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

A

Permit Number HS002017

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* 20777 S 24TH ST City HICKMAN, NE Zip 68372
(no rural route)

Legal Description S4 T7 R1 POE ESTATES 2 4
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 14-04-202-006-000 *Approx. Address (If to be determined)

B. Owner

Name MATT BARBER Signature

Address 814 PARK DRIVE City/State/Zip HICKMAN, NE 68372

Home Phone Work Phone

C. Certified Installer

Name: JAIME KUBIK Signature

Address 105 LOCUST ST P.O. BOX 105 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 Total Acres 4.09
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
Date frwd
Comments
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 6-03-20 Amount Paid $430.00
Received By JAO Cash/Check No 00 61160

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

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. HS002017

System Type: Lagoon

Situs: No Site Address Specified

Issued: 6/4/2020

Expires: 6/4/2021

Description: POE ESTATES, BLOCK 2, Lot 6

Owner: BARBER, MATTHEW & MICHELLE
814 PARK DR
HICKMAN, NE 68372

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, 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.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Interim Health Director

MATT BARBER
814 PARK DR
HICKMAN, NE 68372