Well and Septic Evaluation General Information and Outline

The Nebraska Well and Septic Loan Evaluation program requires both the well and wastewater system to be evaluated. The information is required for all systems on the premises. The fee is the same each time an evaluation is requested. The Department always evaluates both the water supply and the onsite wastewater system, even if only one is requested.

Follow this link to print a current application:
http://dhhs.ne.gov/publichealth/Pages/wnh_wellandseptic.aspx

Below you will find an overview of the checklist of items/information that are required.

1. Documentation verifying the capacity and construction material of the septic tank must be submitted in all cases. All septic tanks not pumped within the last 3 years must be pumped and a receipt provided that indicates the construction material and the number of gallons. Tip: Ask the pumping company the questions on the application that pertain to the septic system.

2. A complete application. All areas with asterisks (**) are considered mandatory and must be filled in, including a detailed map.

3. $100 payment by check or money order must be submitted with the application.

4. A representative familiar with the property’s water supply and wastewater system must be onsite during the evaluation.

5. Water samples will be collected from inside the home, i.e., kitchen tap and/or bathroom sink. Samples will be collected from the R.O. unit if one is installed. Water must run for 15-30 minutes prior to sampling.

6. Registration numbers must be provided for all wells and wastewater systems on the property. See the links below to search for registration information. If they are not registered you may write NA.

7. Please include the name, number and email address of the person to contact to set up the evaluation.

8. Contact information must be provided for all parties requesting a copy of the evaluation.

9. Applications submitted without $100 payment or that are missing mandatory information will not be processed and will be returned to the sender.

From the time a complete application is received it takes approximately 3 weeks.

Time may vary due to: laboratory results, lack of information, consultation with DEQ regarding wastewater system, consultation with DNR and the Water Well Standards Program regarding the water supply.

Please submit the application with $100 payment and all mandatory information to the address found on the last page of the application.

Nebraska’s Well and Septic Loan Evaluation Program - link to the most current application - http://dhhs.ne.gov/publichealth/Pages/wnh_wellandseptic.aspx

Department of Environmental Quality (DEQ) – Wastewater systems
http://deq-iis.ne.gov/zs/owt/main_reg.php
ndeq.moreinfo@nebraska.gov (402) 471-4285

Department of Natural Resources (DNR) – Well registration
http://nednr.nebraska.gov/dynamic/wells/Menu.aspx (402) 471-2363

Water Well Standards Program
http://dhhs.ne.gov/waterwellstandards (402) 471-4982
APPLICATION FOR EVALUATION OF INDIVIDUAL WATER SUPPLY AND SEWAGE TREATMENT SYSTEM

Not for use in the following counties: Douglas, Hall, Hamilton, Lancaster, Merrick

DIRECTIONS: Information must be provided as complete as possible before an onsite evaluation will be conducted. Failure to supply the mandatory information will cause the application and fee to be returned. If some information is unknown, indicate UNK; if not applicable, indicate N/A. If you have any questions concerning completion of the application, please contact the appropriate office based on your county (see page 5). ** Denotes Mandatory Information.

<table>
<thead>
<tr>
<th>** Type of Loan:**</th>
<th>CONV</th>
<th>FHA</th>
<th>VA</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>** Buyer’s Home Phone:**</td>
<td></td>
<td>** Buyer’s Work Phone:**</td>
<td></td>
<td></td>
</tr>
<tr>
<td>** Buyer’s Name:**</td>
<td>Last:</td>
<td>First:</td>
<td>Middle/MI:</td>
<td></td>
</tr>
<tr>
<td>** Buyer’s Current Address:**</td>
<td>Street/PO/Route:</td>
<td>County:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City:</td>
<td>State:</td>
<td>ZIP:</td>
<td></td>
</tr>
<tr>
<td>** Address of Property to be Inspected:**</td>
<td>Street/PO/Route:</td>
<td>County:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>City:</td>
<td>State:</td>
<td>ZIP:</td>
<td></td>
</tr>
<tr>
<td>Legal Description:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>** Directions to Property:**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| ** Results of Evaluation should be sent to** (include email address or address of individuals needing copy of the report):


