



## 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://deq.ne.gov/NDEQProg.nsf/OnWeb/WSLE>

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://deq.ne.gov/NDEQProg.nsf/OnWeb/WSLE>

Department of Environmental Quality (DEQ) –  
Wastewater Systems  
[http://deq-iis.ne.gov/zs/owt/main\\_reg.php](http://deq-iis.ne.gov/zs/owt/main_reg.php)  
Email: [ndeq.moreinfo@nebraska.gov](mailto: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://deq.ne.gov/NDEQProg.nsf/OnWeb/WWS>  
(402) 471-4982

*Please Print Legibly*

**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.**

<b>** Buyer's Home Phone:</b>		<b>** Buyer's Work Phone:</b>	
<b>** Buyer's Email:</b>			
<b>** Buyer's Name:</b>	Last:	First:	Middle/MI:
<b>** Buyer's Current Address:</b>	Street/PO/Route:		County:
	City:	State:	ZIP:
<b>** Address of Property to be Inspected:</b>	Street/PO/Route:		County:
	City:	State:	ZIP:
Legal Description:			
<b>** Directions to Property:</b>			
<b>** Results of Evaluation should be sent to</b> (include email address or address of individuals needing copy of the report):			
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<b>LENDING INSTITUTION INFORMATION</b>			
<b>** Name:</b>			
<b>** Address:</b>			
<b>** Officer:</b>			
<b>** Telephone Number:</b>			
<b>** Fax Number:</b>			
<b>** Email Address:</b>			
<b>Contact Information to Arrange an Appointment for the Evaluation:</b>	<b>** Name:</b>		
	<b>** Telephone Number:</b>		
	<b>** Email Address:</b>		
<b>** Seller's Name:</b>			

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 <a href="http://nednr.nebraska.gov/dynamic/wells/Menu.aspx">nednr.nebraska.gov/dynamic/wells/Menu.aspx</a> or call 402-471-2363.			
Well Site: Distance of Well From:	Closest frost proof hydrant: _____ feet	Well pit: _____ feet	Seepage pit: _____ feet
	Cesspool: _____ feet	Sewer line: _____ feet	Feed lot: _____ feet
	Septic tank: _____ feet	Lagoon: _____ feet	Drain field: _____ feet
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](http://dnr.nebraska.gov/sites/dnr.nebraska.gov/files/doc/ground-water/contractors/CHG-OWN2008.pdf).

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

Go to [deg-iis.ne.gov/zs/owt/index.html](http://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 _____ N/A UNK	Lagoon _____ N/A UNK	Soil Absorption System _____ N/A UNK	
** Modified after 1/1/2004:	Tank Yes No N/A UNK	Soil Absorption System Yes No N/A UNK	Lagoon Yes No N/A UNK	
** Registration/Permit Number (after 1/1/2004): _____		** Installer's Name:		
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?				Yes	No
Primary treatment consists of:	Septic tank	Cesspool	Lagoon	Other	
<b>Sewage System Information</b>					
Distance of sewage system from:	Building foundation _____ feet	Ground water table _____ feet	Well _____ feet		
<b>** Construction material of sewage system:</b>	Concrete	Fiberglass	Steel		
	Plastic	Other, explain:			
<b>** Total liquid capacity _____ gallons</b> (The applicant must submit documentation verifying the capacity and construction material of the septic tank in <u>all cases</u> . All tanks must be pumped within the last 3 years. A septic pumping receipt from a licensed septic tank contractor including the number of gallons pumped and the construction material is required.)					
Date septic tank last pumped:				Name of licensed septic tank pumper:	
Onsite wastewater lagoon: _____ feet				Lagoon fence	Yes No

<b>Soil Absorption Information</b>						
<b>Year System Constructed:</b> _____			<b>Modified after 1/1/2004?</b> Yes No			
Drain field consists of:	Graveless		Sock diameter _____ inches		Chamber dimensions _____ inches	
	Perforated pipe diameter _____ inches		Half round or half moon		Mound	
	Leach pit		Other, explain:			
Is there a distribution box? Yes No			Total length of disposal field lines: _____ feet			
Number of trench lines: _____			Length of each line: _____ feet			
Trench width: _____ feet			Trench depth: _____ feet			
Material used in trench:		Gravel	Other, explain:			
Depth of material below pipe in trench: _____ feet		Is system located in non-traffic area? Yes No				
Have there been any problems with the system? Yes No If yes, explain:						

<b>PART C: HOUSE INFORMATION</b>					
<b>** Number of bedrooms in house:</b>					_____ bedrooms
<b>** Is house presently occupied?</b>					Yes No
<b>** If no, how long has house been vacant?</b>					_____
<b>Does home have:</b>	<b>** Garbage disposal</b>			<b>** Large capacity tub (&gt; 50 gallons)</b>	
	Heat pump discharge			Water treatment or reverse osmosis	
Soil absorption rate:		One (1) inch in _____ minutes			
Source:	Determination by percolation tests		Soil Conservation Service		Other, explain:

