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

SCANNED

A

Permit Number H S001615

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* 15881 SW 114th St. City Crete, NE Zip

(no rural route)

Legal Description 17 8 5

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

PID *Approx. Address (If to be determined)

B. Owner

Name Dillon Troyan Signature Dillon Troyan

Address 5870 SW 140th City/State/Zip Pleasant Dale, NE 68423

Home Phone 402-761-3186 Work Phone Cell 402-641-8523

C. Certified Installer

Name: Earnest Well Drilling Inc. Signature

Address P.O. Box H City/State/Zip Milford, NE 68405

Work Phone 402-761-2281

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 5 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 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 3-09-18 Amount Paid $405.00

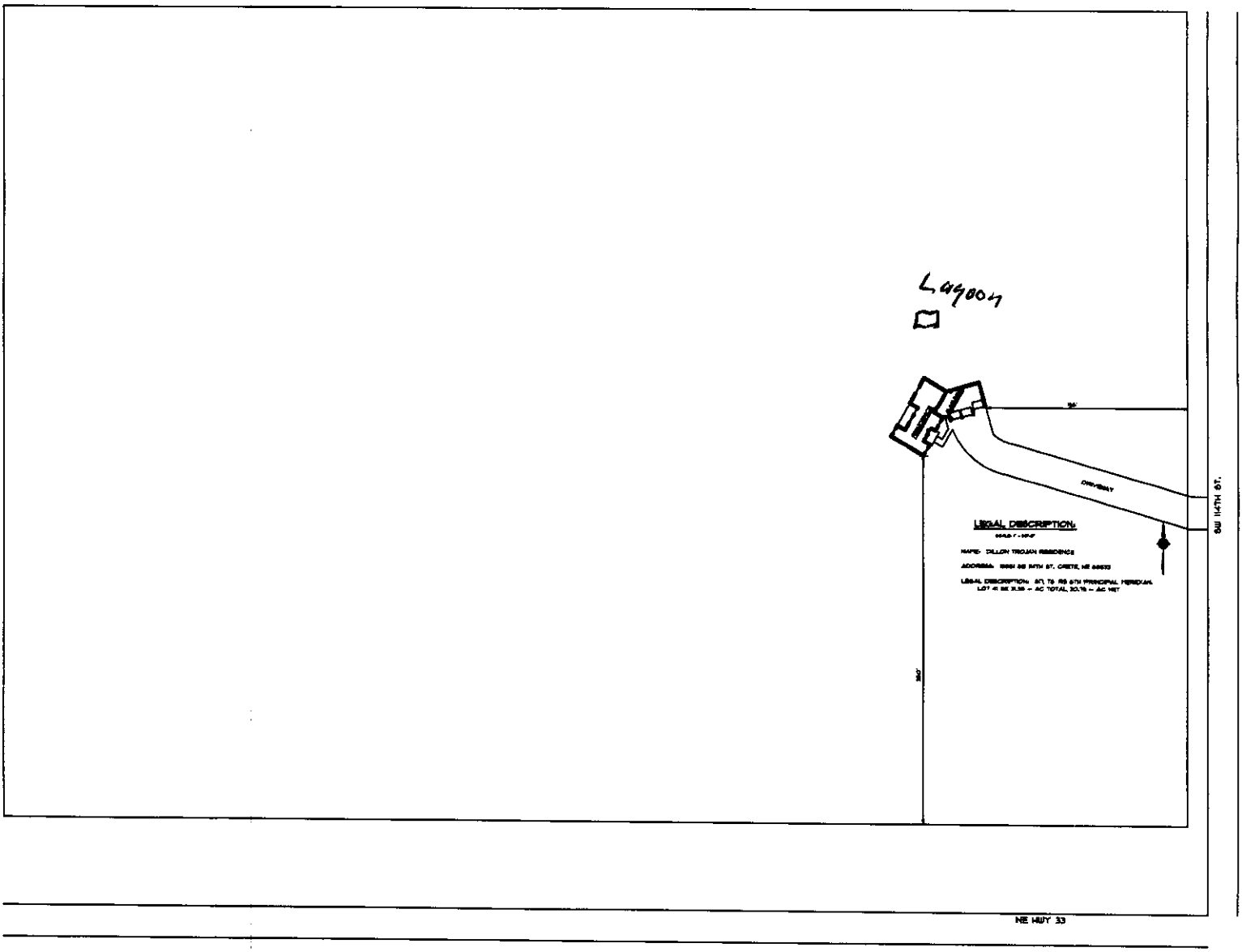
Received By JAD Cash/Check No. 508

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

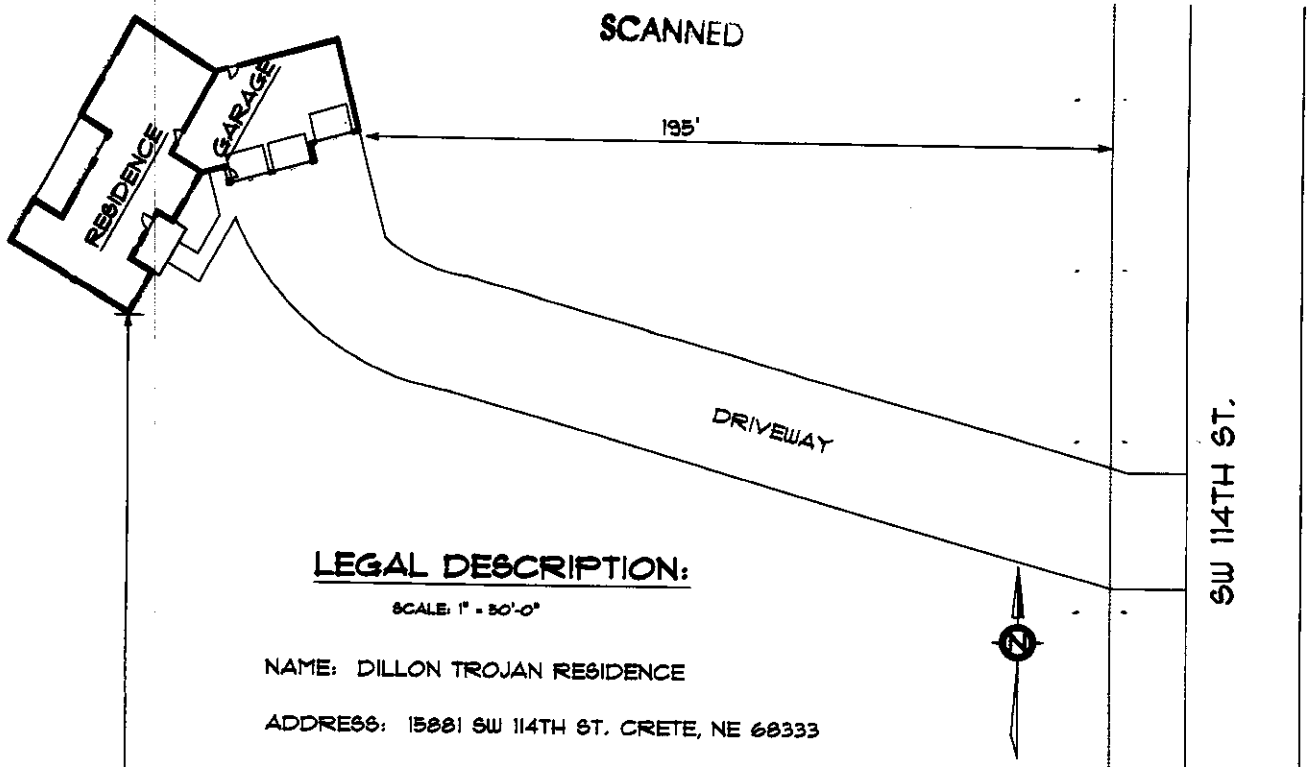
Form A Updated: 4/15

SCANNED

SCANNED



SCANNED



LEGAL DESCRIPTION:

SCALE: 1" = 50'-0"

