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

A

Permit Number
HS002470

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* 20055 EMERSYN PT (no rural route) City HICKMAN, NE Zip 68372

Legal Description 32 8 7 SALT CREEK RESERVE 1ST ADDITION 12
1/4 1/4 Section Township LC Range Subdivison Addition Block Lot

PID 15-32-402-012-000 *Approx. Address (If to be determined)

B. Owner

Name BLACK OAK BUILDERS Signature

Address 3601 CALVERT STREET STE 17 City/State/Zip LINCOLN, NE 68506

Home Phone 402-904-7888 Work Phone

C. Certified Installer

Name: JAIME KUBIK Signature Jaime Kubik

Address 105 LOCUST ST P.O. 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 3.02
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 10-6-22 Amount Paid 460.00
Received By LC Cash/Check No. 74497
CC

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

Form A Updated: 4/15

Soil Absorption Test Data Sheet

Owner Information:

Owner: Black Oak Builders Phone: 402-408-7888

Address: 6301 Calvert St, Ste 17, Lincoln, NE 68506

Location: Lot #12, Salt Creek Preserve

Latitude 40.6144 Longitude -96.6525

Township _____ Range _____ Sec. _____ 1/4 sec. _____

County: Lancaster Area: 3.00 Acres

Soil Boring

0 - 14"	VDGB SiCL
14 - 32"	Br SiCL
33 - 35"	Br SiCL w/mod red/br mottles
35 - 84	Gr Br SiCL w/mod red/br mottles

No Evidence of Seasonal High Water Table Within 7ft of Surface

Test Dates

Start Date	End Date
5/9/22	5/9/22

Test Day Weather

Weather Sunny Temp. 87F

Precipitation None

Percolation test data:

Hole No.	Hole Depth (in.)	Final Percolation Readings: Start Date Mo./Day	Start Time (Hr./Min.)	Start Water Level (in.)	End (Hr./Min.)	End Water Level (in.)	Final Results: Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rate (Min./Inch)
1	24	5/9/22	11:00 AM	7.80	11:30 AM	7.20	30	0.60	50.0
2	24	5/9/22	11:01 AM	8.00	11:31 AM	7.35	30	0.65	46.2
3	24	5/9/22	11:02 AM	7.85	11:32 AM	7.05	30	0.80	37.5
4	24	5/9/22	11:03 AM	8.00	11:33 AM	7.40	30	0.60	50.0
5	24	5/9/22	11:04 AM	7.90	11:34 AM	7.40	30	0.50	60.0

Jeffery N. Schoenfeck

Jeffery N. Schoenfeck, P.E. - E8989
Horizon Envirotech, LLC
1645 County Rd T
Cedar Bluffs, NE 68015
(402) 720-9209
Phone

Sum of Percolation rates = 243.7

Number of test holes = 5

Average of rates in Minutes/inch = 48.7

*If rates vary more than 20 minutes/inch, do not average but use the slowest rate for design purposes.

Based on Soil Profile - Lateral Trench Depth Should be 18-24" for best performance

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. HS002470

System Type: Standard

Situs: No Site Address Specified

Issued: 10/7/2022

Expires: 10/7/2023

Description: SALT CREEK RESERVE 1ST ADDITION, Lot 12

Owner: LEHR, AUSTIN & CIARA
518 PROSPECT ST
BELLWOOD, NE 68624

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, 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

BLACK OAK BUILDERS
ANGELO WIGNALL
3601 CALVERT ST STE 17
LINCOLN, NE 68506

SCANNED

A

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

Permit Number
HSOO2470

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* 20055 EMERSYN PT City HICKMAN, NE Zip 68372
(no rural route)

Legal Description 32 8 7 SALT CREEK RESERVE 1ST ADDITION 12
1/4 1/4 Section Township LC Range Subdivison Addition Block Lot

PID 15-32-402-012-000 *Approx. Address (If to be determined)

