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

A

Permit Number
H5001498

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 8915 Saltillo Road City Lincoln NE Zip
(no rural route)

Legal Description Stewart, James 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

Geographical Location (if known): Lat/Long 40 41 44N 96 35 58 W PID 15-02-101-003-000

B. Owner

Name Kevin Broughton Signature
Address 8915 Saltillo Road City/State/Zip Lincoln NE
Home Phone Work Phone 402 304 3027

C. Certified Installer

Name Blain Johnson Signature
Address 9533 E State Hwy 41 City/State/Zip Adams NE 68301
Work Phone 402 610 2270

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 Is there a Whirlpool Bathtub? ☐ Yes ☐ No Total Acres +5
☐ 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 fwd
ACTION ☐ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments
Date rec'd Date fwd
ACTION ☐ Approved ☐ Disapproved
Signature

3. City or County Engineer
Comments
Date rec'd Date fwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 7/31/17 Amount Paid 395-
Received By LC Cash/Check No 4158 2627

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

Form A Updated 5/15

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

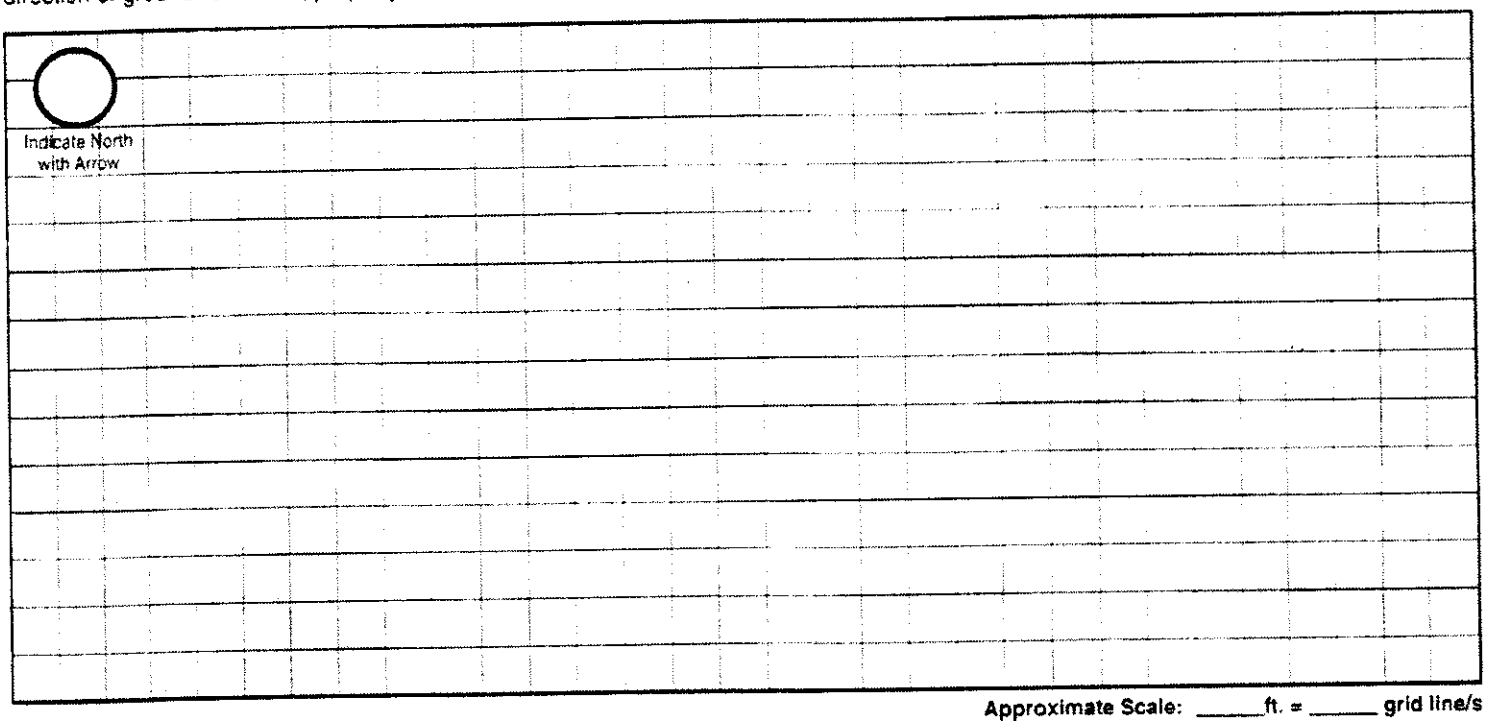
C

Permit Number:

Onsite Wastewater Treatment System

Preliminary Plan Specifications

Draw a plot plan showing onsite system sewer lines, drop of distribution boxes, tank, drainfields, percolation test holes, well, residence, direction of groundwater flow, property lines, and reserve area for replacement onsite system.



Approximate Scale: _____ft. = _____ **grid line/s**

A. Onsite System Location

Address (no rural route) 8915 Saltillo Road City Lincoln NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 gals Tank Material: ☒ Concrete ☐ Plastic ☐ Other_____ ☐ Lagoon(Max. seepage 1.8" per day)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☐ Lagoon

D. Drainfield Absorption System

Percolation Rate 31 (min/inch = mpi) No. of Bedrooms 3 Soil Type_____ Land Slope _____%

☒ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield 825 sq.ft.