**\*\* 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.**

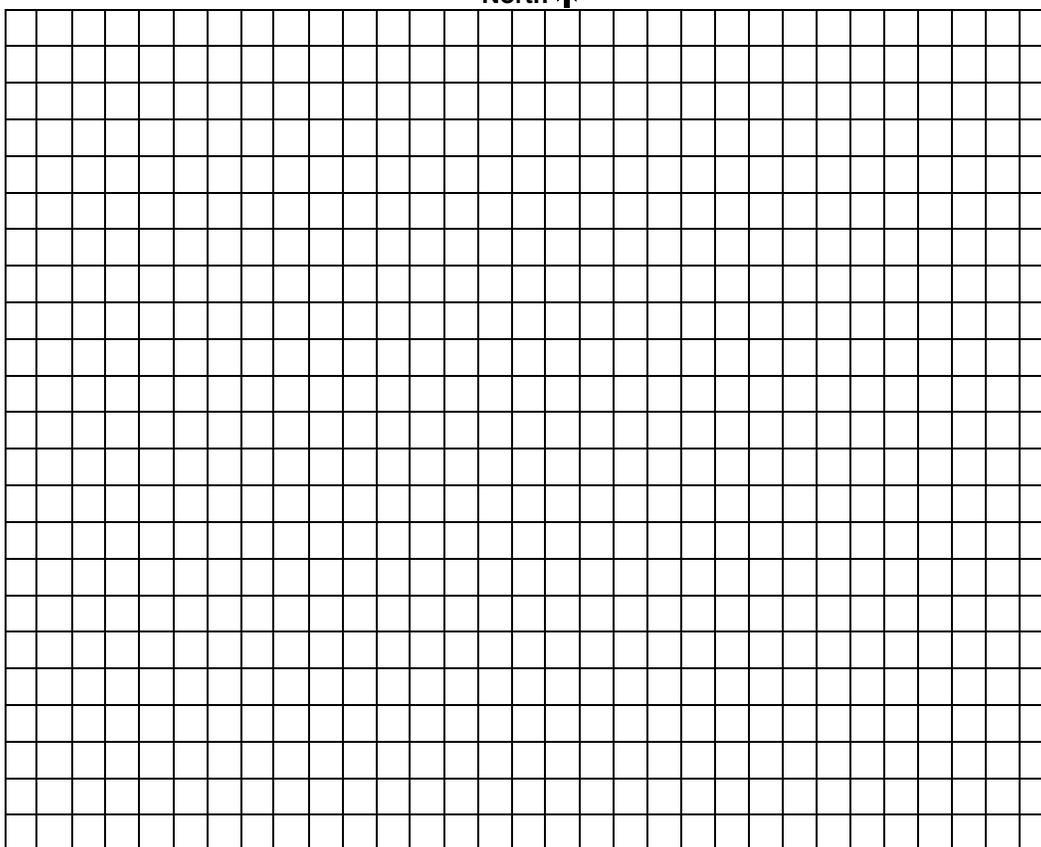
Show the distances between existing or proposed home, well and sewage disposal system and neighboring property line. Give lengths and directions of tile fields. Include all possible sources of contamination of well within 100 feet radius, such as barnyards, sewage disposal systems, abandoned wells or 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**

North ↑



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 the address below.**

DHHS Well & Septic Evaluation

Attn: Connie Hughes

209 N. 5<sup>th</sup> Street

Norfolk, NE 68701-4091

Khalisha Casey

Cell: 402-937-2266 | Email: [khalisha.casey@nebraska.gov](mailto:khalisha.casey@nebraska.gov)

(Butler, Clay, Fillmore, Gage, Jefferson, Nuckolls, Polk, Saline, Seward, Thayer, York)

Mandy Kearney

Cell: 402-416-4945 | Email: [mandy.kearney@nebraska.gov](mailto:mandy.kearney@nebraska.gov)

(Cass, Johnson, Nemaha, Otoe, Pawnee, Platte, Richardson, Sarpy)

Colton Wolinski

Cell: 402-219-2601 | Email: [colton.wolinski@nebraska.gov](mailto:colton.wolinski@nebraska.gov)

(Burt, Colfax, Dodge, Platte, Saunders, Washington)

Jared Mackrill

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(Arthur, Banner, Box Butte, Chase, Cheyenne, Dawes, Deuel, Garden, Grant, Keith, Kimball, Morrill, Perkins, Scotts Bluff, Sheridan, Sioux)

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(Adams, Buffalo, Franklin, Garfield, Greeley, Howard, Kearney, Nance, Phelps, Sherman, Valley, Webster, Wheeler)

Ericka Sanders

Cell: 402-649-5263 | Email: [ericka.sanders@nebraska.gov](mailto:ericka.sanders@nebraska.gov)

(Antelope, Boone, Boyd, Cedar, Cuming, Dakota, Dixon, Holt, Knox, Madison, Pierce, Stanton, Thurston, Wayne)

Sara Rudloff

Phone: 308-530-3329 | Email: [sara.rudloff@nebraska.gov](mailto:sara.rudloff@nebraska.gov)

(Blaine, Brown, Cherry, Custer, Dawson, Dundy, Frontier, Furnas, Gosper, Harlan, Hayes, Hitchcock, Hooker, Keya Paha, Lincoln, Logan, Loup, McPherson, Red Willow, Rock, Thomas)