B. Owner

Name BLACK OAK BUILDERS Signature
Address 3601 CALVERT STREET STE 17 City/State/Zip LINCOLN, NE 68506
Home Phone 402-904-7888 Work Phone

C. Certified Installer

Name: JAIME KUBIK Signature Jaime Kubik
Address 105 LOCUST ST P.O. 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 3.02
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 10/7/22
Date frwd 10/7/22
ACTION ☒ Approved ☐ Disapproved
Signature

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

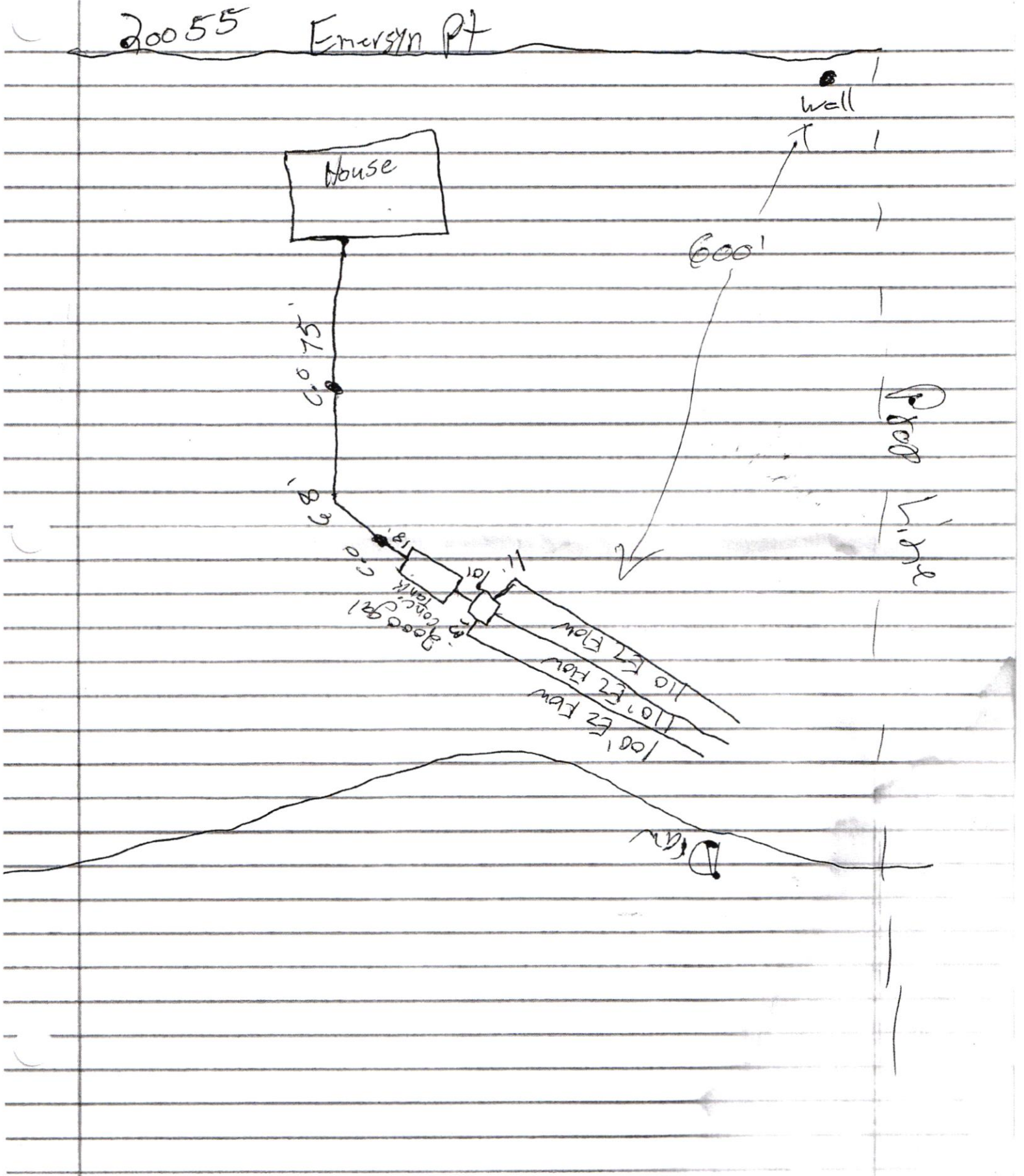
3. City or County Engineer
Comments
Date rec'd
Date frwd
ACTION ☐ Approved ☐ Disapproved
Signature

