LLCHD HS000548

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Aaron Terry - Builder
202-5836

A

Permit Number HS000548

Onsite Wastewater Treatment System Request for Site Clearance and Permit

Include Form B and C. Submit correct fee with this Application

3 acres or more required for: ☐ Septic System ☒ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Wastewater Treatment System in conformance with appropriate regulations.

PLEASE PRINT OR TYPE

A. Onsite System Location

Address 2645 Kraster Pl (no rural route) City Roca, NE Zip 68430

Legal Description 19 8N 7E Whitetail Ridge 10

1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: _____ PID _____

B. Owner

Name Galen Pfeiffer Signature _____

Address _____ City/State/Zip Lincoln, Ne

Home Phone 438-4226 Work Phone 877-585-8157 (Architectural Design Associates)

C. Certified Installer

Name: Brad Southwick Signature _____

Address 105 Locust PO Box 191 City/State/Zip Hickman, Ne. 68372

Work Phone _____

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 7 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres _____

☐ Commercial Establishment/Other Facility Specify _____ Design flow in gallons per day _____

Type of Wastewater ☐ Domestic ☐ Non-Domestic Well Permit Applied for ☐ Yes ☐ No ☐ Not Applicable

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☐ County Resolution ~~No. 02-30~~

1. Health Department
Site visits _____
Date rec'd 9/14/11
Date frwd 9/14/11
ACTION ☒ Approved ☐ Disapproved
Signature _____

2. Supt. Bldg. Insp. or Village Clerk
Comments _____
Date rec'd 9-14-11
Date frwd 9-14-11
ACTION ☒ Approved ☐ Disapproved
Signature _____

3. City or County Engineer
Comments _____
Date rec'd 9-14-11
Date frwd 9-14-11
ACTION ☒ Approved ☐ Disapproved
Signature Jim Ploughe

Installation Final Written Approval
By _____
Date _____

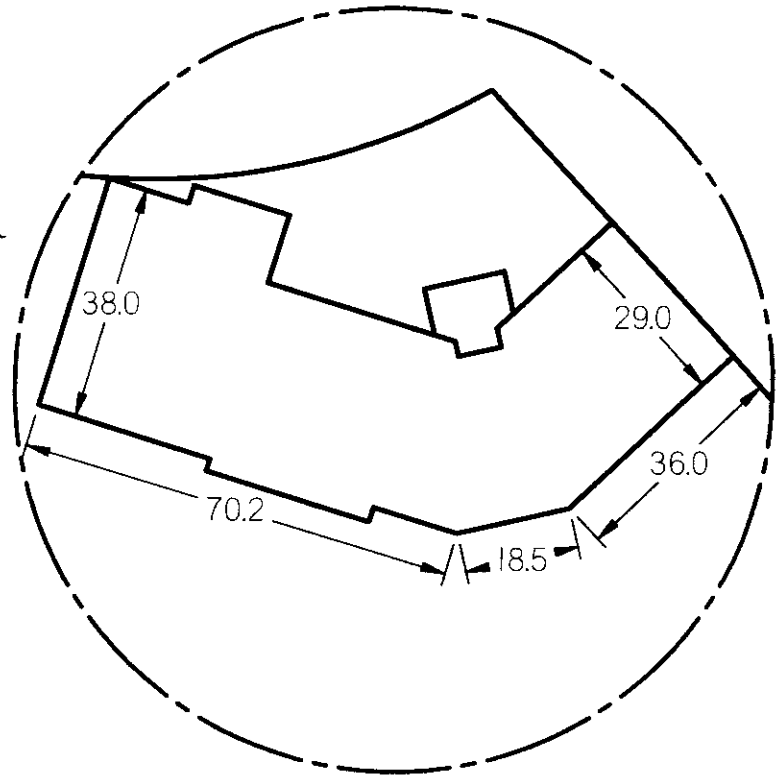
Business Office Use Only
Date Received 9-15-11 Amount Paid 335.-
Received By Bdrell Cash/Check No. 1332

