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. HS000666

System Type: STANDARD

Situs: 3701 S 70 ST

Legal Description: T09N-R07E-S04-Lot 83

Owner: CITY OF LINCOLN
555 S 10 ST205
LINCOLN NE
68508

Permit Fee:	$345.00
Variance Fee:	$0.00
Extension Fee:	$0.00
Total Fees:	$345.00
Issued:	10/02/2012
Expires:	10/02/2013

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

OLSSON ASSOCIATES
PO BOX 84608
LINCOLN NE 68501-4608

LLCHD HS000666

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

A

Permit Number HS000666

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 3701 S 70th Street (no rural route) City Lincoln, NE Zip 68506

Legal Description SE 4 9N 7E

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

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

B. Owner

Name Lincoln Parks & Rec Signature G. J. Yost for LPR

Address 2740 A Street City/State/Zip Lincoln/NE 68502

Home Phone _____ Work Phone (402) 441-7892

C. Certified Installer

Name: _____ Signature _____

Address _____ City/State/Zip _____

Work Phone _____

D. Engineer

☒ Check and complete if engineer designed system P.E. License Number: E-13971

Designer Name Joel Jirak Firm Olsson Associates Work Phone (402) 458-5975

E. This system will serve a

☐ Residential Dwelling Number of Bedrooms _____ Is there a Whirlpool Bathtub? ☐ Yes ☐ No Total Acres _____

☒ Commercial Establishment/Other Facility Specify Golf Course Clubhouse Design flow in gallons per day 4125

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 10/9/12
Date frwd 10/1/12
ACTION ☒ Approved ☐ Disapproved
Signature _____

2. Supt. Bldg. Insp. or Village Clerk
Comments _____
Date rec'd 9/27/12
Date frwd 9/27/12
ACTION ☒ Approved ☐ Disapproved
Signature _____

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

Installation Final Written Approval
By _____
Date _____

Business Office Use Only
Date Received 10-2-12 Amount Paid 345.00
Received By BHall Cash/Check No. 16403

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

10-2-2012 14:14:51

Form A Updated: 5/10


JUDSON SILT LOAM, 2 TO 6 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 2 TO 5 PERCENT SLOPES
BURCHARD CLAY LOAM, 6 TO 11 PERCENT SLOPES
04-09-07
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
WYMORE SILTY CLAY LOAM, 7 TO 11 PERCENT SLOPES
WYMORE SILTY CLAY LOAM, 3 TO 7 PERCENT SLOPES, ERODED