LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 950-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

May 1, 1977 — THIS PERMIT EXPIRES

Bruce Burgess — ISSUED TO

Rural Route 8, Lincoln, NE 68506 — ADDRESS

T7n: R7E; Section 10 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$30.00	$	$	$30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

FORM HD-40(73) REQUEST FOR SITE CLEARANCE FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 950-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: 10-25-1976

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

9.9ac in E 1/2

1. Legal description of property: Twp. 7N ; Range 7E ; Section 10
Block ____; Lot ____; Addition ____
Street Address 22,701 South 82nd St. SEE ATTACHED

2. Property Use: Residential ____ ☑ ; Commercial ____ ☐
No. of Bedrooms 3. Describe: ____
Other Use ____ ☐
Describe: ____

3. Type of Individual Sewage Disposal System: Septic Tank ☑ ; Other ☐

4. Distance to public sewer: ____ ft.

Bruce D. Burgess
by J. M. Pittner
Signature of Applicant (Owner or Lessee)

RR#8 Lincoln NE 68506
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/28/76. Date Frwd. 11/1/76. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. ____. Date Frwd. ____. ACTION: Approved ☐ Disapproved ☐ Signature: ____

3. City or County Engineer: Date Rec'd. 11/1/76. Date Frwd. 11/1/76. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff
Read Mots 11/1/76

REMARKS OR REASONS FOR DISAPPROVAL ____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. 950-C

DATE: 10-27-76

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

1. Legal description of property: Twp. 7N ; Range 7EAT ; Section 10 ; Block ; Lot ; Addition .
Street Address 22,701 So 82nd ST. SEE ATTACHED

2. Property Use: Residential ✓ ☐ ; Commercial ☐
No. of Bedrooms 3
Describe:
Other Use ☐
Describe:

3. Type of Individual Sewage Disposal System: Septic Tank ✓ ; Other ☐

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Bruce Burgess
by [illegible]
Signature of Applicant (owner or lessee)

RR#8 Lincoln 68506
Address

(Do not write below double line)

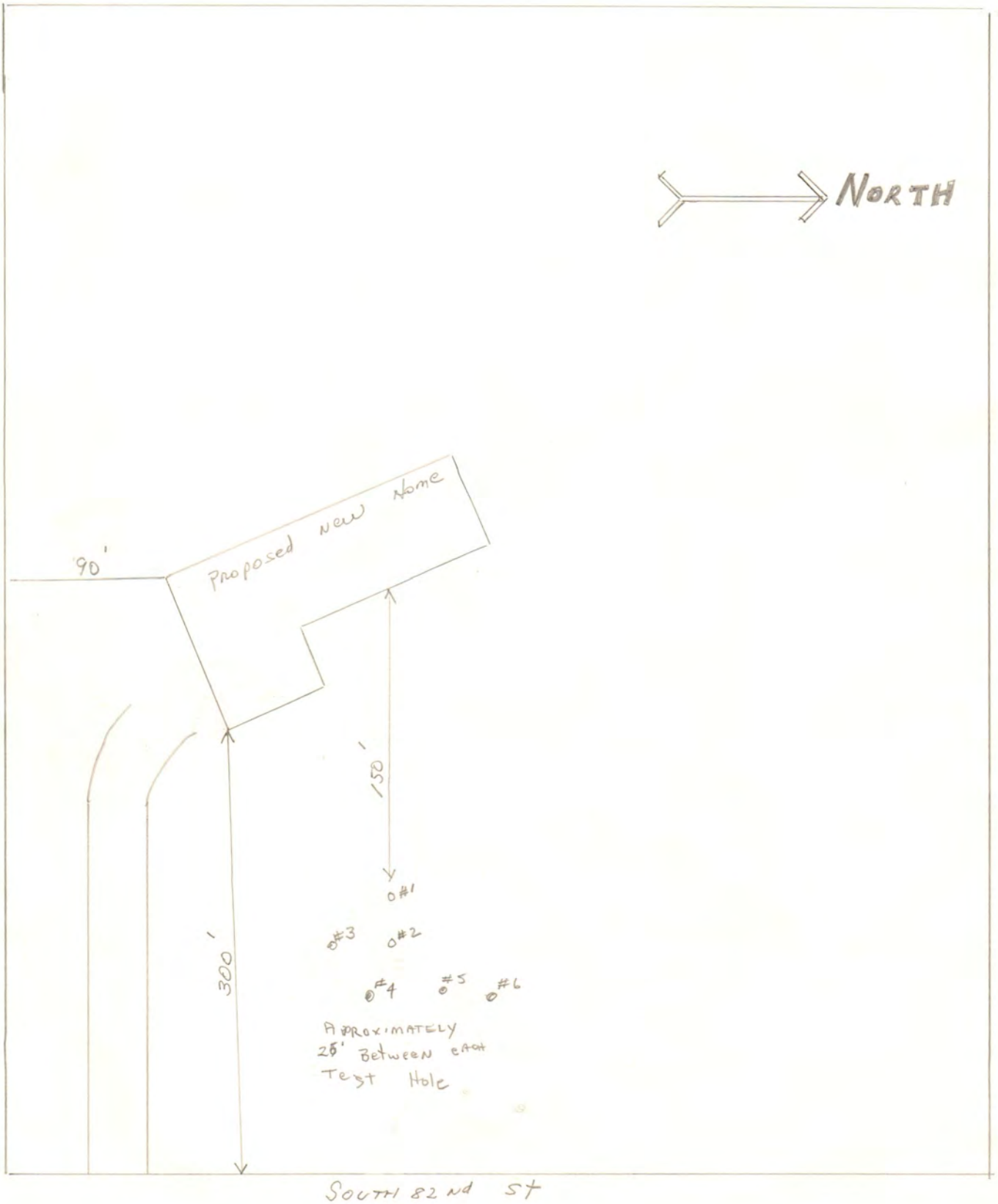
REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 3-25-77 by: [illegible]
Date: by:
Date: by:

