LLCHD HS000597

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

A

Permit Number HS000597

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 4100 W. Peach (no rural route) City Lincoln, NE Zip 68522

Legal Description 31 10 6

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

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

B. Owner

Name Richard Payne Signature _____

Address 4100 W. Peach City/State/Zip Lincoln Ne 68522

Home Phone 261-5249 Work Phone _____

C. Certified Installer

Name: Brad Southwick Signature Brad Southwick

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

Work Phone 430-7606

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 2 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 Plan & Lagoon - NH
Date rec'd 3/21/12
Date frwd 3/21/12
ACTION ☑ Approved ☐ Disapproved
Signature _____

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

3. City or County Engineer
Comments _____
Date rec'd _____
Date frwd _____
ACTION ☐ Approved ☐ Disapproved
Signature _____

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
Date Received 3-21-12 Amount Paid 345.-
Received By BHull Cash/Check No. 1359

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

Form A Updated: 5/10

3-27-2012 14:30:26

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. HS000597

System Type:	LAGOON
Situs:	4100 W PEACH ST
Legal Description:	T10N-R06E-S31-1-Lot 8
Owner:	PAYNE, RICHARD D & MARJORIE M 4100 W PEACH ST LINCOLN NE 68522

Permit Fee:	$345.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$345.00
Issued:	03/21/2012
Expires:	03/21/2013

Judith A Halstead

Judith A. Halstead, MS, Health Director

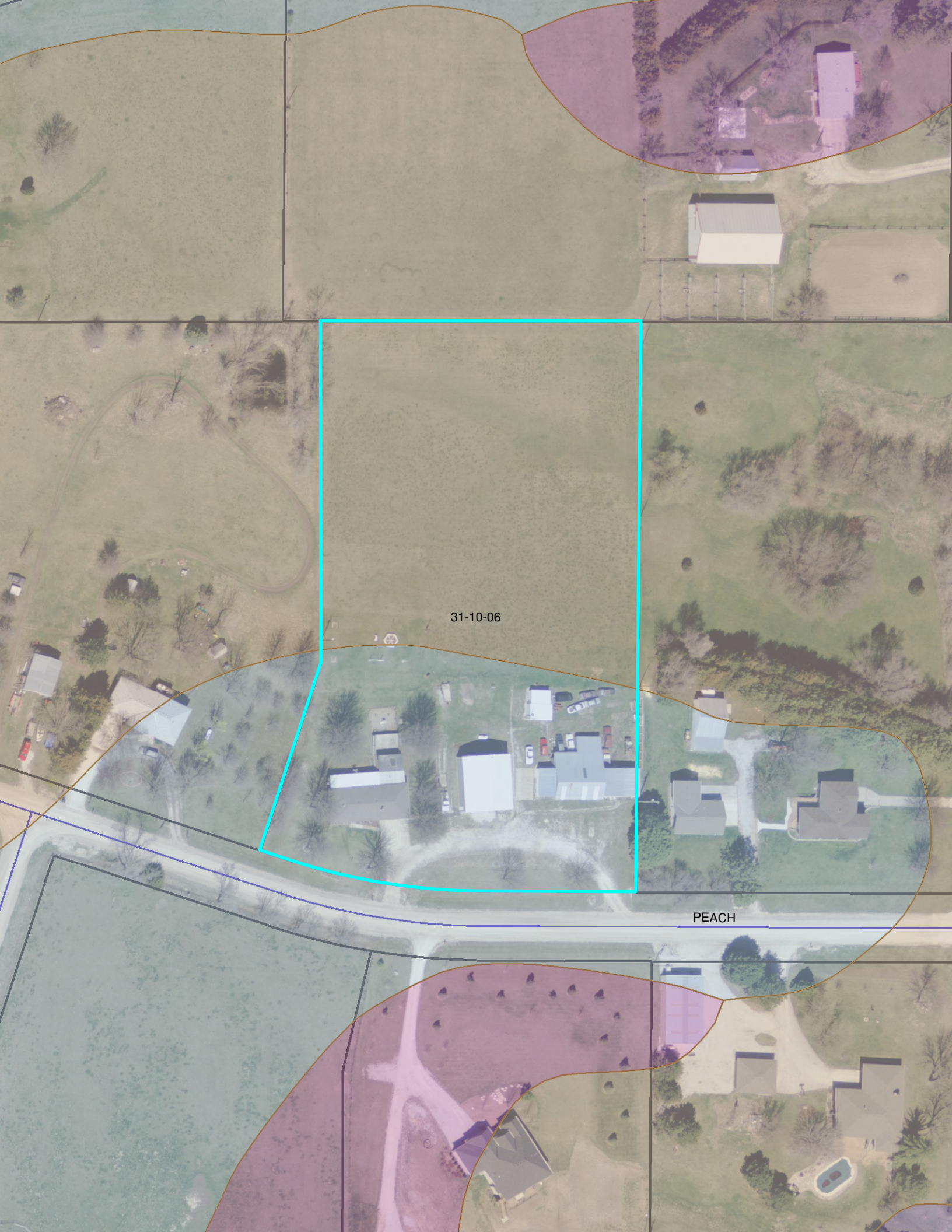
On-site Waste System Permit Holder:

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


31-10-06
PEACH