

Septic Tank Permit Application



City of Crete - Building Inspector, Two-Mile Zoning Jurisdiction Limit
243 East 13th Street, Crete, NE 68333
402-826-4312 www.crete.ne.gov

PERMIT #
OFFICE USE ONLY

Applicant/Jobsite Information

Date: _____

Applicant Name (and Business Name if applicable): _____

FEE:
OFFICE USE ONLY

Applicant Phone: _____

Applicant Address: _____

Applicant Email: _____

Jobsite Address (if different from above): _____

Legal Description: _____

System Information

☐ Dwelling ☐ Non-dwelling Previous system registration number (if applicable): _____

☐ New system ☐ Modification of existing system (☐ Tank only ☐ Trench only) ☐ Inspection only

Temporary modification - Describe problem causing discharge and reason for temporary modification: _____

Design Flow _____ gal/day Number of bedrooms _____ Depth to seasonal high groundwater _____ feet
Percolation rate _____ min/inch Loamy sand liner installed: ☐ Yes ☐ No ☐ Garbage grinder ☐ Large capacity tub
Septic tank Manufacturer/Model _____ Number of trenches _____
Trench width _____ inches Total length of all trenches _____ feet Total effective trench bottom area _____ sq ft

Soil Absorption System Description (select one of the following):

- ☐ Gravelless chambers without filter material: inside bottom width of chamber: _____ inches
Make and Model of chambers installed: _____
- ☐ Gravelless chambers with filter material, describe filter material: _____
Make and Model of chambers installed: _____
- ☐ Pipe with filter material, describe filter material: _____
- ☐ Gravelless pipe without filter material, diameter of gravelless pipe: _____ inches
- ☐ Gravelless pipe with filter material, describe filter material: _____
- ☐ Bundled expanded polystyrene synthetic aggregate without filter material, bundle diameter: _____ inches
- ☐ Bundled expanded polystyrene synthetic aggregate with filter material: describe filter material: _____
- ☐ Other, describe: _____

All private on site waste water systems shall comply with Title 124 Rules & Regulations for the design, operation, maintenance, and registration of the Nebraska Department of Environmental Quality and all Crete Municipal Codes.

Name of certified professional registering new system

Applicant Signature

Date

Certified Professional Signature

Plumbing Inspector Signature

Date

Professional Certification Number

Public Works Director Signature

Date

Date of inspection or completion of work

Mayor Signature

Date