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

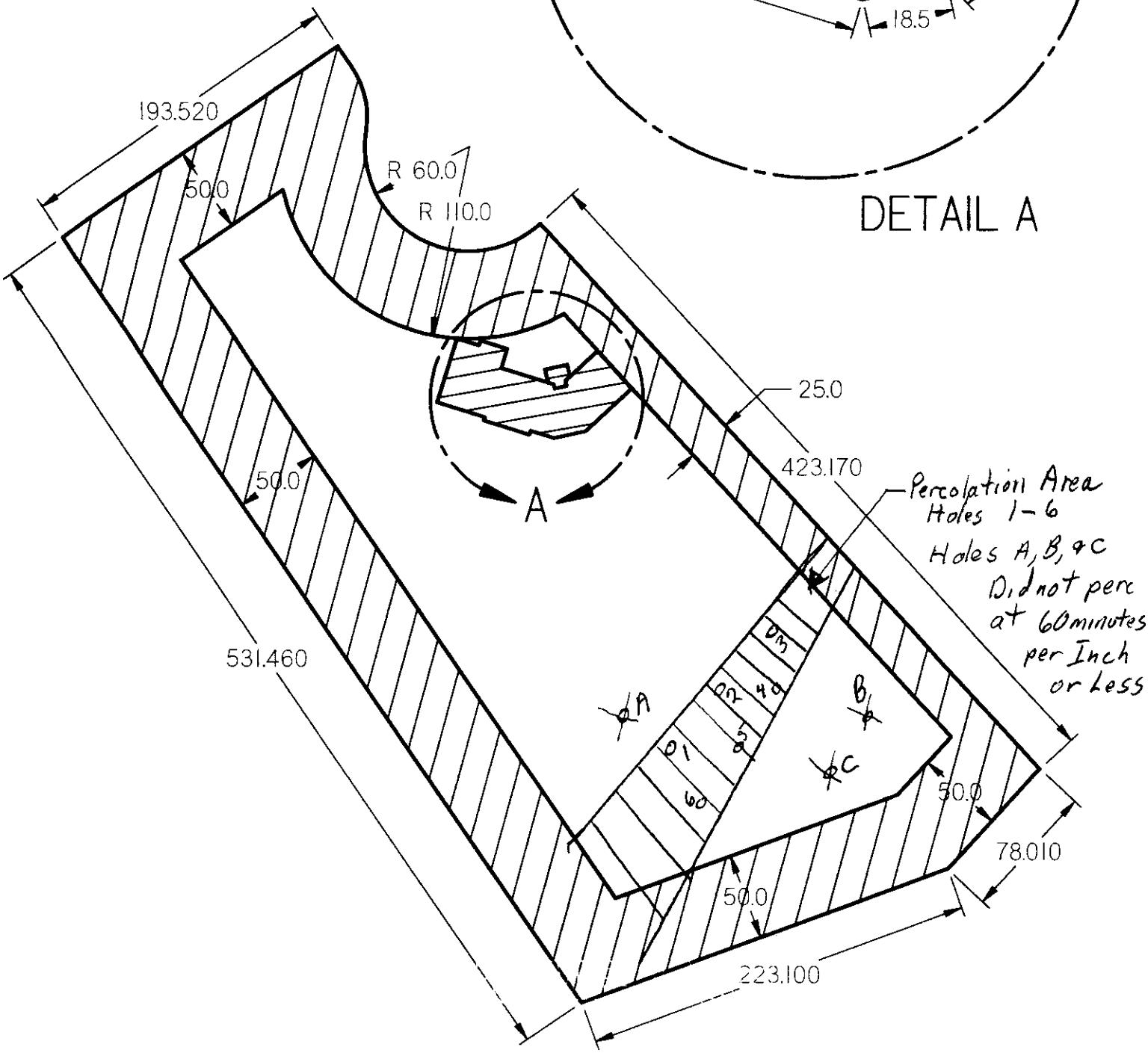
Form A Updated: 5/10

9-19-2011 14:46:54

5 Bedroom Home requires
1750 Sq. Ft of Seepage area
Percolation area contains 1720 Sq. FT.
enough for system but no room for
additional lateral



DETAIL A



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

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT

No. HS000548

System Type: LAGOON

Situs: 2645 KRAUTER PL

Legal Description: T08N-R07E-S19-Lot 10

Owner: PFEIFFER, GALEN L & KELLIE J
5025 NW 10 ST
LINCOLN NE
68521

Permit Fee:	$335.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$335.00
Issued:	09/15/2011
Expires:	09/14/2012

Judith A Halstead

Judith A. Halstead, MS, Health Director

On-site Waste System Permit Holder:

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.

Judith A Halstead

Judith A. Halstead, MS
Health Director

SOUTHWICK SERVICES
PO BOX 191
HICKMAN NE 68372


KRAUTER
REEHL
WYMORE SILTY CLAY, 5 TO 9 PERCENT SLOPES, SEVERELY ERODED
19-08-07
MAYBERRY SILTY CLAY LOAM, 2 TO 7 PERCENT SLOPES, ERODED