LLCHD HS000663

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

**A**

Permit Number HS000663

# 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 6377 W. Leeglen Ln. City _____, NE Zip _____
(no rural route)

Legal Description Wendlin Estates Lot 2 Blk 1 2nd

| 1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot |
|---|---|---|---|---|---|---|---|---|
| | | 25, | 8, | 5 | | | | |

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

## B. Owner

Name Brad Hochstein Signature _____

Address _____ City/State/Zip _____

Home Phone 402-369-1080 Work Phone _____

## C. Certified Installer

Name: Nathan Peterson Signature _____

Address 7701 Cornhusker Hwy City/State/Zip Lincoln NE 68507

Work Phone 402-202-8130

## 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 3 Is there a Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 3+

☐ 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 9/17/12
Date frwd 9/17/12
**ACTION** ☒ Approved ☐ Disapproved
Signature _____

**2. Supt. Bldg. Insp. or Village Clerk**
Comments Must Comply with Flood Plain requirements
Date rec'd 9-17-12
Date frwd 9-17-12
**ACTION** ☒ Approved ☐ Disapproved
Signature _____

**3. City or County Engineer**
Comments Comply with Floodplain requirements
Date rec'd 9-17-2012
Date frwd 9-17-2012
**ACTION** ☐ Approved ☐ Disapproved
Signature _____

**Installation Final Written Approval**
By _____

Date _____

***Business Office Use Only***
Date Received 9-20-12 Amount Paid 345.00
Received By B Hill Cash/Check No. 3229

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

Form A Updated: 5/10

9-24-2012 12:36:49

**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. HS000663**

**System Type:** LAGOON

**Situs:** 6377 W Leealan Ln.

**Legal Description:** T08N-R05E-S25-2-Lot 1

**Owner:**

| | |
|---|---|
| Permit Fee: | $345.00 |
| Variance Fee: | $0.00 |
| Extension Fee: | $0.00 |
| Total Fees: | $345.00 |

Issued: 09/20/2012
Expires: 09/20/2013

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

INFINITY EXCAVATING
7701 CORNHUSKER
LINCOLN NE 68507

SCANNED

A

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

Permit Number H5000663

# Onsite Wastewater Treatment System
# Request for Site Clearance and Permit

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Address 6377 W. Leighton Ln. City _____, NE Zip _____
(no rural route)

Legal Description Wendlin Estates Lot 2 Blk 1 2nd

| 1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot |
|---|---|---|---|---|---|---|---|---|
| | | 25 | 8 | 5 | | | | |

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

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Name Brad Hochstein Signature _____

Address _____ City/State/Zip _____

Home Phone 402-369-1080 Work Phone _____

## C. Certified Installer

Name: Nathan Peterson Signature _____

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Work Phone 402-202-8130

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Site visits _____
Date rec'd 9/17/12
Date frwd 9/17/12
**ACTION** ☑ Approved ☐ Disapproved
Signature _____

**2. Supt. Bldg. Insp. or Village Clerk**
Comments Must Comply with Flood Plain requirements
Date rec'd 9-17-12
Date frwd 9-17-12
**ACTION** ☑ Approved ☐ Disapproved
Signature _____

**3. City or County Engineer**
Comments Comply with flood plain requirements
Date rec'd 9-17-2012
Date frwd 9-17-2012
**ACTION** ☑ Approved ☐ Disapproved
Signature _____

**Installation Final Written Approval**
By Jim Nemec
Date 4/12/2013

- elevation 8' above flood plain
Lagoon level 1 Depth JM

***Business Office Use Only***
Date Received 9-20-12 Amount Paid 345.00
Received By B. Hall Cash/Check No. 3229

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

Form A Updated: 5/10

SCANNED

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

SCANNED 4/12 jm

**A**

Permit Number H5000663

# Onsite Wastewater Treatment System
# Request for Site Clearance and Permit

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1/4 | 1/4 | Section | Township | Range | Subdivison | Addition | Block | Lot
25, 8, 5

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

## B. Owner

Name Brad Hackstein Signature _____

Address _____ City/State/Zip _____

Home Phone 402-369-1080 Work Phone _____

## C. Certified Installer

Name: Nathan Peterson Signature _____

Address 7701 Cornhusker Hwy City/State/Zip Lincoln NE 68507

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

**1. Health Department**
Site visits _____
Date rec'd 9/17/12
Date frwd 9/17/12
**ACTION** ☑ Approved ☐ Disapproved
Signature _____

**2. Supt. Bldg. Insp. or Village Clerk**
Comments Must Comply with Flood Plain requirements
Date rec'd 9-17-12
Date frwd 9-17-12
**ACTION** ☑ Approved ☐ Disapproved
Signature _____

**3. City or County Engineer**
Comments Comply with floodplain requirements
Date rec'd 9-17-2012
Date frwd 9-17-2012
**ACTION** ☐ Approved ☐ Disapproved
Signature Kenneth D. Schroeder

**Installation Final Written Approval**
By _____
Date 4/12/2013 7/16/13 Fence Completed

NO FENCE, VET jm - elevation 8' above Flood Plain Lagoon level 1 Depth jm
Does not 4/12/13

**Business Office Use Only**
Date Received 9-20-12 Amount Paid 345.00
Received By B Hall Cash/Check No. 3229

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

Form A Updated: 5/10