LENDING INSTITUTION INFORMATION

| ** Name: |
| ** Address: |
| ** Officer: |
| ** Telephone Number: |
| ** Fax Number: |
| ** Email Address: |

Contact Information to Arrange an Appointment for the Evaluation:

| ** Name: |
| ** Telephone Number: |
| ** Email Address: |

** Seller’s Name:

** denotes Mandatory Information
PART A: WATER SUPPLY

** ☐ Private or ** ☐ Public Name of System (List city/rural water district): ____________________________
(If public, go to Part B):

** Year Well Constructed: _______ ☐ N/A ☐ UNK

Department of Natural Resources well registration number G-____________
Provide well registration number and/or a copy of the well registration form if well was installed after 1993. To locate well registration number, go to nednr.nebraska.gov/dynamic/wells/Menu.aspx or call 402-471-2363.

<table>
<thead>
<tr>
<th>Well Site: Distance of Well From:</th>
<th>Closest frost proof hydrant: _______ feet</th>
<th>Well pit: _______ feet</th>
<th>Seepage pit: _______ feet</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cesspool: _______ feet</td>
<td>Sewer line: _______ feet</td>
<td>Feed lot: _______ feet</td>
</tr>
<tr>
<td></td>
<td>Septic tank: _______ feet</td>
<td>Lagoon: _______ feet</td>
<td>Drain field: _______ feet</td>
</tr>
</tbody>
</table>

Are there other wells located on the property (in use or not being used)? ☐ Yes ☐ No

Complete a Change of Ownership for the well if the property is being sold. Contact the Nebraska Department of Natural Resources at 402-471-2363 or dnr.nebraska.gov/sites/dnr.nebraska.gov/files/doc/ground-water/contractors/CHG-OWN2008.pdf.

<table>
<thead>
<tr>
<th>Well Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Well: ☐ Driven ☐ Dug ☐ Bored ☐ Drilled</td>
</tr>
<tr>
<td>Well casing diameter: _______ inches</td>
</tr>
<tr>
<td>Total well depth: _______ feet</td>
</tr>
<tr>
<td>Static water level: _______ feet</td>
</tr>
<tr>
<td>Type of Casing: ☐ Steel ☐ Plastic ☐ Concrete ☐ Other</td>
</tr>
<tr>
<td>Exterior space around casing sealed with: ☐ Cement ☐ Puddled clay ☐ Bentonite</td>
</tr>
<tr>
<td>☐ Gravel ☐ Ordinary backfill</td>
</tr>
<tr>
<td>Is well in a well pit? ☐ Yes ☐ No</td>
</tr>
<tr>
<td>Is well equipped with a sanitary well seal? ☐ Yes ☐ No</td>
</tr>
<tr>
<td>Is well equipped with a pitless adaptor or pitless unit? ☐ Yes ☐ No</td>
</tr>
<tr>
<td>Does well have a recent history of repair or insufficient supply? ☐ Yes ☐ No</td>
</tr>
<tr>
<td>List water quality sample results from previous years, if any. Bacteria: _______ Date: _______ Nitrate: _______ Date: _______</td>
</tr>
<tr>
<td>Other: _______ Date: _______</td>
</tr>
</tbody>
</table>

Go to deg-iis.ne.gov/zs/owt/index.html for information on Wastewater Treatment Systems constructed after January 1, 2004. Contact number for the Nebraska Department of Environmental Quality is 402-471-4285.