Installation Final Written Approval
By
Date 6/6/23

Business Office Use Only
Date Received 10-6-22 Amount Paid 460.00
Received By TC Cash/Check No. 7497
CC

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

Form A Updated: 4/15


20055 Emerson Pt
House
Wall
600'
75'
Pool Line
100' EZ Flow
10' EZ Flow
10' EZ Flow

D

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

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) 15-32-402-011-000

Owner: CHARLES WOODS Address 20055 EMERSON POINT

A. Wastewater Piping

1. Material: SCH 40 Diameter: 4 in.
2. Distance between dwelling and septic tank: 11e1 ft.

B. Septic Tank

1. Material CEMENT
2. Capacity: 2000 GALLON
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well 600+ ft.
   Pressure line 50+ ft
   Property Line 50+ ft.
   Foundation 11e1 ft.

C Distribution Box or Drop Box

Distance and Direction from septic tank: 10 ft. SW

D. Drainfield/Absorption Field

☒ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☐ Other
   Material brand and inside width of Chamberless: EZ FLO
2. Number of Laterals: 3
3. Length of each lateral (linear): ft. 110 ft. 110 ft. 100 ft.
4. Drainfield size: 1440 sq. ft. 1500 Reqd (1400 Reqd)
5. Distance to:
   Well 600+ ft.
   Pressure line +50 ft.
   Property line +50 ft.
   Depth of Groundwater +12

>60 mPi Variance

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: Jason Kuo Date: 5/30/23

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

Soil Absortion Test Data Sheet

Owner Information:

Owner: Black Oak Builders Phone: 402-408-7888

Address: 6301 Calvert St, Ste 17, Lincoln, NE 68506

Location: Lot #12, Salt Creek Preserve

Latitude 40.6144 Longitude -96.6525

Township _____ Range _____ Sec. _____ 1/4 sec. _____

County: Lancaster Area: 3.00 Acres

Soil Boring

0 - 14"	VDGB SiCL
14 - 32"	Br SiCL
33 - 35"	Br SiCL w/mod red/br mottles
35 - 84	Gr Br SiCL w/mod red/br mottles

No Evidence of Seasonal High Water Table Within 7ft of Surface

Test Dates

Start Date	End Date
5/9/22	5/9/22

Test Day Weather

Weather Sunny Temp. 87F

Precipitation None

Percolation test data:

Hole No.	Hole Depth (in.)	Final Percolation Readings: Start Date Mo./Day	Start Time (Hr./Min.)	Start Water Level (in.)	End (Hr./Min.)	End Water Level (in.)	Final Results: Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rate (Min./Inch)
1	24	5/9/22	11:00 AM	7.80	11:30 AM	7.20	30	0.60	50.0
2	24	5/9/22	11:01 AM	8.00	11:31 AM	7.35	30	0.65	46.2
3	24	5/9/22	11:02 AM	7.85	11:32 AM	7.05	30	0.80	37.5
4	24	5/9/22	11:03 AM	8.00	11:33 AM	7.40	30	0.60	50.0
5	24	5/9/22	11:04 AM	7.90	11:34 AM	7.40	30	0.50	60.0

Jeffery N Schoenleck

Jeffery N. Schoenleck, P.E. - E8989
Horizon Envirotech, LLC
1645 County Rd T
Cedar Bluffs, NE 68015
(402) 720-9209
Phone

Sum of Percolation rates = 243.7

Number of test holes = 5

Average of rates in Minutes/inch = 48.7

*If rates vary more than 20 minutes/inch, do not average but use the slowest rate for design purposes.

