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

A

Permit Number HS001583

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 17370 Birdsong Place

Address* 731 Whitetail Ln City Hickman, NE Zip
(no rural route)

Legal Description 23 8 7 Cedar Woods Estates 4
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 15-23-401-004-000 *Approx. Address (If to be determined)

B. Owner

Name Brian Duean Signature

Address City/State/Zip

Home Phone Work Phone

C. Certified Installer

Name: Scott Mueller Signature

Address 1345 N 26th Rd City/State/Zip Syracuse, NE 68446

Work Phone 402-430-2946

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
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 12-11-17 Amount Paid $405.00
Received By Cash/Check No. 10546

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

Form A Updated: 4/15

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

SCANNED

A

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Work Phone 402-430-2946

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 3.59 M/L
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 12/8/17
Date frwd 12/13/17
ACTION ☒ Approved ☐ Disapproved
Signature

2. Supt. Bldg. Insp. or Village Clerk
Comments buildable – no flood plain
Date rec'd 12/12/17
Date frwd 12/12/17
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 12-11-17 Amount Paid $405.00
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White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 4/15

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

Permit Number: HS001583

Onsite Wastewater Treatment System-Lagoon

Inspection Sheet

Date 6/21-18 Legal Description Cedar Wood Est Lot 4

¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) _____ City _____

Owner _____ Address _____

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Repair

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): _____

_____

Lagoon constructed so not to receive surface water — Yes X No___
Lagoon floor is level — Yes X No___
Lagoon is equipped with a depth gage/concrete slab — Yes X No___
Influent line is at least 4 inches and slopes no less than 1/8 inch (Solids Tank) — Yes X No___
Clean outs located every 75 feet and one located 1 foot about highest water level — Yes X No___
Inside slope not steeper than three horizontal to one vertical — Yes X No___
Minimum width of the top of the dike shall be 4 feet — Yes X No___
Fence installed — Yes X No X
Top of the Dike_____ Bottom of Lagoon_____ Design Flow_____

6/5/18
6/25/18

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Surface Water distance from Water Mark	Private Drinking Water Wells	Public Drinking Water Supply Wells		All Other Water Wells	Property Lines	Trees and Brush	Neighbor's Foundation		All Other Setbacks
50 ft ☒	100 ft ☐	Non-Community	100ft ☒	100ft ☐	50ft ☒	50ft ☐	Class 1	200ft ☒	☒
		Community	* ☐				Class 2	200ft ☒	
							Class 3	100ft ☒	

*Evaluated by a professional engineer for potential impact on the well and submitted to Dept. for approval if less than 1000ft.

Geographical Coordinates to 6 Decimals: _____

Dike North side

Comments:
X See Sheet

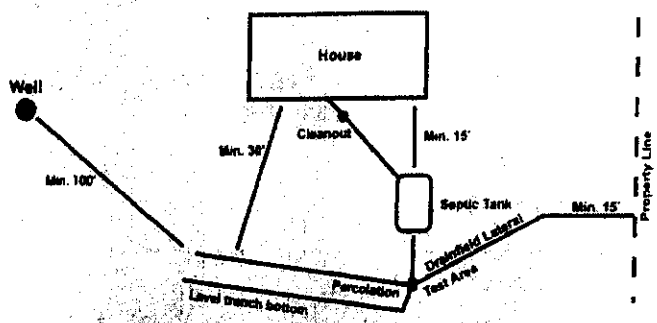
Inspections prior to Final Approval
Initial DH Date 6/6/18
Follow-Up _____ Date _____
Follow-Up _____ Date _____
Installation Final Written Approval
By _____
Date 6/25/18

Updated 5/18

NSPEC Deter...

