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

A

Permit Number
HSOO1523

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* 11740 VAN DORN ST City WALTON, NE Zip 68461
(no rural route)

Legal Description ____ 31 10 8 ____ 36 SE
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 23-31-400-008-000 *Approx. Address (If to be determined)____

B. Owner

Name MARK & PEGGY BERTSCHE Signature____
Address 11740 VAN DORN ST City/State/Zip WALTON, NE 68461
Home Phone____ Work Phone 402-770-5850

C. Certified Installer

Name: JASON KUBIK Signature ____
Address 105 LOCUST ST 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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 5.00
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____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____
Comments____

2. Supt. Bldg. Insp. or Village Clerk
Comments____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____

3. City or County Engineer
Comments____ Date rec'd____ **ACTION** ☐ Approved ☐ Disapproved
Date frwd____ Signature____

Installation Final Written Approval
By____
Date____

Business Office Use Only
Date Received 8-23-17 Amount Paid 395.00
Received By LE Cash/Check No. 3017

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:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 11740 VAN DORN ST (no rural route) City WALTON NE, Zip 68461

Owner MARK & PEGGY BERTSCHE Address SAME

Date of Tests 8/7/17 to 8/8/17 Weather: Precipitation 0 Temperature 80

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	8/7	3:00	8/8	8:45	8/8	12:15	6	8/8	12:45	30	0.5	60
2	30	8/7	3:00	8/8	8:45	8/8	12:15	6	8/8	12:45	30	0.625	48
3	30	8/7	3:00	8/8	8:45	8/8	12:15	6	8/8	12:45	30	0.50	60
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: JASON KUBIK
Phone: 402-475-2462
Address 105 LOCUST ST
HICKMAN, NE 68372

Sum of Percolation Rates: 168
Average of Rates: 56
Rate Used for Calculation: 56

Soil type (NRCS Maps/Other) 7206 AKSARBEN SILTY CLAY LOAM

Groundwater Depth + 12'

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. HS001523

System Type: Lagoon

Situs: 11740 VAN DORN ST, RURAL, NE

Issued: 8/25/2017

Expires: 8/25/2018

Description: S31, T10, R8, 6th Principal Meridian, LOT 36 SE

Owner: BERTSCHE, MARK S & PEGGY E
11740 VAN DORN 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

SOUTHWICK LIQUID WASTE INC
105 LOCUST ST
HICKMAN, NE 68372