Based on Soil Profile - Lateral Trench Depth Should be 18-24" for best performance

Nate C. Hartman

From: Nate C. Hartman
Sent: Friday, October 7, 2022 11:38 AM
To: Heidi Hoglund
Subject: RE: Buel Highlands and Salt Creek Reserve in Hickman

Salt Creek Reserve 1st Add, Lot 12- Permit Number HS002470 has been received, reviewed, approved and issued.

Let me know if you need anything else...

Thanks!

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
3131 'O' Street, Lincoln, NE 68510
O: 402-441-8643 F: 402-441-3890

From: Heidi Hoglund <heidih@hickman.ne.gov>
Sent: Wednesday, October 5, 2022 4:54 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: RE: Buel Highlands and Salt Creek Reserve in Hickman

Perfect, thank you!

From: Nate C. Hartman <nhartman@lincoln.ne.gov>
Sent: Wednesday, October 5, 2022 4:23 PM
To: Heidi Hoglund <heidih@hickman.ne.gov>
Subject: RE: Buel Highlands and Salt Creek Reserve in Hickman

Heidi:

Salt Creek Reserve 1st Add Lot 2 Permit- HS002466
Salt Creek Reserve 1st Add Lot 9 Permit-HS002468

Both have been received, reviewed, approved and issued.

Please let me know if you need anything else..I don't think I've seen anything on lot 12 yet...

Thanks!

Nate Hartman REHS, QCIS, QPSWPPP
Senior Environmental Health Specialist
3131 'O' Street, Lincoln, NE 68510
O: 402-441-8643 F: 402-441-3890

From: Heidi Hoglund <heidih@hickman.ne.gov>
Sent: Wednesday, October 5, 2022 1:31 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: FW: Buel Highlands and Salt Creek Reserve in Hickman

Good afternoon Mr. Hartman - The City of Hickman has received building permits for Lots, 2, 9, and 12 in Salt Creek Reserve 1st Addition for single family residences. We won't issue those permits until we have received approval from the Health Department for their onsite wastewater systems. Let me know if I can provide additional information to you. Thank you!

Sincerely,
Heidi Hoglund, CFM
Zoning and Floodplain Administrator
City of Hickman
PO Box 127 Hickman Nebraska 68372
402.792.2212 phone 402.792.2210 fax

This message and any attachments are confidential, may contain privileged or legally protected communications or information, and are intended solely for the recipient named above. If you are not the intended recipient, you are notified that any review, distribution, dissemination or copying of this message or any attachment is prohibited. If you have received this message in error, you should immediately notify the sender by a return e-mail and delete the message from your computer system.

From: Heidi Hoglund
Sent: Thursday, March 11, 2021 12:57 PM
To: Nate C. Hartman <nhartman@lincoln.ne.gov>
Subject: Buel Highlands and Salt Creek Reserve in Hickman

Hello Mr. Hartman – You may be receiving applications for onsite wastewater removal systems to be placed on lots located within Buel Highlands Estates, Buel Highlands Estates 2nd Addition, Salt Creek Reserve and Salt Creek Reserve 1st Addition Subdivisions. The City of Hickman has no objections to onsite wastewater removal systems within the four Subdivisions list above, if they meet the standards of the Lincoln-Lancaster County Health Department.

Thank you for your time,
Heidi Hoglund, CFM
Zoning and Floodplain Administrator
City of Hickman
PO Box 127 Hickman Nebraska 68372
402.792.2212 phone
402.792.2210 fax

This message and any attachments are confidential, may contain privileged or legally protected communications or information, and are intended solely for the recipient named above. If you are not the intended recipient, you are notified that any review, distribution, dissemination or copying of this message or any attachment is prohibited. If you have received this message in error, you should immediately notify the sender by a return e-mail and delete the message from your computer system.

CONFIDENTIALITY NOTICE: This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or