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

A

Permit Number HS00 1445

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☐ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 5595 S 190th ST (no rural route) City WALOTN, NE Zip 68461

Legal Description: SE (1/4) 12 (1/4) 9 (Section) 8 (Township) (Range) (Subdivison) (Addition) 12 (Block) (Lot)

PID 22-12-400-002-000 *Approx. Address (If to be determined)

B. Owner

Name STEPHEN POTTS Signature

Address 5595 S 190th ST City/State/Zip WALTON, NE 68461

Home Phone Work Phone 402-416-7828

C. Certified Installer

Name: JASON KUBIK Signature

Address 105 LOCUST ST, PO BOX 191 City/State/Zip HICKMAN, NE 68372

Work Phone 402-475-2462

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 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 5.63
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

1. Health Department
Site visits
Comments
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 5-1-1 Amount Paid $395.00
Received By SB Cash/Check No. 3527

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

Form A Updated: 4/15

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

B

Permit Number: HS001445

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 5595 S 190th ST (no rural route) City WALTON NE, Zip 68461

Owner STEPHEN POTTS Address

Date of Tests 4/26/17 to 4/27/17 Weather: Precipitation 0 Temperature 50

Percolation Test Data Table

A.	B.	C.	D.	E.	F.	G.	H.	I.	J.	K.	L.	M.	N.
		Saturation/Swelling Time				Water Level Drop: Last 30 mins of 4 hr or last 10 mins of 1 hr					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	4/26	4:00	4/27	1:45	4/27	5:15	6	4/27	5:45	30	0.625	48
2	30	4/26	4:00	4/27	1:45	4/27	5:15	6	4/27	5:45	30	0.50	60
3	30	4/26	4:00	4/27	1:45	4/27	5:15	6	4/27	5:45	30	0.75	40
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: JASON KUBIK
Phone: 402-475-2462
Address 105 LOCUST ST P.O. BOX 191
HICKMAN NE 68372

Sum of Percolation Rates: 148
Average of Rates: 49.33
Rate Used for Calculation: 59 due to >20mpi variance

Soil type (NRCS Maps/Other) 7695 WYMORE
Groundwater Depth > 12 FEET

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
CONSTRUCTION - INSTALLATION PERMIT
No. HS001445

System Type: Standard

Situs: 5595 S 190 ST, RURAL, NE

Issued: 5/4/2017

Expires: 5/4/2018

Description: S12, T09, R08, 6th Principal Meridian, LOT 12 SE

Owner: POTTS, STEPHEN J
5595 S 190 ST
WALTON, NE 68461

Charlotte Burke, MS, RD, Interim 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.

Charlotte Burke, MS, RD
Interim Health Director

STEPHEN & ANGELA POTTS
5700 ROCA RD
ROCA, NE 68430