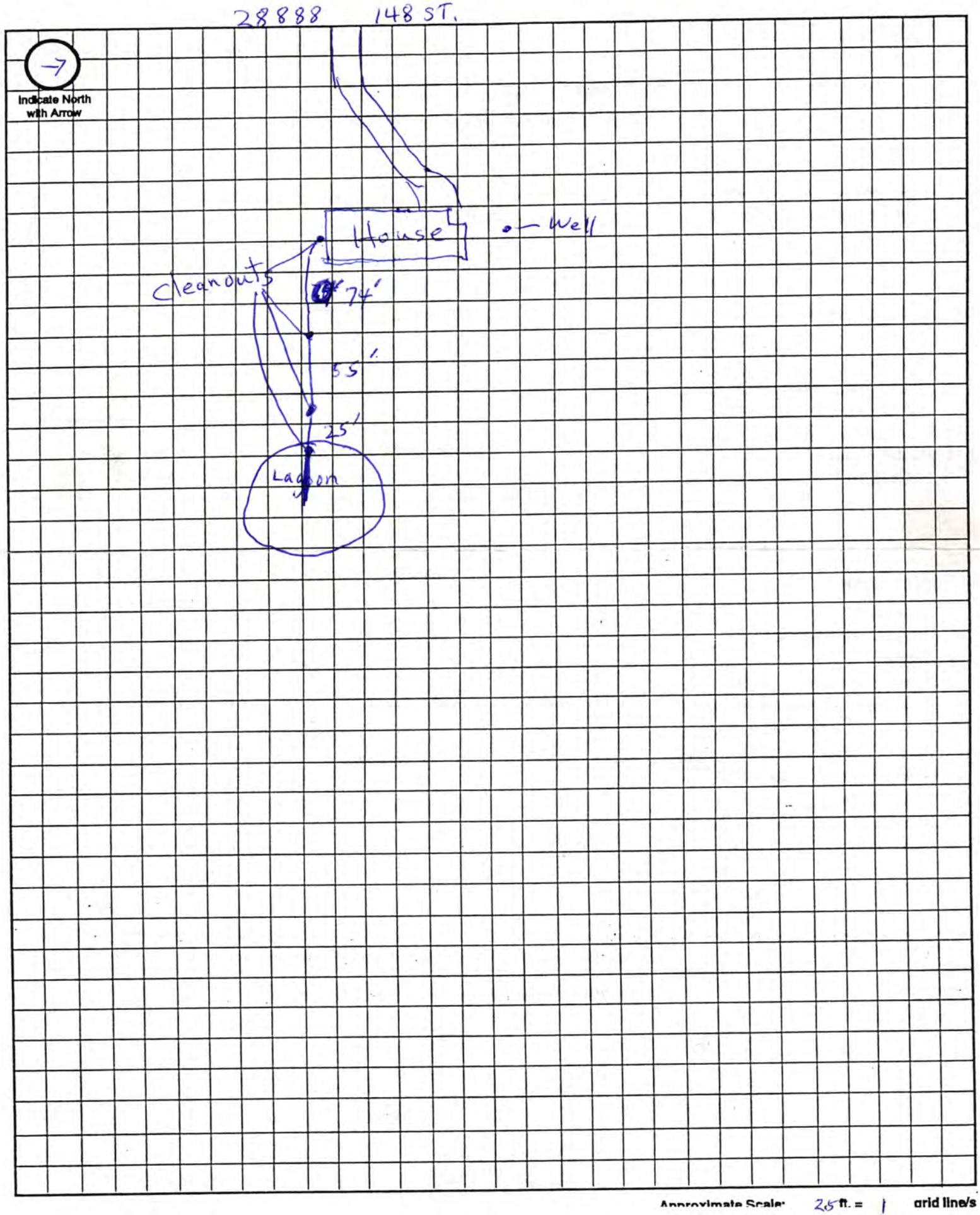
Individual Sewage System Design (Example)



CHAD IDEUS

As Built Drawing

28888 148 ST.



Approximate Scale: 25 ft. = 1 grid line/s