Lincoln-Lancaster County Health Department
ENVIRONMENTAL PUBLIC HEALTH DIVISION

005707

3140 N STREET · LINCOLN, NE 68510-1514

(402) 441-8000

Permit: SEWAGE INSTALLATION
LAGOON

Permit # 04380289201

Issued 09/15/04
Expires 03/15/05
Revenue Code 3157

Establishment:
GENE THOMPSON
T12N R6E SEC 7 QTR SW
LOT 12IT
5400 W AGNEW RD-VALPARAISO

FEES: $200.00

Permittee:
GENE THOMPSON
19600 NW 126 ST
RAYMOND NE 68428

TOTAL: $200.00

Bruce D. Dart

Bruce D. Dart, Health Director

EPH COPY

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

A

Permit Number: 04380289201

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 5400 W AGNEW (no rural route) City VALPARAISO NE, Zip 68065

Legal Description SW (1/4) 7 (1/4) 12N (Section) 6E (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 GENE THOMPSON Signature Gene Thompson

Address 19600 NW 126TH City/State/Zip RAYMOND NE 68428

☐ Check if owner designed system Home Phone 784 2030 Work Phone _____

C. Contractor

Name STAN KROESE Company Name DIRTWORKS PLUS INC

Address 7801 LEXINGTON City/State/Zip LINCOLN NE 68507

☑ Check if contractor designed system Work Phone 560 1208

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

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☑ Residential Dwelling Number of Bedrooms 2 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** (9-17-04 per Health Dept, 10-12-04 per Gene)
   Date rec'd 9/15/04 Date frwd 9/15/04
   ACTION ☒ Approved ☐ Disapproved Signature Jerrold C. Hood
2. **Supt. Bldg. Insp. or Village Clerk**
   Date rec'd 9-15-04 Date frwd 9-15-04
   ACTION ☒ Approved ☐ Disapproved Signature Shawn Johnson
3. **City or County Engineer**
   Date rec'd 9/15/04 Date frwd 9/15/04
   ACTION ☒ Approved ☐ Disapproved Signature

Installation Final Written Approval

By Ron Maynard

Date 10-12-05

Business Office Use Only

Date Rec'd 09/15/04

Amt Paid 200.00

Rec'd By _____ Cash/Check No. 7173

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

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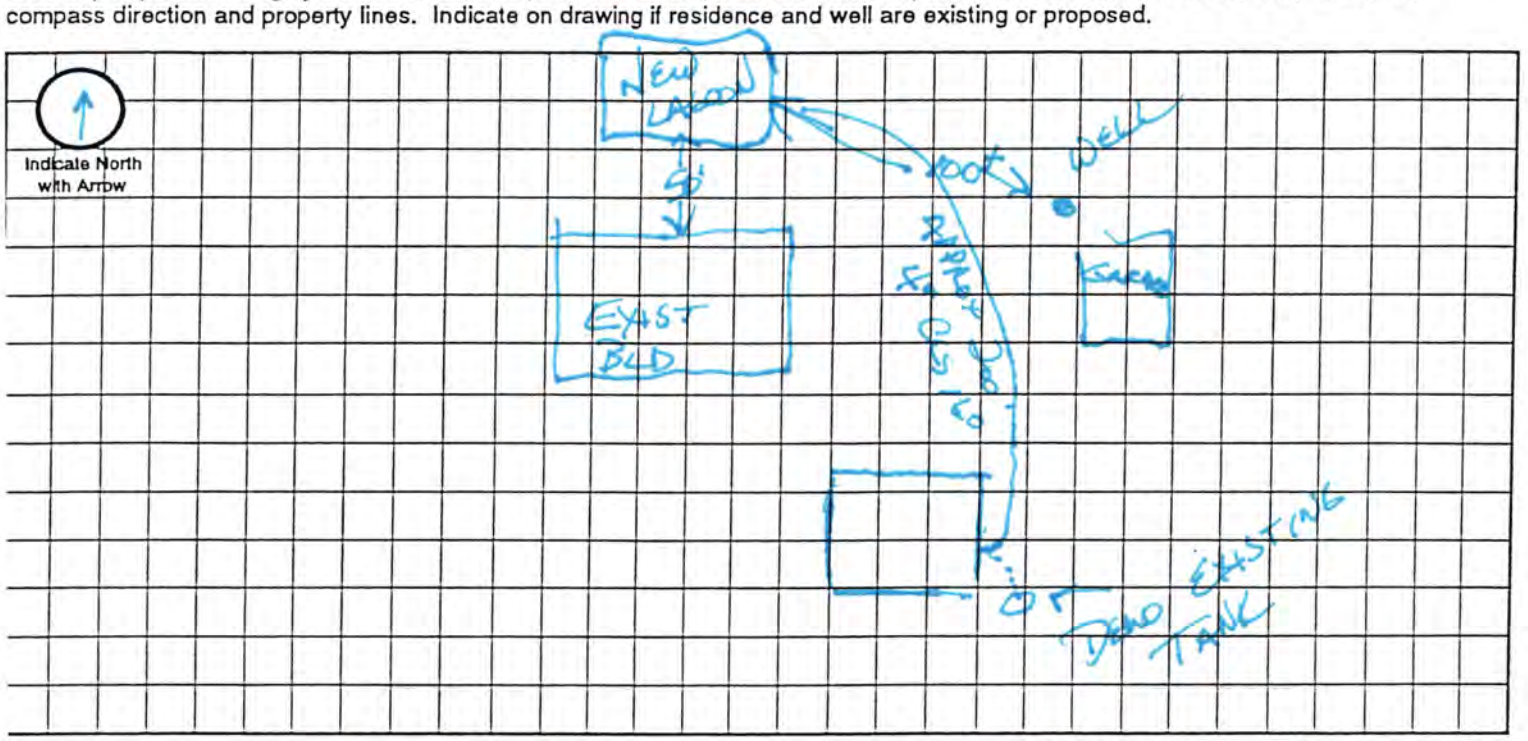
C

