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

A

Permit Number #5002225

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* 8901 S 176TH (no rural route) City BENNET, NE Zip 68317

Legal Description 26 9 8 6TH PRINCIPAL MERIDIAN SFNE

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

PID 22-26-200-003-060 *Approx. Address (If to be determined)

B. Owner

Name NATE DILLON Signature

Address 11200 S 84TH City/State/Zip LINCOLN, NE 68514

Home Phone 402-217-4275 Work Phone

C. Certified Installer

Name: JAMIE KLAUZ Signature

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 3 Whirlpool Bathtub? ☐ Yes ☒ No Total Acres 39.18
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 6-01-21 Amount Paid $440.00
Received By JAO Cash/Check No. CC385K

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. HS002225

System Type: Lagoon

Situs: No Site Address Specified

Issued: 6/7/2021

Expires: 6/7/2022

Description: S26, T9, R8, 6th Principal Meridian, SE NE

Owner: DILLON, NATHANAEL & AMANDA
11200 S 84 ST
LINCOLN, NE 68516

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

NATE DILLON
11200 S 8RTH ST
LINCOLN, NE 68516

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

SCANNED

A

Permit Number
#5002225

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Name NATE DILLON Signature

Address 11200 S 84TH City/State/Zip LINCOLN, NE 68514

Home Phone 402-217-4275 Work Phone

C. Certified Installer

Name: JAIME KUBIK Signature

Address 105 LOCUST ST BOX 191 City/State/Zip HICKMAN, NE 68372

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☐ **Check and complete if engineer designed system** P.E. License Number:

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Site visits
Comments
Date rec'd 6/7/21
Date frwd 6/7/21
ACTION ☒ Approved ☐ Disapproved
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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 10/27/21

Business Office Use Only
Date Received 6-07-21 Amount Paid $440.00
Received By JAO Cash/Check No. CC3856

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

Form A Updated: 4/15

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

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 8901 S 176th (no rural route) City Bennet NE, Zip 68317

Owner Nate Dillon Address

Date of Tests 6/30/2021 to 7/1/2021 Weather: Precipitation none Temperature 80 degrees

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Water Level Drop Last 30 mins of 4 hr or last 10 mins of 1 hr					L. M. N. Results		
		Start		End		Start		Initial	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 Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	30 inches	6/30	4:45 pm	7/1	8:00 am	7/1	11:30 am	6	7/1	12:00 pm	30 min	1 1/4	24
2	30 inches	6/30	4:45 pm	7/1	8:00 am	7/1	11:30 am	6	7/1	12:00 pm	30 min	1/2	60
3	30 inches	6/30	4:45 pm	7/1	8:00 am	7/1	11:30 am	6	7/1	12:00 pm	30 min	3/4	40
4	30 inches	6/30	4:45 pm	7/1	8:00 am	7/1	11:30 am	6	7/1	12:00 pm	30 min	1	30
5	30 inches	6/30	4:45 pm	7/1	8:00 am	7/1	11:30 am	6	7/1	12:00 pm	30 min	3/4	40
								6					
								6					
								6					

Person Conducting Percolation Test

Name: Jason Kubik
Phone: 402-475-2462
Address 105 Locust Street P.O. Box 191
Hickman, NE 68372

Sum of Percolation Rates: 194
Average of Rates: 48.5
Rate Used for Calculation: 59

Soil type (NRCS Maps/Other) 7501 Pawnee
Groundwater Depth +12 ft

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

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

Permit Number: HS002228

Onsite Wastewater Treatment System

Inspection Sheet

Date 10/13/21 Legal Description 22 26 29E 003 0000
¼ ¼ Section/Township/Range

Onsite System Location

Address (no rural route) 8701 S. 176th City _____

Owner _____ Address _____

Mark One: ☒ Dwelling ☐ Non-dwelling

☒ New System ☐ Alteration [☐ Tank Only ☐ Trench Only] ☐ Lateral Only

☐ Temporary modification (Describe problem causing discharge and reason for temporary modification): _____

_____

Drainfield Absorption System:

☒ Lateral ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) ☐ Holding Tank ☐ Trench

Total square feet of drainfield 1080 Sq. Ft. (108 lin ft) Tank Size 1500 gals

Total length of laterals 240 Type of Distribution: ☐ Chamber ☐ Perforated Pipe ☒ Other (describe) S2- Flow

