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

A

Permit Number
HS000879

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 6035 S 148th (no rural route) City Walton, NE Zip 68461

Legal Description NE NE 16 9 8 54
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 22-16-200-012-000

B. Owner

Name _____ Signature _____

Address _____ City/State/Zip _____

Home Phone _____ Work Phone _____

C. Certified Installer

Name: Jason Kubik Signature Jason Kubik

Address 105 Locust St 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 2 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 6
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 _____ Date rec'd _____ Date frwd _____
Comments _____
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 3/21/14 Amount Paid 365.00
Received By SB Cash/Check No. 2037

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

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

B

Permit Number:

Sewage Disposal System

Soil Absorption Test Data Report

Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address 6035 S 148th (no rural route) City Walton NE, Zip 68461

Owner _____ Addresss _____

Soil Type (SCS): 7503 (Pawnee) Percolation Rate: 42 min./inch

Date of Tests 3/13/14 to 3/14/14 Weather: Precipitation dry Temperature 40

PID 22-16-200-012-000

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	36	3/13	11 am	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1½	40
2	36	3/13	11:00	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1¼	48
3	36	3/13	11:00	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1¼	48
4	36	3/13	11:00	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1¾	34
5	36	3/13	11:00	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1¼	48
6	36	3/13	11:00	3/14	11:00	3/14	12:30	30	3/14	1:30	60	1¾	34

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 430-7606
Address 105 Locust St
Hickman NE 68372

Sum of Percolation Rates: 252
Average of Rates: 42
Rate Used for Calculation: 49

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks _____

Signature of Reviewing Official _____ Date _____

FORM 23-101 10-96

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. HS000879

System Type: Standard

Situs: 6035 S 148 ST, RURAL, NE

Issued: 3/24/2014

Expires: 3/24/2015

Description: S16, T9, R8, 6th Principal Meridian, LOT 54 NE

Owner: FELL, MARY E
6035 S 148 ST
WALTON, NE 68461

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 LIQUID WASTE INC
105 LOCUST ST
HICKMAN, NE 68372