Permit Number: 043802892

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: _____ ft. = _____ grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 5400 W AGNEW City VALPARAISO NE, Zip 68065

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 Gene Thompson Date 8/28/04

Installer _____ Date 8/29/04

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

D

Permit Number: 043802892

Sewage Disposal System

As Built Plans & Specifications

Date 9/17/04

System Location (Indicate correct number and street)

Address 5400 W AGNEW (no rural route) City WALPEAISO NE, Zip 68065

A. Building Sewer

1. Material: CLS 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 12 in.
3. Distance between dwelling and septic tank: 219 ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line 60 ft.
   stream 100+ ft.
   pressure line 100 ft.
   property line 100+ 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

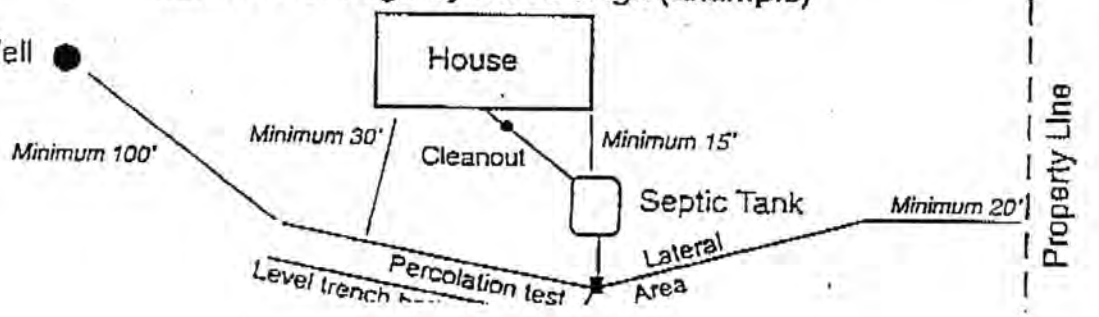
(Provide as-built drawings on back of this form)

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.

