Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number HS002222

Existing Home
(Replacing Septic)

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* 11501 W Midway Rd (no rural route) City Denton NE Zip 68339

Legal Description NE (1/4) SE (1/4) 20 (Section) 9N (Township) 5E (Range) Thayer Addition (Subdivison) 1 (Block) (Lot)

PID 03-20-401-001-000 *Approx. Address (if to be determined)

B. Owner

Name Adam Chichinsky Signature

Address 11501 W Midway Rd City/State/Zip Denton, NE 68339

Home Phone 402-937-5267 Work Phone

C. Certified Installer

Name: Lloyd Jakoubek Signature

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-2663

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 3 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 3.01
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 fwd Signature
Comments

2. **Supt. Bldg. Insp. or Village Clerk**
Comments Date rec'd ACTION ☐ Approved ☐ Disapproved
Date fwd Signature

3. **City or County Engineer**
Comments Date rec'd ACTION ☐ Approved ☐ Disapproved
Date fwd Signature

Installation Final Written Approval
By
Date

Business Office Use Only
Date Received 5-24-23 Amount Paid $440.00
Received By Cash/Check No. 65040

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

Form A Updated: 2/18

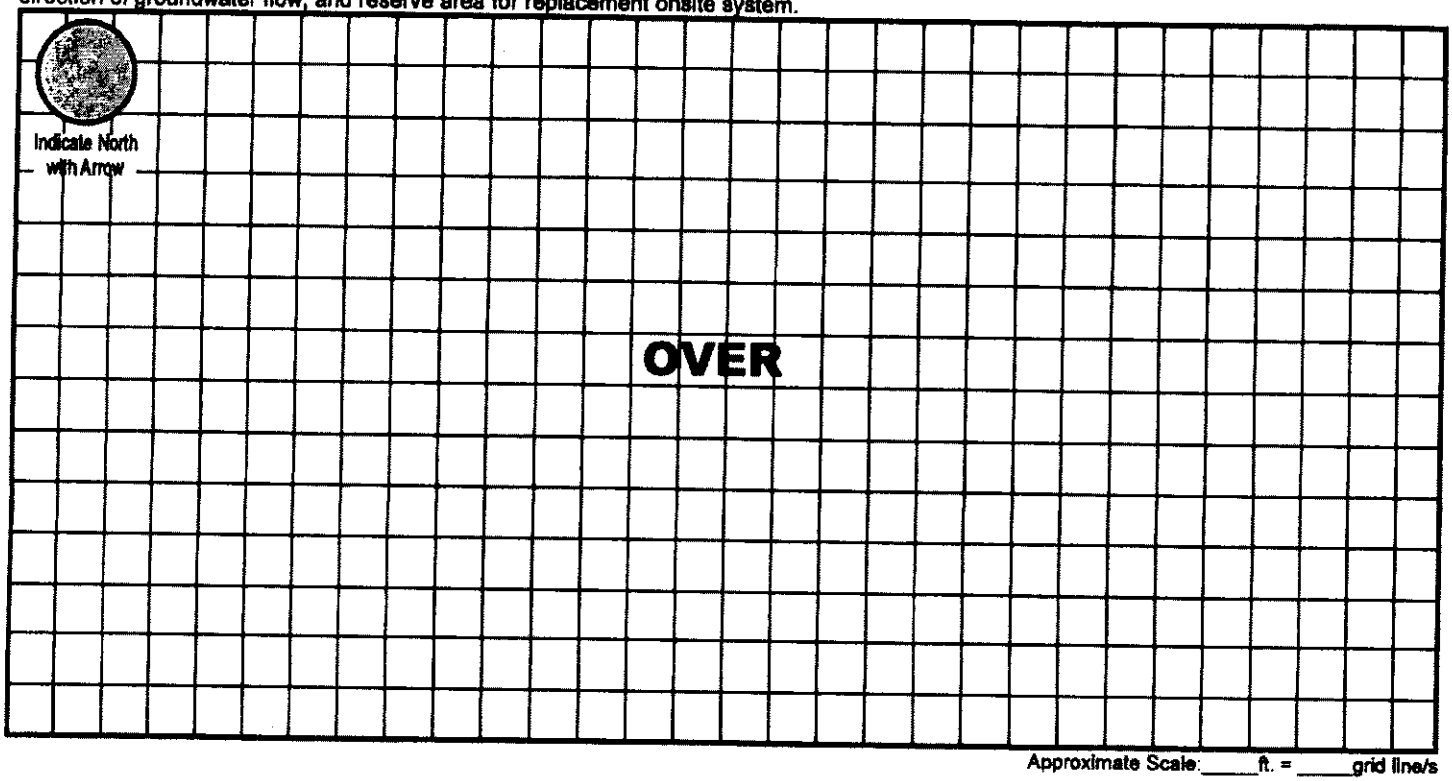
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C

Permit Number

Onsite Wastewater Treatment System
Preliminary Plan Specification

Draw a plot plan showing onsite system sewer lines, tank, drop or distribution boxes, drainfields, percolation test holes, well, residence, direction of groundwater flow, and reserve area for replacement onsite system.



