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

A

Permit Number #5002156

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* 11005 WAGON TRAIN RD City HICKMAN, NE Zip 68372
(no rural route)

Legal Description 31 8 8 6TH PRINCIPAL MERIDIAN 45W
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID 21-31-300-004-000 *Approx. Address (If to be determined)

B. Owner

Name ERIC LOKEN Signature

Address 11005 WAGON TRAIN RD City/State/Zip HICKMAN, NE 68372

Home Phone Work Phone

C. Certified Installer

Name: JAMIE KUBIK Signature Jamie Kubik

Address 105 LOCUST ST BOX 191 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 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 12-09-20 Amount Paid $440.00
Received By JAO Cash/Check No CC
0214 LC

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

Form A Updated: 4/15