ASO 01061

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☐ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township 10 Range 8 1/4 ____ 1/4 ____ Section 28
   Block ____ Lot ____ Addition ____
   Parcel ID 23 - 28 - 100 - 006 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 720 S 134th St Lincoln NE 68520

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** adding 200' graveless plastic chamber

5. **Work to be done by:** ☐ owner ☒ contractor's name Southwick

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name Jason Kubik Address ____ Phone: 402-440-7606

Applicant Signature (owner or lessee) Jason Kubik

Please contact LLCHD for the permit fee for this application
Fee must be included before the application will be processed. Incomplete information will delay processing

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HEALTH DEPARTMENT USE ONLY

Date received ____/____/____ REVIEW: ☐ Approved ☐ Disapproved By: ____

Site visits
Date ____/____/____ By ____
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date ____/____/____ By ____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8643

Business Office Use Only

Received: Date: 4/29/15 Amount $205.00 Check No. 2264 Initials SB

Revised 3-09

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

B

Permit Number: HS001061

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 720 S 134th (no rural route) City Lincoln NE, Zip 68520

Owner Robert Butcher Address

Date of Tests 4/14/15 to 4/15/15 Weather: Precipitation 0 Temperature 60's

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					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)	Initial Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop (in)	Percolation Rates (Min/in = mpi)
1	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	5/8	48
2	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	5/8	48
3	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	3/4	40
4	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	3/4	40
5	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	1	30
6	30	4/14	6:15	4/15	10:30	4/15	2:00	6	4/15	2:30	30	3/4	40
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-440-7606
Address 105 Locust St
Hickman NE 68372
Soil type (NRCS Maps/Other) 7229 Burchard
Groundwater Depth

Sum of Percolation Rates: 246
Average of Rates: 41
Rate Used for Calculation: 41

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

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

ON-SITE WASTE WATER SYSTEM
ALTERATION PERMIT
No. HS001061

System Type: Standard

Situs: 720 S 134 ST, RURAL, NE

Issued: 4/30/2015

Expires: 4/30/2016

Description: S28, T10, R8, 6th Principal Meridian, THAT PART OF LOT 25 LYING IN THE NW

Owner: BATCHER, ROBERT E & GWEN C
720 S 134 ST
LINCOLN, NE 68520

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

Dear Applicant:

The above document is your permit to alter an existing On-site Waste Water System at the location listed. Please contact this office once the alteration is complete to obtain final approval before use.

Judith A Halstead
Judith A. Halstead, MS
Health Director

SOUTHWICK LIQUID WASTE INC
105 LOCUST STREET
HICKMAN, NE 68372

Rob Butcher
720 S 13th

N

