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

A

Permit Number
H5002108

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* 14255 E SHILOH (no rural route) City BENNET, NE Zip 68317

Legal Description S9 T8 R8 LITTLE NEMAHA LAKE ESTATES 1
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 21-09-401-001-000 *Approx. Address (If to be determined)

B. Owner

Name MONTE FROELICH Signature

Address 14255 E SHILOH City/State/Zip BENNET, NE 68317

Home Phone 402-802-1776 Work Phone

C. Certified Installer

Name: JAIME KUBIK Signature

Address 105 LOCUST P.O. BOX 191 City/State/Zip HICKMAN, NE 68372

Work Phone

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 6 Whirlpool Bathtub? ☒ Yes ☐ No Total Acres 10.02
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 10-07-22 Amount Paid $440
Received By JAD Cash/Check No. 00814

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

Form A Updated: 4/15

B

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

Permit Number: 033802695

Sewage Disposal System
Soil Absorption Test Data Report
Annex to Application

PLEASE PRINT OR TYPE

System Location (Indicate correct number and street)

Address Shilo Rd (no rural route) City Bennet NE, Zip 68312

Owner Anderson Address

Soil Type (SCS): SHO / IVc Percolation Rate: min./inch

Date of Tests 5-6 to 5-7-03 Weather: Precipitation Temperature 60-70

Percolation Test Data Table

A.	B.	C. D. E. F. Pre-Saturation Period				G. H. I. J. K. Percolation Readings					L. M. N. Results		
		Start		End		Start			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 (Min)	Water Level Drop (in)	Percolation Rates (Min/in)
1	30	5/6	4:00	5/7	12:00	5/7	5:30	18	5/7	6:00	30	5/8	48
2			PM		Noon		PM	19 3/8		PM		1/2	60
3								17 7/8				5/8	48
4								16 1/2				5/8	48
5								20 3/8				5/8	48
6								22				1 3/4	18

Sum of Percolation Rates: 270
Average of Rates: 45
Rate Used for Calculation: 60

Person Conducting Percolation Tests

Name: Brad Southwick
Phone: 430-7606
Address: 17201 Se 72nd st.
Hickman, Ne. 68372

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Remarks

Signature of Reviewing Official Date

FORM 23-101 10-96

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. HS002108

System Type: Standard

Situs: No Site Address Specified

Issued: 10/7/2020

Expires: 10/7/2021

Description: LITTLE NEMAHA LAKE ESTATES ADDITION, Lot 1

Owner: FROEHLICH, MONTE & LISA
129 N 10 ST
LINCOLN, NE 68508

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

JAIME KUBIK
105 LOCUST ST, PO BOX 191
HICKMAN, NE 68372

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

SCANNED

A

Permit Number
HS002108

Onsite Wastewater Treatment System Permit Application

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Comments
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Date frwd 10/7/20
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 11/5/20

Business Office Use Only
Date Received 10-07-20 Amount Paid $440
Received By JKO Cash/Check No. 0084

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

Form A Updated: 4/15

*System Replacement

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) 21-09-401-001-000

Owner: MONTE FROELICH Address 14255 E SHILOH RD BENNET NE 68317

A. Wastewater Piping

1. Material: SCH 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 42 ft.

B. Septic Tank

1. Material INFILTRATOR 1060 #1530
2. Capacity: 2500
3. Depth to top of tank, below unfinished grade: 12 in.
4. Distance to:
   Well NA ft.
   Pressure line +100 ft.
   Property Line +100 ft.
   Foundation 42 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 10 ft. S

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☒ Other
   Material brand and inside width of Chamberless: EZ Flow
2. Number of Laterals: 4
3. Length of each lateral (linear): ft. 120 ft. 120 ft. 120 ft. 110
4. Drainfield size: 2115 sq. ft. (2100 Req'd)
5. Distance to:
   Well NA ft.
   Pressure line +100 ft.
   Property line +100 ft.
   Depth of Groundwater +12

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: [signature] Date: 10/23/2020

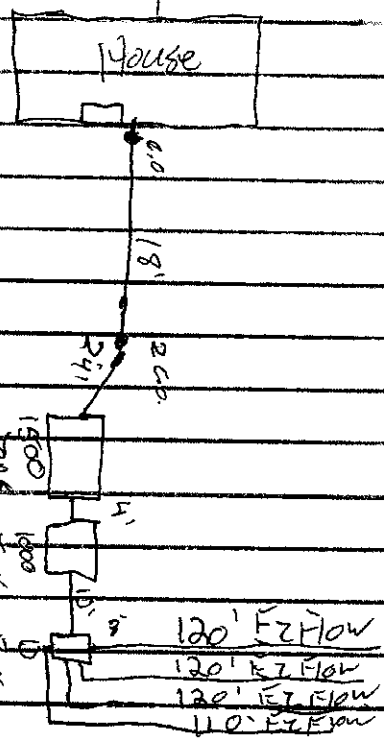
Saw final product ✓ NH

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

N
W E
S

Rural water

14255 Shiloh rd



* Rural Water staked

no well

8'
3
16'
3'
25'
3'
3
4
24
10
99' of our Pipe