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. HS000497

System Type: STANDARD

Situs: No Situs

Legal Description: T09N-R05E-S26-7-Lot 3

Owner: MILD, MICHAEL B & MARY W
8250 W GINKGO LN
DENTON NE
68339

Permit Fee: $185.00

Total Fees: $185.00

Issued: 06/08/2011
Expires 06/07/2012

Judith A Halstead

Judith A. Halstead, MS, 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.

Judith A Halstead

Judith A. Halstead, MS
Health Director

SOUTHWICK SEWER
PO BOX 191
HICKMAN NE 68372

LLCHD HS000497

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

☐ Municipal Code 24.38 ☒ County Resolution Number 02-30

HS000497

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 5E 1/4 ____ 1/4 ____ Section 26
   Block ____ Lot ____ Addition ____
   Parcel ID ____-____-____-____-____ (i.e. 99-99-999-999-999)
   Street Address (no rural route) 8250 GINKO LANE

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

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

4. **Description of proposed alteration, extension or repair** Extend Lateral 85' w/ Infiltrator

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 Mike Mild Address 8250 GINKO LN Phone: ____

Applicant Signature (owner or lessee) ____

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received 6/7/11 REVIEW: ☑ Approved ☐ Disapproved By: ____

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

Installation final written approval
Date 6/8/11 By ____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: 6/8/11 Amount 185.00 Check No. 1315 Initials BM

Revised 3-09

6-9-2011 13:43:35

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

B

Permit Number:

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 6290 GINKO LN (no rural route) City Dunbar NE, Zip 68339

Owner Mike Mild Addresss

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

Date of Tests 1/28 to 1/29 Weather: Precipitation — Temperature 30-40

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	36					1/29	1:20	12½	1/29	1:50	30	2	15
2	↓						PM	13				1¾	18
3	↓							14¼				1⅞	19

Person Conducting Percolation Tests

Name: Brad Southard

Phone: 430-7606

Address 105 Locust

Hickman Ne 68372

Sum of Percolation Rates:

Average of Rates:

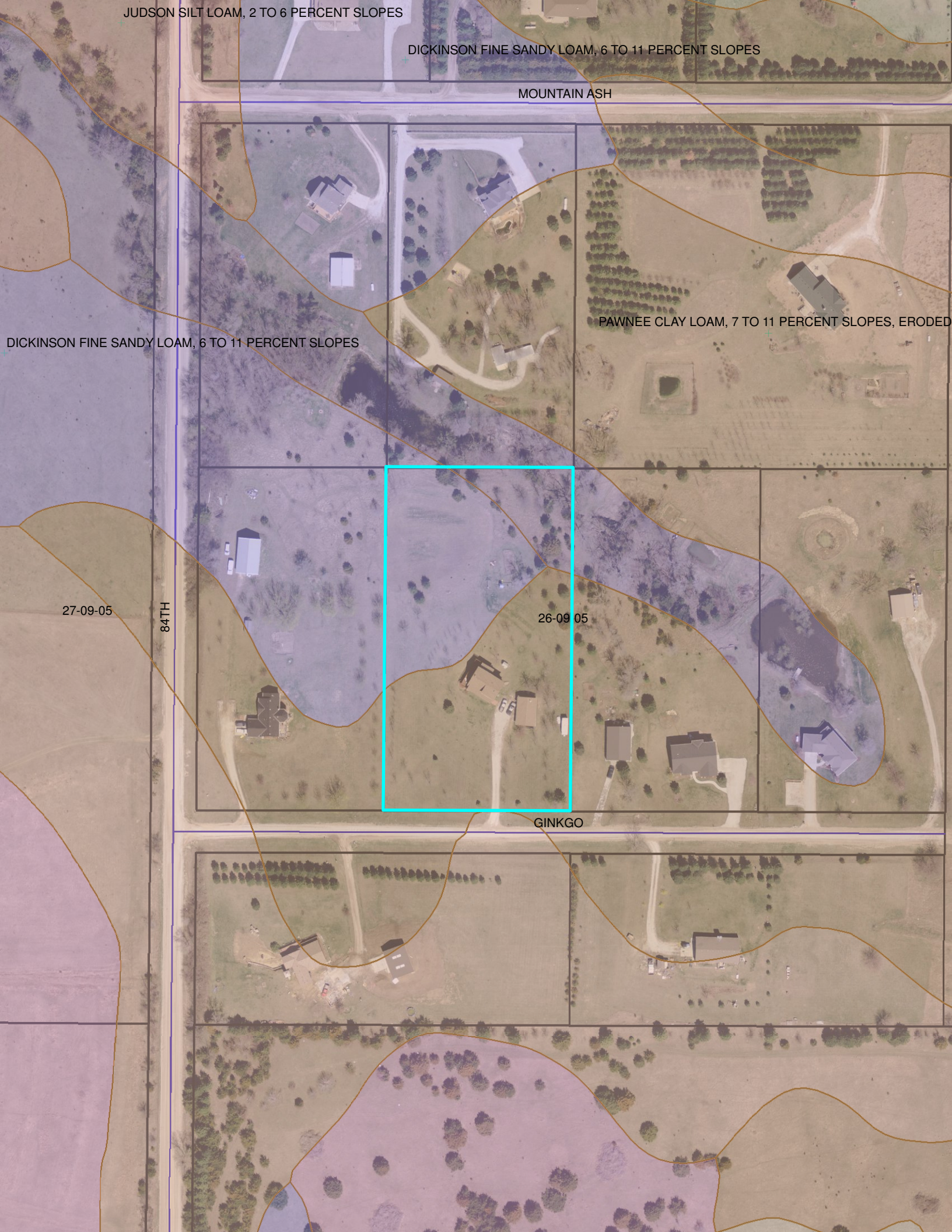
Rate Used for Calculation:

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date


JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
DICKINSON FINE SANDY LOAM, 6 TO 11 PERCENT SLOPES
MOUNTAIN ASH
PAWNEE CLAY LOAM, 7 TO 11 PERCENT SLOPES, ERODED
DICKINSON FINE SANDY LOAM, 6 TO 11 PERCENT SLOPES
27-09-05
84TH
26-09-05
GINKGO

Sec 26 T9 R5 -7-LOT 3

Mike Mild
8250 W. Ginko Lane
Denton Ne 68339

100' addition

