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

A

Permit Number
HSDD1569

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* 10500 S 56th Street (no rural route) City LINCOLN, NE Zip 68516

Legal Description ____ 33 9 7 ____ 53 NW

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

PID 16-33-100-049-000 *Approx. Address (If to be determined)____

B. Owner

Name Dave Stanczyk Signature____

Address 10500 S 56th City/State/Zip Lincoln, NE68516

Home Phone 402-560-8887 Work Phone ____

C. Certified Installer

Name: Jason Kubik Signature Jason Kubik

Address 105 Locust Street 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 4.97
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 11-16-17 Amount Paid 420.00
Received By LC Cash/Check No. CC
0906

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 10500 S 56th Street (no rural route) City Lincoln NE, Zip 68516

Owner Dave Stanczyk Address

Date of Tests 10/30/2017 to 10/31/2017 Weather: Precipitation none Temperature 50 degrees

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		Initial	End				
Hole No.	Hole Depth(in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	30 in	10/30	3:15 pm	10/31	8:40 am	10/31	12:10 pm	6	10/30	12:40 pm	30 min	1/2	60
2	30 in	10/30	3:15 pm	10/31	8:40 am	10/31	12:10 pm	6	10/30	12:40 pm	30 min	1/2	60
3	30 in	10/30	3:15 pm	10/31	8:40 am	10/31	12:10 pm	6	10/30	12:40 pm	30 min	5/8	48
								6					
								6					
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-475-2462
Address 105 Locust Street, Hickman NE 68372

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

Soil type (NRCS Maps/Other) Wymore Silty Clay Loam
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. HS001569

System Type: Standard

Situs: 10500 S 56 ST, RURAL, NE

Issued: 11/17/2017

Expires: 11/17/2018

Description: S33, T9, R7, 6th Principal Meridian, LOT 53 NW

Owner: STANCZYK, DAVID K & JUDY
2516 RANDOLPH ST
LINCOLN, NE 68510

Shavonna M. Lausterer, MPH, CPH, 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.

Shavonna M. Lausterer, MPH, CPH
Health Director

SOUTHWICK SEWER & DRAIN
105 LOCUST ST
HICKMAN, NE 68372