Total length of laterals 230 Type of distribution: ☐ Perforated pipe ☐ Half-Round ☒ Chamber ☐ Other

No. of absorption trenches_____ Width_____ No. of drop boxes_____ Distrubtion Box_____

No. of absorption beds_____ Width_____ No of Distnbution lines per bed_____

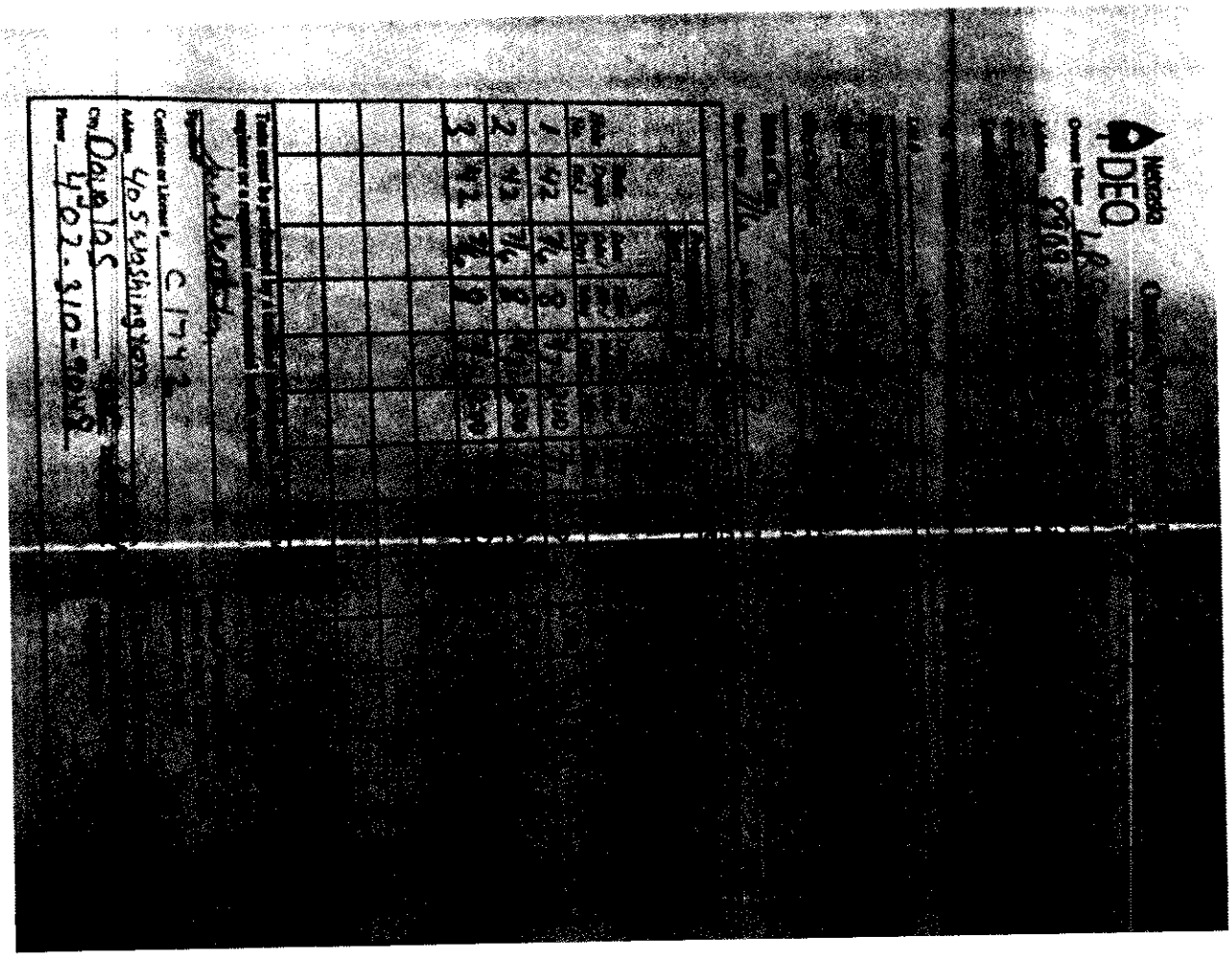
E. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☑	500 ☐	50 ☑	NA ☑	25 ☑	20 ☑	15 ☑	25 ☑	☑
Field (ft)	100 ☑	500 ☐	50 ☑	4 ☑	30 ☑	20 ☑	30 ☑	40 ☑	☑
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

F. Required Signatures

Home Building Contractor _____ Date _____

Installer [signature] Date 23 July 2017



Sent from my iPhone

Lori A. Cook

From: Nate C. Hartman
Sent: Monday, July 24, 2017 7:15 AM
To: Lori A. Cook
Subject: FW: 8915 saltillo road perc sheet (by others)

2nd one

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
Water Quality Section
Lincoln-Lancaster County Health Department
(402) 441-8643 Fax (402) 441-3890

From: Blain Johnson [mailto:xlcontracting10@gmail.com]
Sent: Sunday, July 23, 2017 7:00 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: 8915 saltillo road perc sheet (by others)

Begin forwarded message:

From: Blain Johnson <xlcontracting10@gmail.com>
Subject: 1C4F02A0-B375-42A8-910B-D1FC0AFDAAB2.JPG
Date: July 23, 2017 at 6:42:22 PM CDT
To: Blain Johnson <xlcontracting10@gmail.com>

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. HS001498

System Type: Standard

Situs: 8915 SALTILLO RD, LINCOLN, NE

Issued: 8/11/2017

Expires: 8/11/2018

Description: STEWARTVILLE ADDITION, Lot 3

Owner: STEWART, JAMES P TRUST, THE
8909 SALTILLO RD
LINCOLN, NE 68526

Charlotte Burke

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

Charlotte Burke, MS, RD
Interim Health Director