PART B: WASTEWATER INFORMATION

** ☐ Private or ** ☐ Public Name of System (List city/rural water district): ____________________________
(If public, go to Part C):

** Year Constructed: ** ☐ Tank ☐ Lagoon ☐ Soil Absorption System ☐ 1/1/2004:
☐ N/A ☐ UNK ☐ N/A ☐ UNK ☐ N/A ☐ UNK

** Modified after 1/1/2004: ** ☐ Tank ☐ Lagoon ☐ Soil Absorption System ☐ ☐ N/A ☐ UNK ☐ ☐ N/A ☐ UNK ☐ ☐ N/A ☐ UNK

** Registration/Permit Number (after 1/1/2004): __________  ** Installer’s Name: ☐ Yes ☐ No

Are septic systems customary in the neighborhood? ☐ Yes ☐ No

** Is all household wastewater and waste routed through the septic/lagoon system? ☐ Yes ☐ No

If no, explain:

** Is there any surface discharge or surface seepage of household wastewater? ☐ Yes ☐ No

** denotes Mandatory Information
** Are there any water supply wells within 100 feet of the septic absorption drain field or lagoon?  

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

** Primary treatment consists of:**

- [ ] Septic tank
- [ ] Cesspool
- [ ] Lagoon
- [ ] Other

** Sewage System Information **

<table>
<thead>
<tr>
<th>Distance of sewage system from:</th>
<th>Building foundation</th>
<th>feet</th>
<th>Ground water table</th>
<th>feet</th>
</tr>
</thead>
</table>

** Construction material of sewage system:**

- [ ] Concrete
- [ ] Fiberglass
- [ ] Steel
- [ ] Plastic
- [ ] Other, explain:

** Total liquid capacity _____ gallons **

(Effective October 1, 1999, the applicant must submit documentation verifying the capacity and construction material of the septic tank in all cases. All tanks with an unknown capacity and/or construction material must have the tank pumped. A septic pumping receipt from a licensed septic tank contractor including the number of gallons pumped and the construction material is required.)

<table>
<thead>
<tr>
<th>Date septic tank last pumped:</th>
<th>Name of licensed septic tank pumper:</th>
</tr>
</thead>
</table>

** Onsite wastewater lagoon:**   

- [ ] Yes
- [ ] No

---

** Soil Absorption Information **

<table>
<thead>
<tr>
<th>Year System Constructed:</th>
<th>Modified after 1/1/2004?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Drain field consists of:</th>
<th>[ ] Graveless</th>
<th>[ ] Sock diameter _____ inches</th>
<th>[ ] Chamber dimensions _____ inches</th>
</tr>
</thead>
</table>
| Perforated pipe diameter  | [ ] Leach pit | Half round or half moon | Mound
| inches                   |                |                               |                                  |

<table>
<thead>
<tr>
<th>Is there a distribution box?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

Total length of disposal field lines: _____ feet

<table>
<thead>
<tr>
<th>Number of trench lines:</th>
<th>Length of each line: _____ feet</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Trench width:</th>
<th>Trench depth:</th>
</tr>
</thead>
<tbody>
<tr>
<td>feet</td>
<td>feet</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Material used in trench:</th>
<th>Gravel</th>
<th>Other, explain:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Depth of material below pipe in trench:</th>
<th>Is system located in non-traffic area?</th>
</tr>
</thead>
<tbody>
<tr>
<td>feet</td>
<td>Yes</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Have there been any problems with the system?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

** PART C: HOUSE INFORMATION **

** Number of bedrooms in house:**   

- [ ] bedrooms

** Is house presently occupied?**

- [ ] Yes
- [ ] No

** If no, how long has house been vacant?**   

- [ ]

** Does home have:**

- [ ] Garbage disposal
- [ ] Heat pump discharge
- [ ] Large capacity tub (> 50 gallons)
- [ ] Water treatment or reverse osmosis

** Soil absorption rate:**   

- [ ] Determination by percolation tests
- [ ] Soil Conservation Service
- [ ] Other, explain:

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** denotes Mandatory Information
** Figure 1. Overall illustration of home site. This sketch must be completed prior to review by the Department. Application will be returned without a detailed map with locations of both well and wastewater systems.