3. Date: Approved ☒ ; Disapproved ☐ 11/1/76
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 3-25-77 by: James Weverka


NORTH
Proposed New Home
90'
150'
300'
#1
#3
#2
#4
#5
#6
Approximately 25' Between each Test Hole
South 82nd St

A tract of land located in the SE corner of the S½, of the NE¼, and the NE corner of the N½, of the SE¼ of Sec. 10, Township 7 N, Range 7 East of the 6th P.M., Lancaster County, is described as follows: Beginning at the E¼ corner of said Sec. 10, thence Southerly on the East line of the SE¼, a distance of 212.0 feet, thence Westerly 90° right, a distance of 540.0 feet, thence Northerly 90° right, a distance of 799.0 feet, thence Easterly 90° right, a distance of 540.0 feet to the East line of the NE¼, thence Southerly on said East line, a distance of 587.0 feet to the point of beginning.
Containing 9.9 acres more or less of which 0.61 acres more or less constitutes a public road.

FORM HD- 43(73) SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone 475-6221)

22701 S 82nd

FILE NO. 950-C

PROPERTY WHERE SOIL TESTED:
Location: Township 7N ; Range 7 EAST
Section & ¼ Sect. Sec# 10.
Property Dimensions: 540 ft. x 799 ft.
Area: 9.9 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay [X]; Silty Clay Loam [ ]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Owner: Bruce L. Burgess
Address RR#8 Lincoln, Ne. 68506
Near Rene Homes

Dates of Tests: 10-21 to 10-22. Weather: Precip. 0 Temp. 45

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings					Results		
		Start		End		Start			End				
Hole No.	Hole Depth (in.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Date (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	26	10/21	3:00	10/21	320	10/22	3:10	6	3:38	0	28	6	
2	30	10/21	3:05	10/21	330	10/22	3:15	6	3:42	1 3/4	27	3 1/4	
3	28	10/21	3:10	10/21	340	10/22	3:20	6	3:47	0	27	6	
4	24	10/21	3:20	10/21	350	10/22	3:25	6	3:55	1 3/4	30	4 1/4	
5	26	10/21	3:25	10/21	355	10/22	3:30	6	4:05	2 1/2	35	3 1/2	
6	30	10/21	3:30	10/21	400	10/22	3:35	6	4:10	2 1/4	35	2 3/4	

Sum of Percolation Rates
Average of Rates:
Mean of Rates:

Signature of Person Conducting Test

Address 4700 Kingswood Drive, Lincoln NE
Phone: 488-3814

(Do not write below this line)

REVIEWING ACTION

REMARKS:

Approved Percolation Rate(s)
A. 7 min./inch
B. _____ min./inch
C. _____ min./inch

DATE:

Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM
(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

