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

A

Permit Number
HSDD2505

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* 13001 PELLA Rd. City Firth, NE Zip 68358
(no rural route)

Legal Description 29, 7, 8 14
1/4 1/4 Section Township Range Subdivison Addition Block Lot

PID _____ *Approx. Address (If to be determined) _____

B. Owner

Name Olde Family Farms Signature _____
Address 1814 9th Rd. City/State/Zip Linn, KS 66953
Home Phone _____ Work Phone 785-346-5697

C. Certified Installer

Name: WADE LEWIS Signature _____
Address 324 3rd St. City/State/Zip FAIRBURY, NE 68352
Work Phone 402-729-3586

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 20 0/10H
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 1/31/23
Date frwd 1/31/23
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 1-31-23 Amount Paid 460.00
Received By LC Cash/Check No. CC0604

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

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8023
3131 O Street Lincoln, Nebraska 68510-1514

No.

Business:

Issued:
Expires:

Owner:

POST IN A PROMINENT PLACE

Patricia D. Lopez
Patricia D. Lopez, RN, MSN, Health Director

Dear :

The above document is your new Certificate of Compliance.

Patricia D. Lopez
Patricia D. Lopez, RN, MSN
Health Director

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. HS002505

System Type: Lagoon

Situs: No Site Address Specified

Issued: 2/7/2023

Expires: 2/7/2024

Description: S29, T7, R8, 6th Principal Meridian, LOT 14 NE

Owner: WILDCAT PROPERTY
MANAGEMENT LLC
1814 9 RD
LINN, KS 66953

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

WADE LEWIS
324 3RD ST
FAIRBURY, NE 68352

Case #: **HC23000207**

SOLID WASTE COMPLAINT SERVICE RECORD

Assigned: HHEAFER

Created by LCOOK on 02/07/2023

Dept: HEALTH/WASTE/NA/NA/NA/N

Address: **1119 E ST**

Call Requested: N Called: N

Location:

Requestor: SCF - ANONYMOUS, LINCOLN, NE,

UPLNK / Action Tracking Number: 14043111

Nature: dog poop in walk

Item	Reported	Allegation	To Wit
1	02/07/2023	Animal Waste	

DATE	ITEM	ACTION TAKEN AND RESULTS