Approximate Scale: ____ ft. = ____ grid line/s

A. Onsite System Location

Address (no rural route) 11501 W Midway Rd City Denton NE, Zip 68339

B. Proposed Septic Tank/s

Septic Tank Cap. _____ gals Tank Material: ☐ Concrete ☐ Plastic ☐ Other _____ ☑ Lagoon (Max. Seepage 1/8"/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 ☐ Chambers ☐ Other _____

No. of Absorption Trenches _____ Width _____ No. of Drop Boxes _____ Distribution Box _____

No. of Absorption Beds _____ Width _____ No. of Distribution Lines per Bed _____

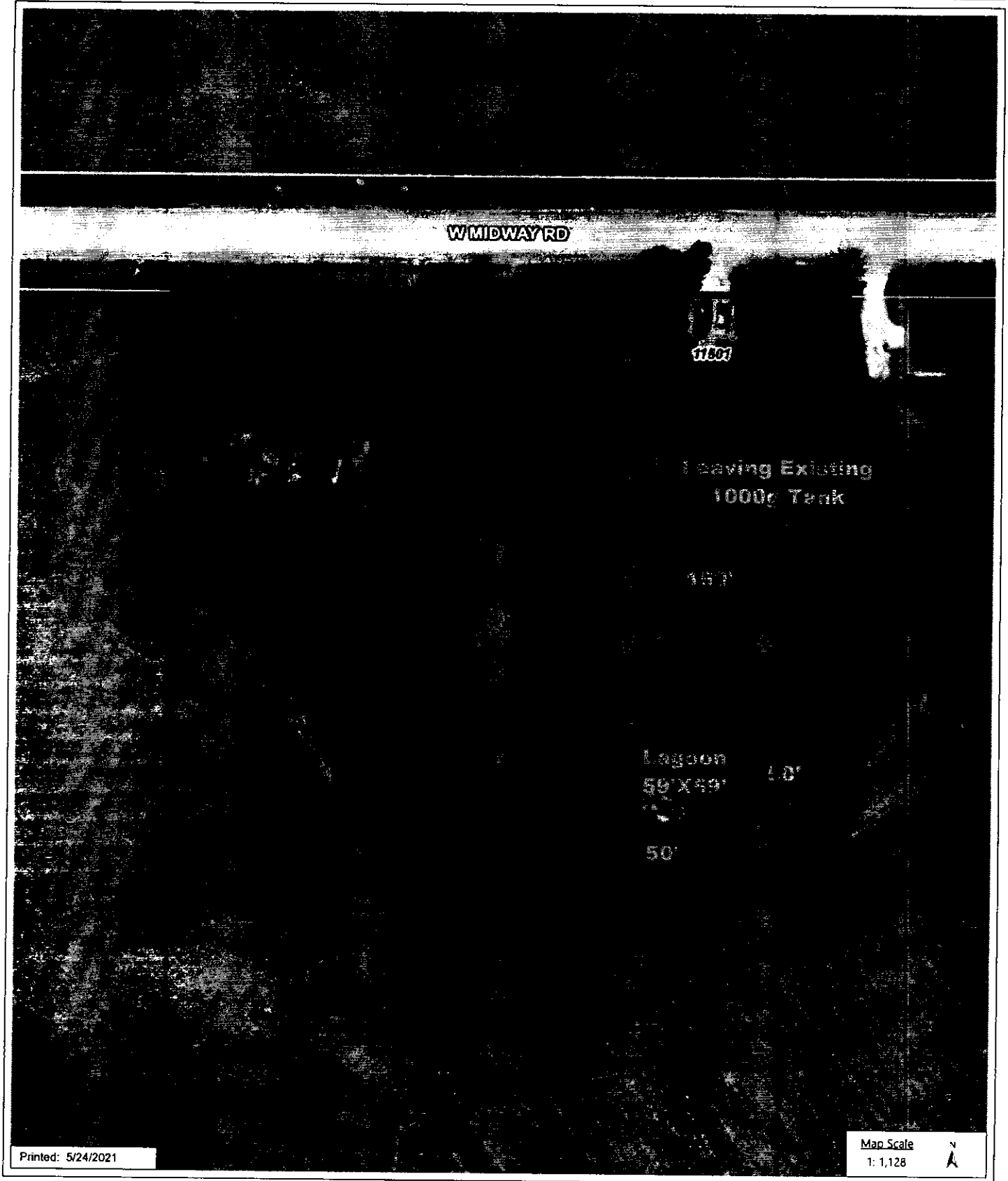
Installer Ross L Jorgensen Date: 5/24/21

Updated 2/18

11501 W Midway Rd, Denton, NE 68339

GIS Viewer
CITY OF LINCOLN / LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



DISCLAIMER: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

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. HS002222

System Type: Lagoon

Situs: No Site Address Specified

Issued: 5/25/2021

Expires: 5/25/2022

Description: THAYER ADDITION, Lot 1

Owner: CHICHINSKY, STEPHANIE R & ADAM L
11501 W MIDWAY RD
DENTON, NE 68339

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
Health Director

RAYMOND CONTRACTING INC
13800 NW 70TH ST
RAYMOND, NE 68428