22701 S 82nd

FILE NO. _____

SPECIFICATIONS

DATE: 3-25-77

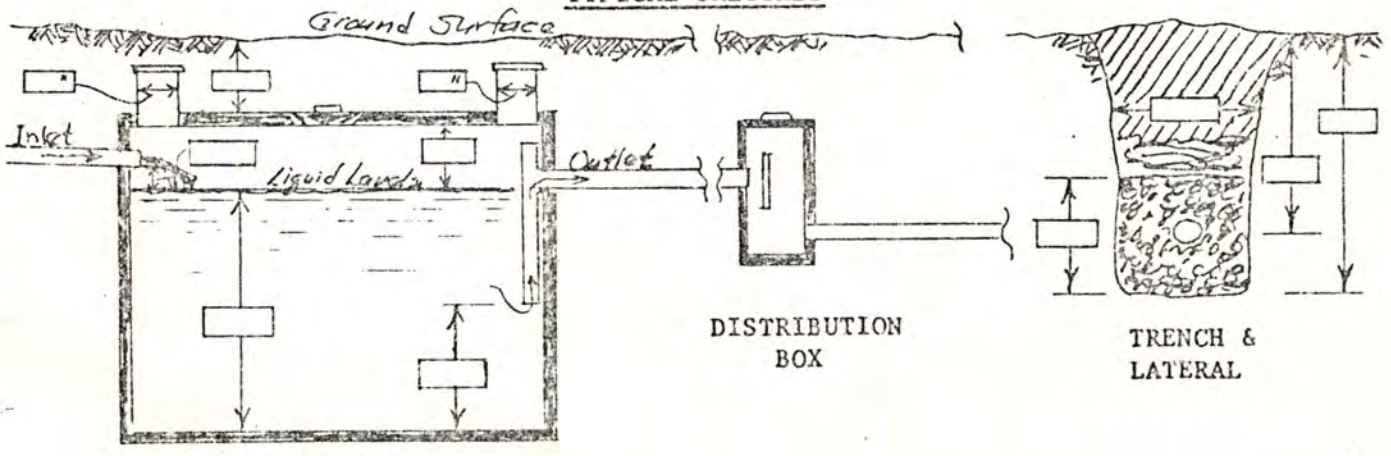
A. BUILDING SEWER:
1. Material plastic; Diameter 4 in.
2. Distance above basement floor ~~2~~ in.; or below basement floor 12 in.
3. Distance between dwelling and septic tank 106 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line 56 ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company Pre-Cast)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ____in.
Below Grade 6 in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ____in.
7. Depth of top of tank below finished grade 6 in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material conc; No. available outlets ____.
2. Factory Built: Yes ☒, (Company Pre-Cast) No ☐
3. Dimension: Length ____in.; Width ____in. Depth ____in.
4. Distance from Septic Tank 6½ ft.
5. Serial Distribution: Yes ☐, No ☐
(If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: half moon
2. Lateral Lines: Depth below grade ____in.
Number 2; Length of each line 60 ft
Total length of Laterals 160 ft.; 100
Slope 0 in/100 ft. Diameter of pipe 24 in.; Shape ____
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth 48 in.; Width 48 in.
4. Filter Material: grave l
Depth of material from trench bottom ____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: ____minutes/inch

TYPICAL SKETCHES



Signature of Applicant

FORM HD- 45(73) PLANS & SPECIFICATIONS
SEWAGE DISPOSAL SYSTEM

(Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502 (Phone: 475-6221)

FILE NO. _____

SPECIFICATIONS

DATE: _____

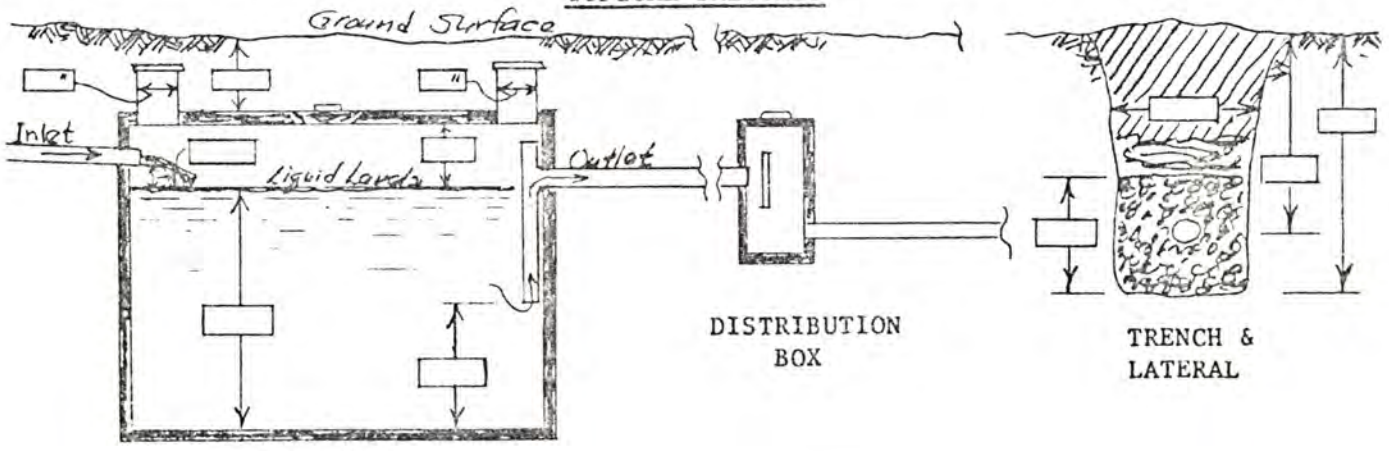
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☐ (Company _____)
No ☐
4. Manholes: Over Inlet; diam. ____in.
Over Outlet; diam. ___in.
Below Grade _____in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☐; or Tee ☐
Depth of outlet below inlet ___in.
7. Depth of top of tank below finished grade ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in. Number ____; Length of each line ___ft Total length of Laterals 144 OR 108 ft.; Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 36 OR 48 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant

