Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, NE 68510-1514

ON-SITE WASTE WATER SYSTEM
REPAIR PERMIT

No. HS000360

System Type: LAGOON

Situs: 10821 S 56 ST

Legal Description: T09N-R07E-S32

Owner: FIRST STATE BANK

HICKMAN NE
68372

Permit Fee: $180.00

Total Fees: $180.00

Issued: 05/21/2010
Expires 06/03/2011

Bruce D. Dart, PhD, Health Director

Dear Applicant:

The above document is your permit to repair an existing On-site Waste Water System at the location listed. Please contact this office once repairs are complete to obtain final approval before use.

Bruce D. Dart, PhD
Health Director

SOUTHWICK SEWER
PO BOX 191
HICKMAN NE 68372

LLCHD HS000360

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

HS000360

The undersigned hereby applies for a permit to: ☒ **ALTER** ☐ **EXTEND** ☐ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township 9N Range 7E 1/4 ____ 1/4 ____ Section 32
   Block ____ Lot ____ Addition ____
   Parcel ID ____-____-____-____-____-____ (i.e. 99-99-999-999-999)

   Street Address (no rural route) 10821 S. 56

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 2 Describe ____

3. **Type of Present Individual Disposal System** ☐ septic system ☒ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** build lift station to move lagoon to open area

5. **Work to be done by:** ☐ owner ☒ contractor's name Brad Southwick Southwick Sewer + Drain

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Home Realty Address ____ Phone: ____

Applicant Signature (owner or lessee) Jeff Searcy

Please include the permit fee ($150) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

Date received 5/26/10 REVIEW: ☑ Approved ☐ Disapproved By: ____

Site visits
Date ____/____/____ By ____
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date ____/____/____ By ____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only

Received: Date: ____/____/____ Amount ____ Check No. ____ Initials ____

White - Division Copy Pink - Business Office Revised 9-05

5-21-2010 9:16:40

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

B

Permit Number: HS 000360

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

Sec 8 8N 8E
SW/4 SW/4

System Location (Indicate correct number and street)

Address 52 120 (no rural route) City Bennet NE, Zip 68317

Owner Duane Parrish Addresss

Soil Type (SCS): Percolation Rate: min./inch

Date of Tests 5/12/10 to Weather: Precipitation .65 Temperature 54°

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					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)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	24	5/12	8:00	5/12	12:00	5/12	1:30	20 1/8	5/12	2:00	30	7/8	33
2			AM		PM		P	21 3/8		P		3/4	40
3								21 7/8				3/4	40
4								20 5/8				3/4	40
5								21/4				3/4	40
6								21 5/8				5/8	48

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 430-7606
Address P.O. 191 105 Locust
Lincoln, Ne 68372

Sum of Percolation Rates: 241
Average of Rates: 40.16
Rate Used for Calculation: 40

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96
5-21-2010 9:16:47