No. of Absorption Laterals 4 Width 3' No. of Drop Boxes 0 Distribution Box 1

Leveling Method Used Laser

Setbacks (Check the Boxes Below if the Required Setback has been Satisfied):

Distance From	Private Well	Public Well	Surface Water	Ground water	Pressure Water Lines	Property Lines
Tank (ft)	50 ☐	500 ☐	50 ☐	NA ☐	10 ☐	5 ☐
Field (ft)	100 ☐	500 ☐	50 ☐	4 ☐	25 ☐	5 ☐

Geographical Coordinates to 6 Decimals:

Tank _____

Lateral #1 _____ Lateral #3 _____

Lateral #2 _____ Lateral #4 _____

Comments:

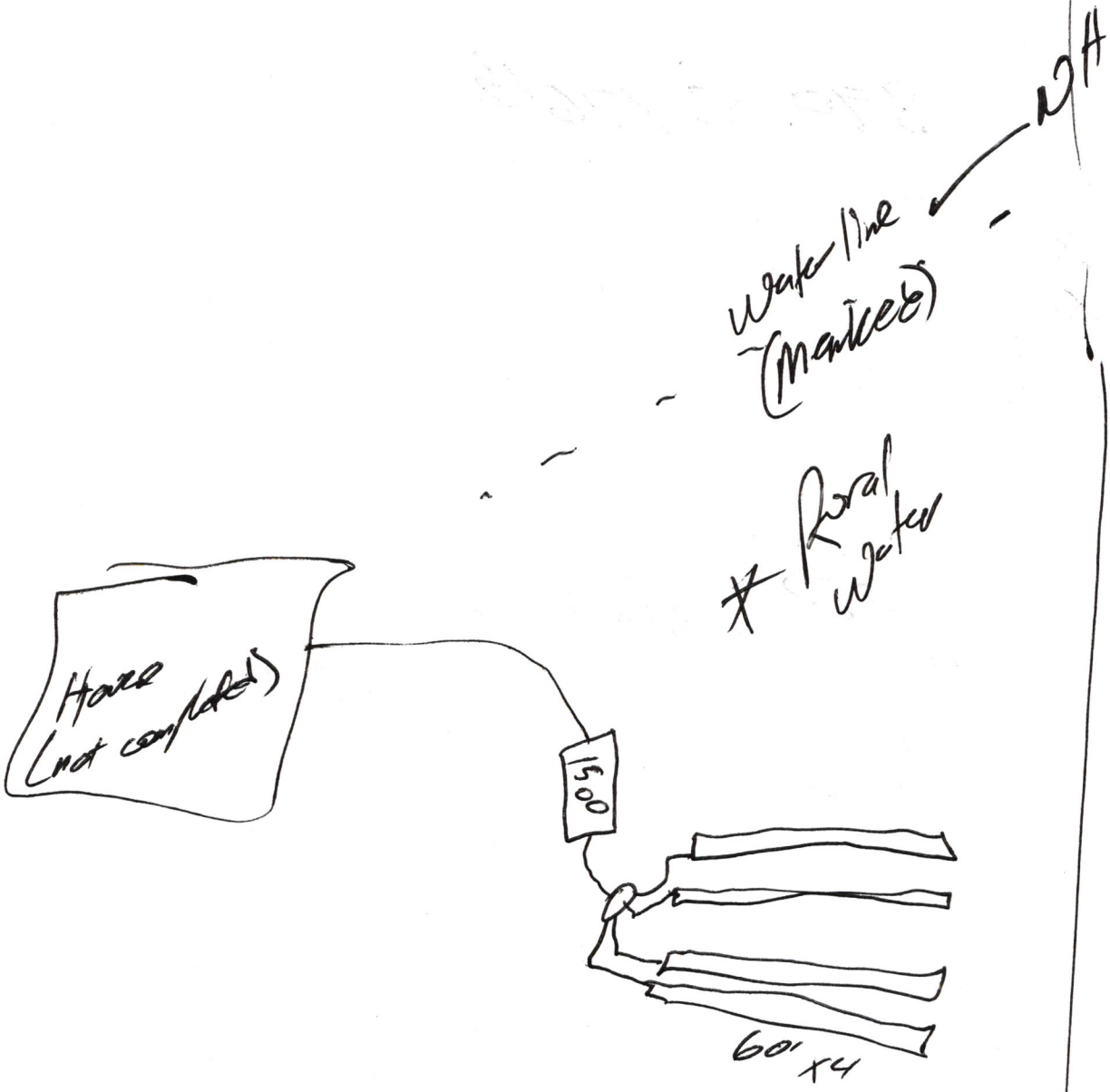
Inspections prior to Final Approval
Initial DH Date 10/6/21