Show the distances between existing or proposed home, well and sewage disposal system and neighboring property line. Give lengths and directions of tile fields. Include all possible sources of contamination of well within 100 feet radius, such as barnyards, sewage disposal systems, abandoned wells or existing wells in use, or heat pump injection wells, etc. Give direction of slope of land.

**Please include the following information in the drawing below.**

1. Draw and locate distances between all buildings on the property.
2. Note any future improvements to the property.
3. Note lot dimensions.
4. Indicate the location of any private sewage treatment system.
5. Note setback distances to property lines, private water wells, water suction and pressure lines, surface waters, neighbors property lines and public water supplies.
6. Future septic lateral area (if applicable).

![Site Evaluation Map](image)

I hereby request the Nebraska Department of Health and Human Services Division of Public Health to perform an onsite evaluation of the water supply and sewage treatment systems on the property referenced on page 1. To the best of my knowledge, the information on this application is correct.

** ___________________________  **
Date  Signature of Person Preparing this Application

**REMINDER:** Please return the application form, $100 evaluation fee, septic pumping receipt, the registration information, and any other pertinent information to the appropriate address on the last page of the application. An onsite evaluation will be completed 2 to 3 weeks after receipt of a properly completed form.

** denotes Mandatory Information
Please return the application, the $100 evaluation fee and the septic pumping receipt to an address below.

Khalisha Casey
DHHS Well & Septic Evaluation
PO Box 95026
Lincoln, NE 68509-5026
Cell: 402-937-2266 | Email: khalisha.casey@nebraska.gov
(Butler, Clay, Fillmore, Gage, Jefferson, Nuckolls, Polk, Saline, Seward, Thayer, York)

Mandy Kearney
DHHS Well & Septic Evaluation
PO Box 95026
Lincoln, NE 68509-5026
Cell: 402-416-4945 | Email: mandy.earney@nebraska.gov
(Cass, Johnson, Nemaha, Otoe, Pawnee, Platte, Richardson, Sarpy)

Colton Wolinski
DHHS Well & Septic Evaluation
PO Box 95026
Lincoln, NE 68509-5026
Cell: 402-219-2601 | Email: colton.wolinski@nebraska.gov
(Burt, Colfax, Dodge, Platte, Saunders, Washington)

Jared Mackrill
DHHS Well & Septic Evaluation
250114 Skyport Drive
Scottsbluff, NE 69361-6901
Phone: 308-436-6948 | Cell: 308-631-2475 | Email: jared.mackrill@nebraska.gov
(Arthur, Banner, Box Butte, Chase, Cheyenne, Dawes, Deuel, Garden, Grant, Keith, Kimball, Morrill, Perkins, Scotts Bluff, Sheridan, Sioux)

Tim Burnham
DHHS Well & Septic Evaluation
208 N. Pine Street
Grand Island, NE 68801
Cell: 308-390-0336 | Email: tim.burnham@nebraska.gov
(Adams, Buffalo, Franklin, Garfield, Greeley, Howard, Kearney, Nance, Phelps, Sherman, Valley, Webster, Wheeler)

Ericka Sanders
DHHS Well & Septic Evaluation
209 N. 5th Street
Norfolk, NE 68701-4091
Cell: 402-649-5263 | Email: ericka.sanders@nebraska.gov
(Antelope, Boone, Boyd, Cedar, Cuming, Dakota, Dixon, Holt, Knox, Madison, Pierce, Stanton, Thurston, Wayne)

Sara Rudloff
DHHS Well & Septic Evaluation
209 N. 5th Street
Norfolk, NE 68701-4091
Phone: 308-530-3329 | Email: sara.rudloff@nebraska.gov
(Blaine, Brown, Cherry, Custer, Dawso, Dundy, Frontier, Furnas, Gosper, Harlan, Hayes, Hitchcock, Hooker, Keya Paha, Lincoln, Logan, Lous, McPherson, Red Willow, Rock, Thomas)