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

A

Permit Number H5001656

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* 20720 S 64TH CT (no rural route) City HICKMAN, NE Zip 68372

Legal Description Sec 4 T7N R7E POE ESTATES 2 4

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

PID 14-04-202-004-000 *Approx. Address (If to be determined)

B. Owner

Name ADAM HEIDEN Signature

Address 813 PARK AVE City/State/Zip HICKMAN, NE 68372

Home Phone Work Phone 402-434-7410

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 5 Whirlpool Bathtub? ☐ Yes ☒ No Garbage Grinder? ☒ Yes ☐ No Total Acres 3.28

☐ 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 5-02-18 Amount Paid $405.00
Received By JAO Cash/Check No. 3925

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

Form A Updated: 4/15

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. HS001656

System Type: Lagoon

Situs: 20720 S 64TH CT, HICKMAN, NE 68372

Issued: 5/4/2018

Expires: 5/4/2019

Description: POE ESTATES, BLOCK 2, Lot 4

Owner: HEIDEN, ADAM
813 PARK AVE
HICKMAN, NE 68372

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

ADAM HEIDEN
813 PARK AVE
HICKMAN, NE 68372

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

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

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Site visits
Comments
Date rec'd 5/4/18
Date frwd 5/4/18
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 7/16/19

Business Office Use Only
Date Received 5-02-18 Amount Paid $405.00
Received By JAO Cash/Check No. 5925

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

Form A Updated: 4/15

* Lagoon prior to inspection

Nate C. Hartman

From: Jason Kubik <southwicksewer@yahoo.com>
Sent: Tuesday, July 16, 2019 8:57 AM
To: Nate C. Hartman
Subject: 20720 S 64th Ct NDEQ CONSTRUCTION PERMIT
Attachments: 20720 S 64th Ct NDEQ CONSTRUCTION PERMIT.pdf

Nate,

See the attached permit.

Thanks!
Jaime

Jason and Jaime Kubik

Southwick Liquid Waste
Office: 402-475-2462
www.southwickliquidwaste.com

COPY

Nebraska Department of Environmental Quality

Construction Permit No. 18OWT015

is hereby issued to

Adam Heiden

for the

450 Gallon/Day Onsite Wastewater Treatment System Alternative Design system

Description:

Average day flow is 450 GPD. Peak flow is 600 GPD. System incudes a 1,500 gallon capacity septic tank, to be followed by a 1,000 gallon tank with a Bio-Microbics MicroFast 0.625 aerobic treatment system followed by a Salcor UV disinfection. The treatment system discharges to a surface polishing pond that requires a minimum 4623 square feet. A maintenance agreement with a certified and manufacturer authorized installer is required for the life of the system.

located at

20720 S 64th Crt, Hickman
40.6091583 Lat / -96.6360083 Long, Lancaster County

Pursuant to a Delegation Memorandum dated August 22, 2016, and signed by the Director, the undersigned hereby executes this document on behalf of the Director.

Signed 5/23/2018

Shelley Schneider

Shelley Schneider, Water Permits Division Administrator

2018003544

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

D

Permit Number:

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon **(Skip to Back Page)** ☐ Subsurface Septic ☐ Mound

Onsite Wastewater System Location

Address or Legal Description or Parcel Identification Number (PID) 14-04-204-001-000

Owner: Adam Heiden Address 20720 S 64th CT Hickman, NE 68372

A. Wastewater Piping

1. Material: SCH 40 PVC Diameter: 4 in.
2. Distance between dwelling and septic tank: 60 ft.

B. Septic Tank

1. Material Infiltrator
2. Capacity: 1500 gallon
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well NA ft.
   Pressure line +25 ft
   Property Line 20 ft.
   Foundation 60 ft.

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: _____ ft. _____

D. Drainfield/Absorption Field

☐ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: _____
2. Number of Laterals: _____
3. Length of each lateral (linear): ft._____ ft._____ ft._____ ft._____
4. Drainfield size: _____ sq. ft.
5. Distance to:
   Well _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.
   Depth of Groundwater _____

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☒ Yes ☐ No

If Yes, the Certified Professional must sign below for final approval:

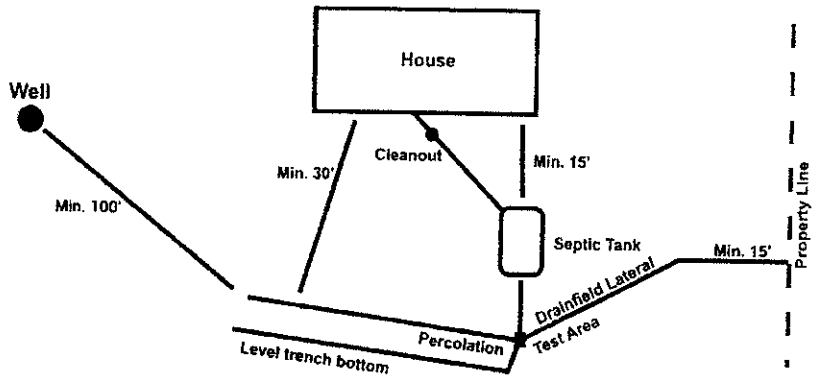
I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: Jamie Kuri Date: 6/14/19

Complete As-Built drawing on the back of this form.

Indicate North
w/ Arrow Here:

Onsite Wastewater System Design (Example)



*Note-If Lagoon, show all applicable dimensions

POLISHING POND

50 FT

UV LIGHT

TANK 1 1600 g

TANK 2 1000 g

4 FT

60 FT

HOUSE

Nate C. Hartman

From: Heidi Hoglund <heidih@hickman.ne.gov>
Sent: Thursday, May 03, 2018 9:05 AM
To: Nate C. Hartman
Subject: Poe Estates Block 2 Lot 4

Mr. Hartman –

The City of Hickman has no objections for an onsite wastewater removal system or lagoon placed on Block 2, Lot 4 of Poe Estates Subdivision. This subdivision is within the City of Hickman's one mile extraterritorial jurisdiction.

Owner Name: HEIDEN, ADAM
Owner Address: 813 PARK AVE HICKMAN,NE 68372
Property Address: 20720 S 64TH CT HICKMAN, NE 68372

Parcel Information
Legal Description: POE ESTATES, BLOCK 2, Lot 4
Property ID: 14-04-202-004-000

Sincerely,

Heidi Hoglund, CFM
Director of Permits, Zoning and Codes Enforcement
City of Hickman
PO Box 127 Hickman Nebraska 68372
402.792.2212 phone
402.792.2210 fax