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

A

Permit Number HS0025536

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* 8933 N 190th (no rural route) City Waverly, NE Zip 68462

Legal Description NE NE 25 11 8E Johnson Acres Add. 1 Lot

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

PID 2425201001000 *Approx. Address (If to be determined)

B. Owner

Name Ryan P. Johnson Signature

Address 8725 N. 190th City/State/Zip Waverly, NE 68462

Home Phone 402-450-2443 Work Phone

C. Certified Installer

Name: Brent Thiessen AWS well Signature

Address PO Box 246 City/State/Zip Mead, NE 68041

Work Phone 402-624-3895 677-4875

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 5

Garbage Grinder? ☒ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify Design flow in gallons per day 500

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 frwd Signature

Comments

2. Supt. Bldg. Insp. or Village Clerk

Comments Date rec'd ACTION ☐ Approved ☐ Disapproved

Date frwd Signature

3. City or County Engineer

Comments Date rec'd ACTION ☐ Approved ☐ Disapproved

Date frwd Signature

Installation Final Written Approval

By

Date

Business Office Use Only

Date Received 5-12-23 Amount Paid $460.00

Received By JAO Cash/Check No. 23789

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. HS002536

System Type: Lagoon

Situs: No Site Address Specified

Issued: 5/16/2023

Expires: 5/16/2024

Description: JOHNSON ACRES ADDITION, Lot 1

Owner: JOHNSON, RYAN P
8725 N 190 ST
WAVERLY, NE 68462

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

BRENT THIESSEN
PO BOX 246
MEAD, NE 68041

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

SCANNED

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Comments

Date rec'd

Date frwd

ACTION ☐ Approved ☐ Disapproved

Signature

Installation Final Written Approval

By

Date 1/17/24

Business Office Use Only

Date Received 5-12-23 Amount Paid $460.00

Received By JAO Cash/Check No. 23789

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

Form A Updated: 4/15

City State Zip

Location (Attach a sketch of the property showing test hole locations)

NE	NE	25	11	8E	LANCASTER
1/4	1/4	Section	Township	Range	County

Lot # | Subdivision

Soil Type (Check one)

Sand | Silt | Clay | Sandy Clay | Loamy Sand | Silty Clay X

Silty Clay Loam | Sandy Loam | Silt Loam

Dates of Test

Start Date 4/27 End Date 4/28 2023

Weather Conditions

Precipitation NA Avg. Temp (^{0}F) 45

Percolation Test Measurements and Data

Hole No.	Hole Depth (in.)	Pre-saturation Period				Percolation Readings (last period)					Results		
		Start		End		Start			End				
		Date (Mo./ Day)	Time (Hr./ Min)	Date (Mo./ Day)	Time (Hr./ Min)	Date (Mo./ Day)	Time (Hr./ Min)	Water Level (inch)	Time (Hr./ Min)	Water Level Drop (inch)	Elapsed Time (minutes)	Drop in Water Level (inches)	**Percolation Rate** (m ÷ l) (Minutes per inch)
1	30	4/27	1:00	4/28	1:00	4/28	1:00	26	1:30	24.5	30	1.5	20.0
2	30	4/27	1:00	4/28	1:00	4/28	1:00	26	1:30	25	30	1	30.0
3	30	4/27	1:00	4/28	1:00	4/28	1:00	26	1:30	24.8	30	1.2	25.0
4	30	4/27	1:00	4/28	1:00	4/28	1:00	27	1:30	26	30	1	30.0

Certified Professional: Brent Thiessen C2886

Sum Of Percolation Rates	105.0
Avg. of Percolation Rates	26.3



Signature

1035 sq ft installed ✓ NH
(750 Req'd)