NAME: DILLON TROJAN RESIDENCE

ADDRESS: 15881 SW 114TH ST. CRETE, NE 68333

LEGAL DESCRIPTION: S17, T8, R5 6TH PRINCIPAL MERIDIAN.
LOT 41 SE 21.38 ± AC TOTAL, 20.79 ± AC NET

NE HWY 33

SCANNED

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

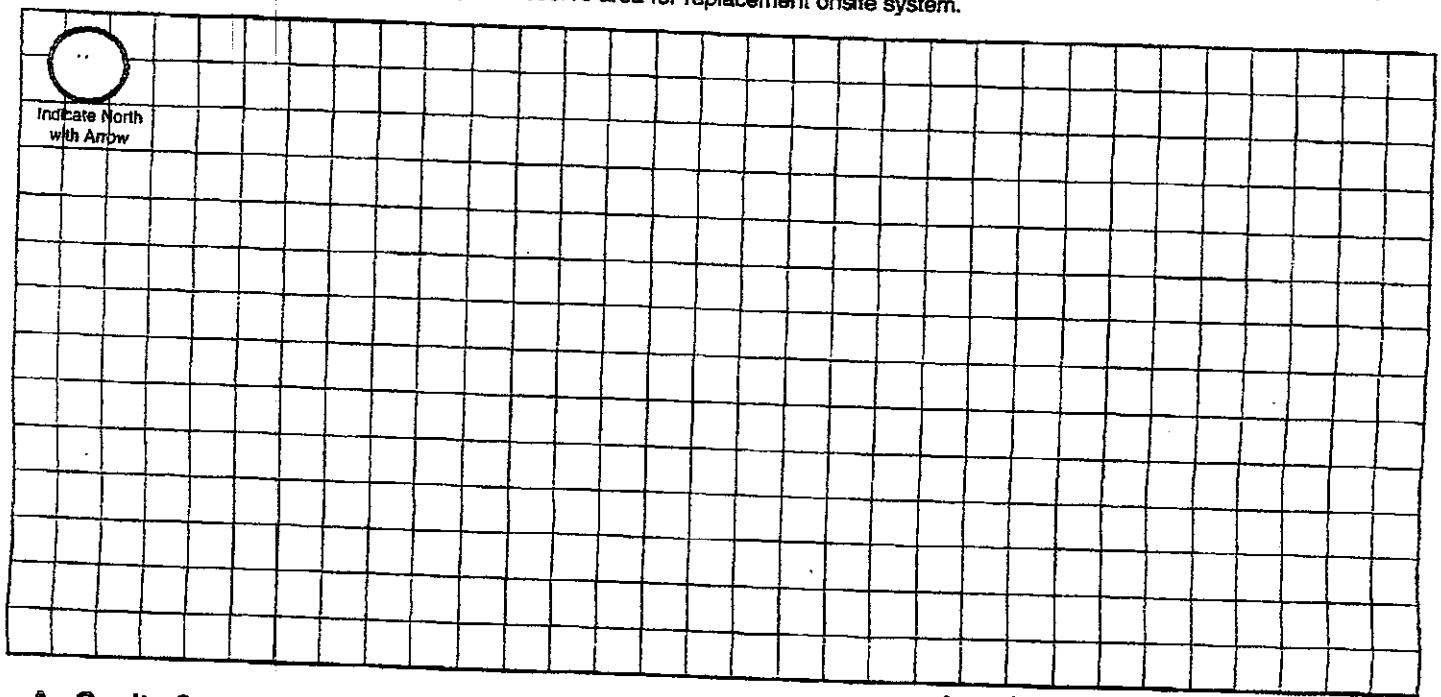
C

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) 15981 SW 114th St. City Crete NE, Zip _____

B. Proposed Septic Tank/s

Septic Tank Cap._____ 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_____ (min/inch = mpi) No. of Bedrooms_____ Soil Type_____ Land Slope_____%

☐ Trench ☐ Bed ☐ Non-Standard (engineer designed and NDEQ approved Total Square feet of drainfield_____sq.ft.

Total length of laterals_____ 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 Distribution 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 Brian L Ziem Date 3/9/18

Installer _____ Date 3/8/18

Onsite Form C 12/06

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS001615

System Type: Lagoon

Situs: 15881 SW 114TH ST, CRETE, NE 68333

Issued: 3/14/2018

Expires: 3/14/2019

Description: S17, T8, R5, 6th Principal Meridian, LOT 41 SE 21.38+- AC Total, 20.79+- AC Net

Owner: TROJAN, DILLON
3870 SW 140 ST
PLEASANT DALE, NE 68423

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

ZIEMANN & SONS CONSTRUCTION LLC
220 FOREST AVE
CRETE, NE 68333