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

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS000743

System Type: Lagoon

Situs: 11250 PANAMA RD, RURAL, NE

Issued: 5/7/2013

Expires: 5/7/2014

Description: S6, T7, R8, 6th Principal Meridian, LOT 21 SW

Owner: ISAACS, HOWARD P & DEBORAH D
290 S 14 RD
UNADILLA, NE 68454-8041

Judith A Halstead
Judith A. Halstead, MS, Health Director

Dear Applicant:

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 SEWER
P.O. BOX 191
HICKMAN, NE 68372

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

A

Permit Number H5000743

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 11250 (no rural route) Panama Rd City Hickman, NE Zip 68372

Legal Description: 1/4 6 | 1/4 87 | Section 8 | Township | Range | Subdivison | Addition | Block 21 | Lot

PID

B. Owner

Name Derek Niss Signature

Address P.O. 406 City/State/Zip Pawnee City Ne 68420

Home Phone Work Phone 310-3833

C. Certified Installer

Name: Brad Southwick Signature

Address P.O. 191 105 Locust 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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 5.00

Garbage Grinder? ☐ Yes ☐ No

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

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

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

1. Health Department
Site visits
Comments
Date rec'd 5/1/13
Date frwd 5/1/13
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd 5-1-13
Date frwd 5-1-13
ACTION ☒ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd 5-1-13
Date frwd 5-1-13
ACTION ☒ Approved ☐ Disapproved
Signature Jim Plouzek

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 5-6-13 Amount Paid 355.-
Received By BPalle Cash/Check No. 1410

746, 723, 784

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