9.30 fr. Ag

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

98092900? rf

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

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

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☑ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

CR 3788

Legal Description of Property: Street Address 22701 S. 82nd St., Hickman

Twp 7N Range 7E Section 10 1/4 ___ 1/4 ___ Block ___ Lot 20 Addition ___

Directions to Property 2 miles S of Hickman to Panama Rd., 1 mile E to 82nd St., S'2 mile - West Side

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Roger & Betty Reinke	RR 1 Box 250 68372-9760	792-2911
Tenant/Buyer:			
Return to:	Roger Schreiner	7211 S. 27th St. (12)	430-7653
Signature of Applicant	Jeff & Mitzi Cirkman by SMC	Address 9125 Oxford Rd. (26)	Date 9/8/98

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 9/14/98

Initials ___

Amount $150.00 ✓

Check No. 5127 ✓

DATA ENTRY

Date ___/___/___

Case No. ___

Initials ___

PRELIMINARY STATUS--By John Chess **DATE:** 9/18/98

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ ___ /ml
Nitrate	☐ 0.12 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☑
Disapproved	☐

Additional Site Visits

Date___/___/___by___

Date___/___/___by___

Date___/___/___by___

Comments: See attached letter

See Attached Letter ☒

FINAL STATUS

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

Approved by John Chess Date 9/25/98

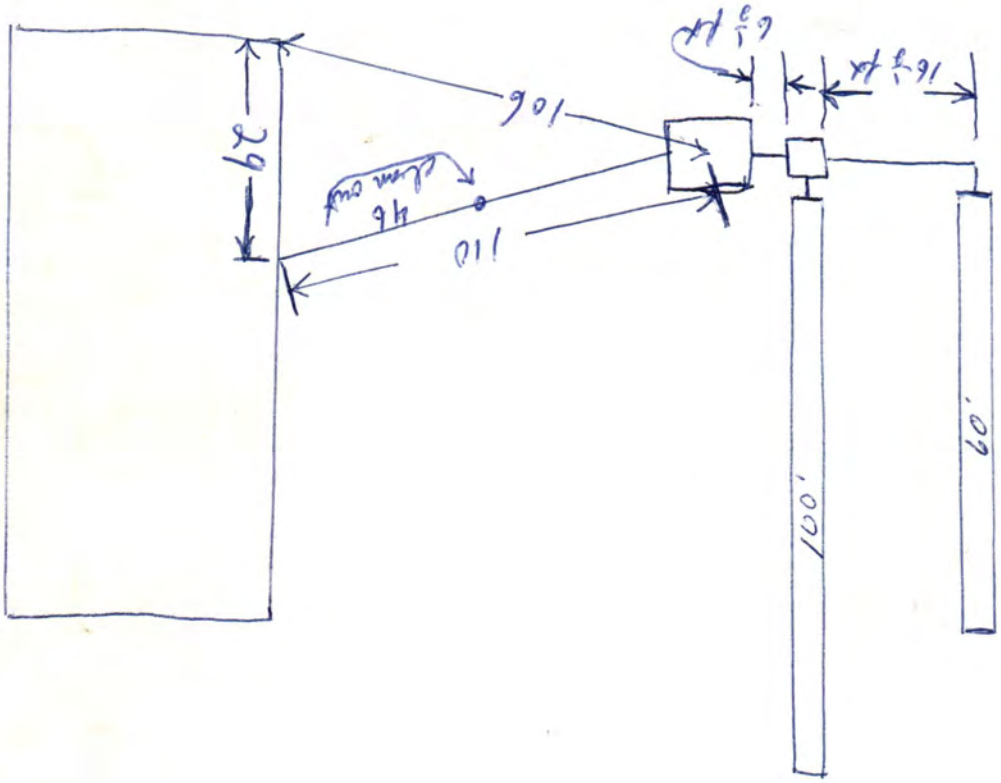
Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95

per phone conversation

N



Hawk & Casement
3-25-77