Follow-Up _____ Date _____

Follow-Up _____ Date _____

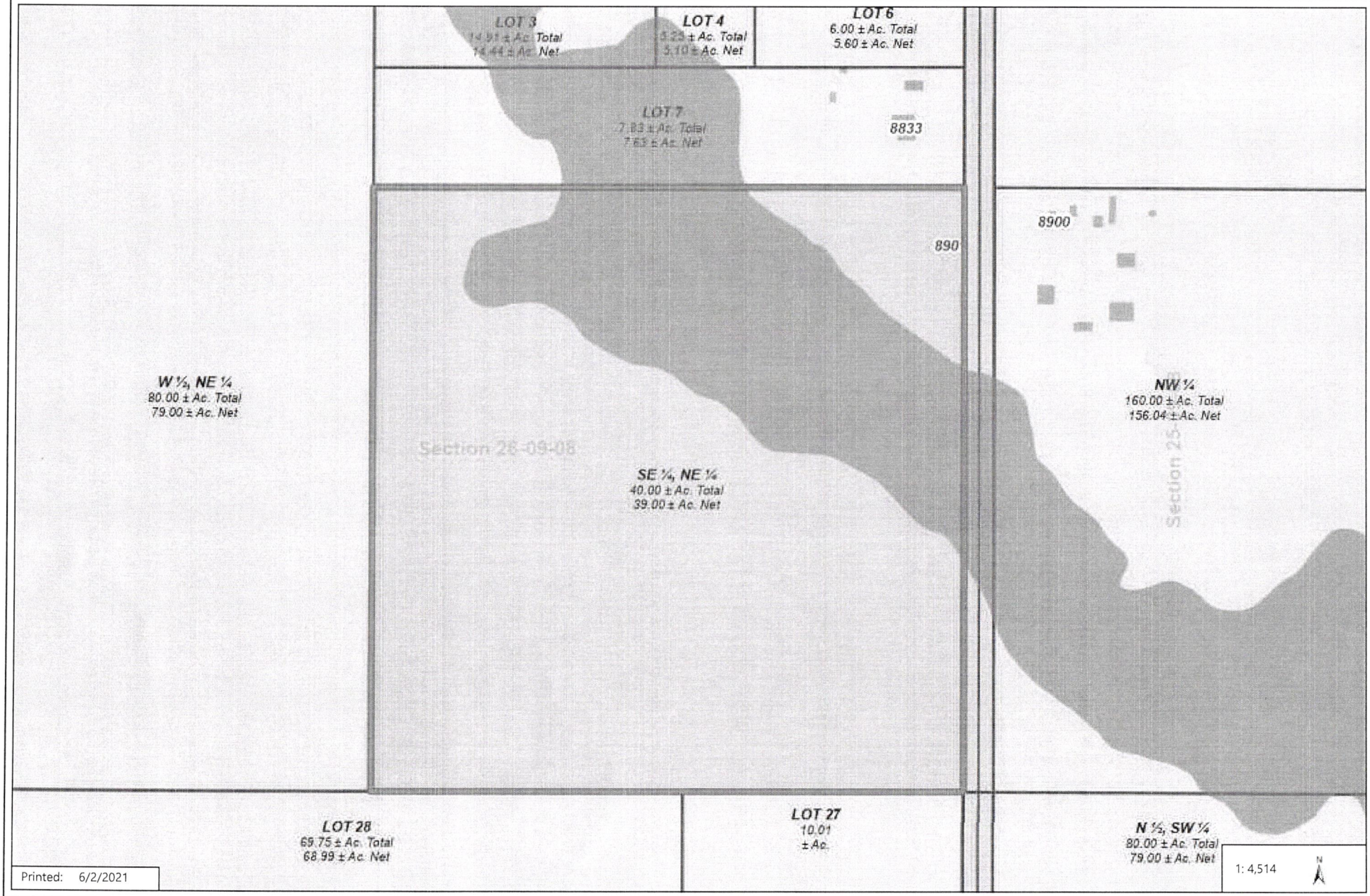
Installation Final Written Approval
By _____
Date 10/27/21

Field Note Drawing (See Reverse Side):


2"
water line
(marked)
* Rural
Water
House
(not completed)
1500
60' x4

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



Printed: 6/2/2021

1: 4,514

N

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.