ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

LINCOLN-LANCASTER COUNTY HE

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER / LOAN APPROVAL

This form must be completed and returned to request a real estate transfer inspection.

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 3-15-91

☒ Evaluation of the Sewage Disposal System ☒ Enclosed is $150.00

Legal Description of Property: South 10A TWP. 7N; RANGE 6E; SECTION 20; BLOCK ___

LOT 5; ADDITION _____; Street Address 3700 West Pella Rd.

Directions to Property 1/4 mile East of Hallam plant on North side of road - Key to house under brick on deck

Location of Well NW of house Tap Location: Inside ☒ Outside ☒

Location of Sewage System north of house Year Installed 1966

	NAME	ADDRESS	PHONE
Present Owner:	Charles & Rhonda Skillett	Kramer, NE	826-5599
Tenant/Buyer:	Harlan Hettenbaugh	6501 Saltillo Rd.	421-2971
Return to:	Gene Else Real Estate	Ceresco, NE 68325	589-5405

NOTE: Allow two weeks for processing. Incomplete information will delay processing.

Signature of Applicant Gene Else Address Ceresco, NE 68325

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HEALTH DEPARTMENT USE ONLY

Date Received 3-15-91 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 3/18/91

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☐	☒	Approved: ☐	Date 3/18/91 by JCH
Bacteria	☒	☐	Provisional: ☒	Date 3/28/91 by JCH
Nitrate	☒	☐	Disapproved: ☐	Date _____ by ___

Comments: HYDRANT TOO CLOSE TO WELL. SEPTIC TANK SHOULD BE FOUND AND CHECKED TO SEE IF IT NEEDS PUMPING ← Imperative this be done. See Attached Letter ☐

~~APPROVAL PROVISIONAL ON SEPTIC SYSTEM BECAUSE NO ONE~~ KNOWS EXACTLY WHERE SEPTIC IS AND WHAT IS INSTALLED. COULD FIND NO EVIDENCE OF MALFUNCTION.

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM:	
Approved: ☒	Approved: ☐	Provisional Approval: ☒

APPROVED BY Jerrold C. Hood R.S. DATE MARCH 29, 1991

Approval or disapproval is based on written standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

1120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

APR 19 2011

D S20, T7, R6 Lot 14 & 15

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 4-14-11

System Location (Indicate correct number and street)

Address 3700 W Bell2 Rd (no rural route) City Hallam, NE, Zip 68368

A. Building Sewer

1. Material: PVC
   Diameter: 4 in.
2. Distance above basement floor: — in.
   or distance below basement floor: 18 in.
3. Distance between dwelling and septic tank: NA ft.
4. Number of clean-outs: 4
5. Distances to: well or suction line > 100 ft.
   stream > 50 ft.
   pressure line > 25 ft.
   property line > 20 ft.

B. Septic Tank

1. Material: NA
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: NA
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

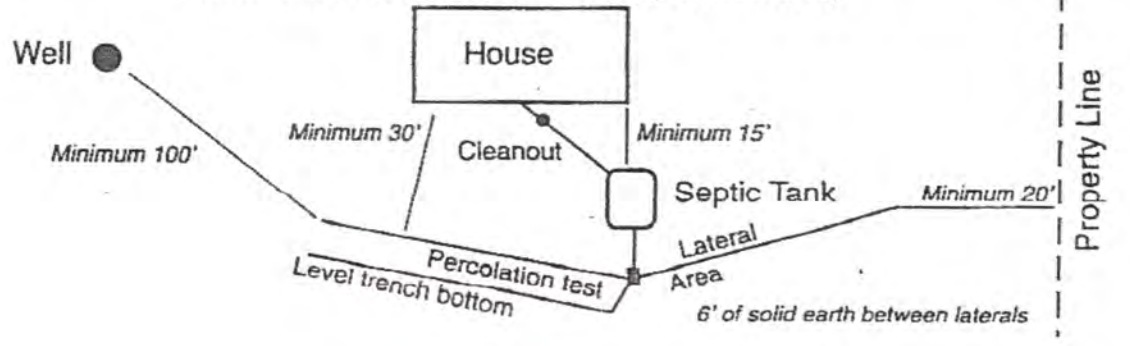
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: NA
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Indicate North with Arrow

Complete "As Built" drawing on back of this form.

Individual Sewage System Design (Example)



OLOGICAL EXAMINATION OF DRINKING WATER

PLE TO BE COLLECTED AND MAILED ON:

L ____ (2-3) WK. ____ (4) DAY ____ (5) SAMP/DAY ____ (6)

COUNT NO. ____ (16-22) ADD. TESTS 2 (23) 1. FL 2. N 3. BOTH 4. TPC

TE COLL 3/18/91 2:45PM (9-16) BY J.C. Hood (17-28)

DDRESS OR LOCATION SEC. 20, T 7N, R6E (29-41)
-OT 5 F.T. CHARLES SKILLET

AME AND ADDRESS OF OWNER

HYDRANT TOO CLOSE

2-ONLY

FOR LABORATORY USE ONLY

SPECIAL REQUEST: ____ (42)
0. NONE 1. CHECK 2. REPLACEMENT

SAMPLE CONDITION: ____ (43)
1. GOOD 2. DAMAGED 3. INSUFFICIENT 4. OLD 5. RETURNED UNUSED

LABORATORY NO. ____ (44-47)

DATE EXAMINED ____ (48-53)

