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

A

Permit Number
HS000932

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 14200 N 1ST (no rural route) City RAYMOND, NE Zip 68428

Legal Description Phantom Hills 2

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

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

B. Owner

Name JON NOVACEK Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Jason Kubik Signature

Address 105 Locust ST City/State/Zip Hickman NE 68572

Work Phone 440-7606

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 4 Is there a Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 6

☐ 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
Date frwd
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 7-16-14 Amount Paid 365.00
Received By ECOOR Cash/Check No. 172

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

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. HS000932

System Type: Lagoon

Situs: 14200 N 1 ST, RURAL, NE

Issued: 7/21/2014

Expires: 7/21/2015

Description: S2, T11, R6, 6th Principal Meridian, LOT 29 SW

Owner: NOVACEK, DANIEL J & LINDA M
14200 N 1 ST
RAYMOND, NE 68428

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

JASON KUBIK
105 LOCUST ST
HICKMAN, NE 68372

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

SCANNED

A

Permit Number
HS000932

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Address 14200 N 1ST (no rural route) City RAYMOND, NE Zip 68428

Legal Description 2 11 6 SB Shannon Hills 2
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long: PID 1202300007000

B. Owner

Name JON NOVACEK Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Jason Kubik Signature

Address 105 Locust St City/State/Zip Hickman NE 68372

Work Phone 440-7606

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Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 7-16-14 Amount Paid 365.00
Received By LCOOK Cash/Check No. 172

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

* Blaine Johnson KC - Contracting Installed System