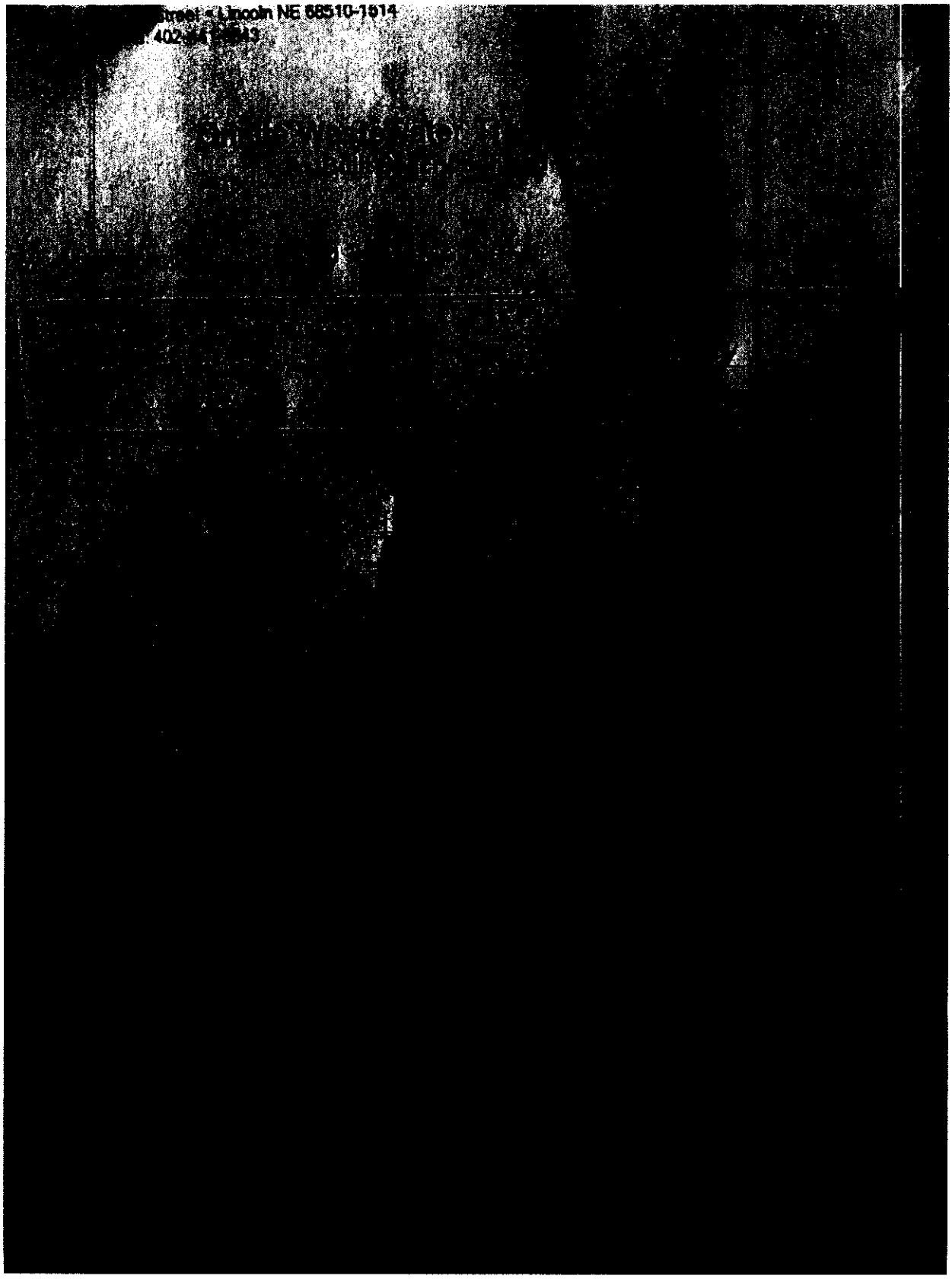
Onsite Wastewater System Design (Example)

Indicate North
w/ Arrow Here:



*Note: If Lagoon, show all applicable dimensions

50


Street • Lincoln NE 68510-1914

Nate C. Hartman

From: Ken D. Schroeder
Sent: Tuesday, December 12, 2017 1:45 PM
To: Nate C. Hartman
Cc: Pamela L. Dingman
Subject: sewage disposal system for PID #15 23 401 004 000
Attachments: 2017044859.tif

Nate,
Lancaster County Engineering Department indicates approval for a sewage disposal system for lot 4, "CEDAR WOODS ESTATES ADDITION" located in the SE ¼ of Section 23, T8N, R7E of the 6th P.M., Lancaster County, Nebraska. *(see attached instr. #2017044859.tif)*
As always, subject to confirmation of and compliance with any floodplain elevation requirements prior to construction.
Ken

Kenneth D. Schroeder, RLS
Lancaster County Surveyor
444 Cherrycreek Road, Bldg. "C"
Lincoln, Nebraska 68528
kschroeder@lancaster.ne.gov
Phone (402) 441-7681
Fax (402) 441-8692