COLIFORM ____ (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE <0.1 (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE ____ (69-75)

ANALIZED BY ____ (76-79)

IN

OUT

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

WATER CHEMISTRY

STATE LAB NO. 15 2006

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE – N less than 0.1 mg/l

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT ☐ IMPROPER

TEST(S) BY

FOR ACCOUNTING USE ONLY

COMPLETE INFORMATION BELOW

COLLECTED 3 (MO.) 18 (DAY) 91 (YEAR) 2:45 p.m. (HOUR)

LE COLLECTED BY JERROLD HOOD

MPLE LOCATION CHARLES SKILLET

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SW SECT 20 TWNSHP 7 N RANGE 6 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

RECEIVED '91 MAR 18 P3:45

PORTED '91 MAR 15 P1:0

BIOLOGICAL EXAMINATION OF DRINKING WATER

HYDRANT REMOVED

FOR LABORATORY USE ONLY

SAMPLE TO BE COLLECTED AND MAILED ON:

MO. ____ (2-3) WK. ____ (4) DAY ____ (5) SAMP/DAY ____ (6-7)

ACCOUNT NO. ____ (16-22) ADD TESTS ____ (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL. 3/28/91 12:20 PM (9-16) BY L. C. Hood (17-28)

ADDRESS OR LOCATION SEC. 20, T7N, R6E (29-41)
LOT 5 I.T. CHARLES SKILLET

NAME AND ADDRESS OF OWNER
LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

SPECIAL REQUEST: ____ (42)
0. NONE 1. CHECK 2. REPLACEMENT

SAMPLE CONDITION: ____ (43)
1. GOOD 2. DAMAGED 3. INSUFFICIENT 4. OLD 5. RETURNED UNUSED

LABORATORY NO. 6288 (44-47)

DATE EXAMINED ____ (48-53)

COLIFORM 0 (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE ____ (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE MF (69-75)

ANALIZED BY [signature] (76-79)

IN '91 MAR 28 P1:20

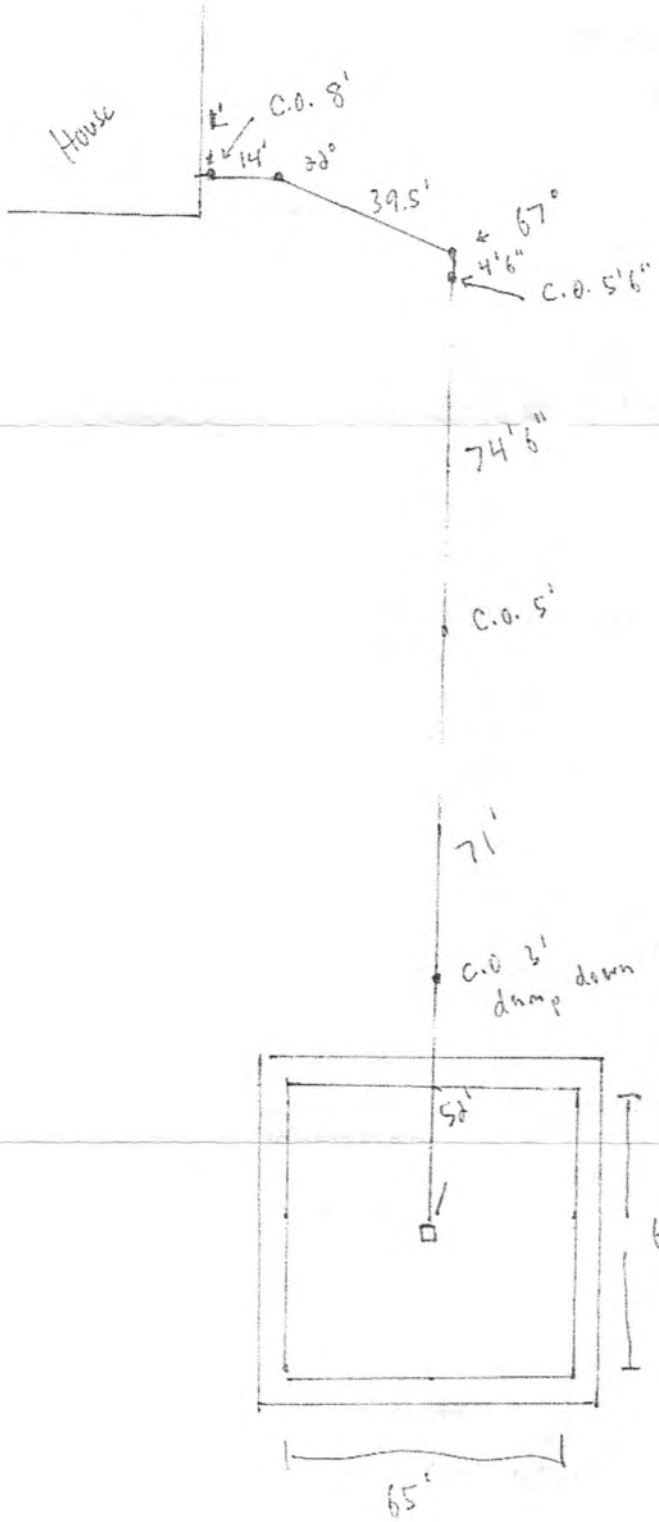
OUT '91 MAR 28 P1:20

Todd Stertz Lagoon
3700 W Pella Rd
Hallam, Ne

N →

Well

⟷ = 10'



All setbacks met.