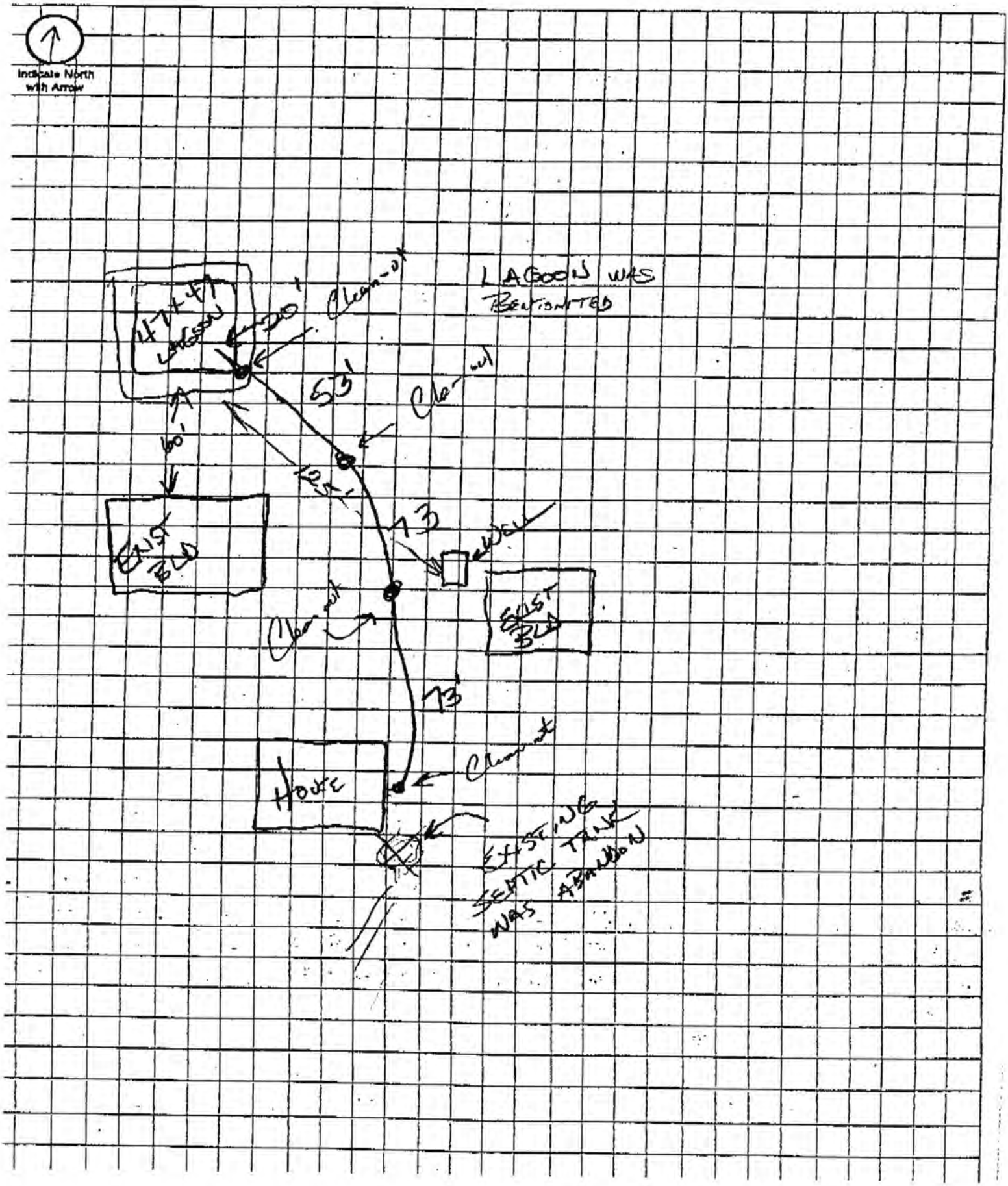
Indicate North with Arrow

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

Individual Sewage System Design (Example)



As Built Drawing



Post-it™ brand fax transmittal memo 7671	# of pages ▸
To Stan Kroese	From Geri Ault Thompson
Co. Dirt Works Plus	Co. Dynamic Investments
Dept.	Phone # 402-784-2030
Fax # 402-325-0530	Fax #

WARRANTY DEED

Kevin K. Kothe and Pamela K. Kothe, husband and wife, (Grantor) in consideration of one dollar and other valuable considerations from **Grantee**, do convey to **Dynamic Investments, Inc. (Grantee), a Nebraska Corporation,** the real estate (as defined in Neb. Rev. Stat. 76-201) in **Lancaster** County, Nebraska, described as follows:

Lot Twelve (12), Southwest Quarter of Section Seven (7), Township Twelve (12) North, Range Six (6) East of the 6th PM, Lancaster County, Nebraska. (SW7-12-6) (Commonly known as: 5400 West Agnew Road, Valparaiso, NE)

Grantor hereby covenants jointly with the **Grantee** that:

1. **Grantor** is lawfully seised of such real estate and that it is free from encumbrances subject to easements, reservations, covenants and restrictions of record.

2. **Grantor** has legal power and lawful authority to convey the same.

3. **Grantor** warrants and will defend the title to the real estate against the lawful claims of all persons.

Executed this 5th day of August, 2004.

Kevin K. Kothe

Pamela K Kothe

Pamela K. Kothe

STATE OF NEBRASKA
COUNTY OF LANCASTER

On this 5 day of August, 20 04, **Kevin K. Kothe and Pamela K. Kothe, husband and wife,** personally know to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument.

Notary Public

GENERAL NOTARY - State of Nebraska
SCOTT J. WILLIAMSON
My Comm. Exp. Sept. 4, 2005
Seal