LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1024-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

October 1, 1977 — THIS PERMIT EXPIRES

Richard D. Eisenhauer — ISSUED TO

Hickman, NE 68372 — ADDRESS

T7N, R7E, Section 12, Addition S 325' of E 725' in NE¼ of SE¼ — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE Laggon

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-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. 1024-C

DATE: 3-30-77

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 7E ; Section 12 ; Block ; Lot ; Addition South 325' of east 725' in NE¼ of SE¼.
Street Address .

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

3. Type of Individual Sewage Disposal System: ~~Septic Tank~~ Togoon ☒; 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).

Richard D Eisenbarth
Signature of Applicant (owner or lessee)

Hickman Ne 68372
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 4-26-77 by: [illegible]
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 4/1/77
by: Gerald E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 4-26-77 by: Ron Magnuson

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. 1024-C

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

DATE: 3-30-77

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

1. Legal description of property: Twp. 7N ; Range 7E ; Section 17
Block _____ ; Lot _____ ; Addition NE¼ of SE¼ So 325' of East 725'
Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Richard D Eisenhauer
Signature of Applicant (Owner or Lessee)

Hickman Ne 68372
Address

easement signed 4/11/77 existing access

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 4/1/77. Date Frwd. 4/1/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: Date Rec'd. 4-11-77. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☒ Signature: Tom Baasch

3. City or County Engineer: Date Rec'd. 4/11/77. Date Frwd. 4/11/77. ACTION: Approved ☐ Disapproved ☒ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

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

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 474-1541)

FILE NO. 1024-C

PROPERTY WHERE SOIL TESTED:
Location: Township 7N : Range 7E
Section & ¼ Sect. 12
Property Dimensions: ____ ft. x ____ ft.
Area: 5.41 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: Rickard
Eisenhauer
Address: Hickman Ne 68372
50325 E725

Dates of Tests: 3-20-77 to 3-21-77. Weather: Precip. No Temp. 50

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				
Hold 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)

Do not pass

Do not pass

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

Signature of Person Conducting Test

Address

Phone

(Do not write below this line)

REVIEWING ACTION

REMARKS:

DATE:

Approved Percolation Rate (a)
A. ____ min./inch
B. ____ min./inch
C. ____ min./inch

Signature of Reviewing Official

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

LINCOLN-LANCASTER COUN

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: Oct. 26, 1990

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

Legal Description of Property: TWP. 7 North; RANGE 7E; SECTION 12; BLOCK ____

LOT 37; ADDITION _____; Street Address 22801 South 110th

Directions to Property 1 mile east of Holland, NE and ½ mile South. Blue house with detached garage. Holland - go down 56th to Saltillo, over to 68th, south through Hickman, turn at church

Location of Well Northeast of house, by hydrant Tap Location: Inside ☐ Outside ☒

Location of Sewage System West of house Year Installed 1977

	NAME	ADDRESS	PHONE
Present Owner:	Nancy Fly	5531 Prescott, Lincoln	489-9743
Tenant/Buyer:	Tom & Nancy Price	510 South 55th Lincoln	489-4777
Return to:	Charlie Weber, Nebr. Title	Suite 100 - 633 South 9th 68508	~~476-3149~~ 476-8818

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

Signature of Applicant Tom J. Price Address 510 South 55th

==========

HEALTH DEPARTMENT USE ONLY

Date Received OCTOBER 30, 1990 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 10/30/90

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 10/30/90	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 11/5/90	by J.C.H.
Nitrate	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: LAGOON FENCE IS SAGGING IN SEVERAL PLACES NEEDS TO BE STRAIGHTENED UP AND SECURED TO POSTS. GATE NEEDS REPLACEMENT AND LOCK. WARNING SIGNS NEED TO BE POSTED. CATAILS NEED TO BE REMOVED. GRASS NEEDS TO BE MOWED. LITTLE TREES NEED TO BE REMOVED. Pretty much all done. J.C.H. 11/5/90 See Attached Letter ☐

FINAL STATUS

WATER SYSTEM:	SEWAGE DISPOSAL SYSTEM: LAGOON NEEDS WATER IN.
Approved: ☒	Approved: ☒ Provisional Approval: ☐

APPROVED BY Jerrold C. Hood R.S. DATE NOVEMBER 5, 1990

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

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE TO BE COLLECTED AND MAILED ON:

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

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

DATE COLL. 1/29/90 11:16 A.M. (9-16) BY J. C. Wood (17-28)

ADDRESS OR LOCATION SEC. 12, T7N, R7E (29-41)

SE/4

NAME AND ADDRESS OF OWNER

NANCY FLY

BOX 181

HICKMAN, NEBRASKA 68373

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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. #72 1-29-90 3 45 P (44-47)

DATE EXAMINED 1-29-90 3 45 P (48-53)

COLIFORM 0 (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE <0.1 STATE TEST 1-30-90 (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE ____ (69-75)

ANALIZED BY mjf (76-79)

IN

1-29-90

330 P

mjf

OUT

1-30-90

437 P

mjf

Lincoln-Lancaster County
Health Department

2200 St. Mary's Ave
Lincoln, NE 68502-3785
402-471-8000
M. Jane Ford, Director

February 5, 1990

Nancy Fly
Box 181
Hickman, NE 68373

Dear Ms. Fly:

You will be interested to know, Ms. Fly, that on January 29, 1990, an inspection was made of the construction and location of the water well supplying your residence. Well construction and location appear to be satisfactory.

The results of bacteriological and nitrate nitrogen water samples meet the requirements of a satisfactory drinking water supply at the time of sampling. Nitrate nitrogen is less than 0.1 ppm.

If there are any questions, please contact the Health Department.

Sincerely,

Jerrold C. Hood

Jerrold C. Hood, R.S.
Food/Water Section
Division of Environmental Health

JCH:dl
FG.6150/4

...OGICAL EXAMINATION OF DRINKING WATER

TO BE COLLECTED AND MAILED ON:

(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 6-5-92 11:32 (9-16) MO./DAY/YR./HOUR BY PAUL DROTZMANN (17-28)

ADDRESS OR LOCATION 22801 So. 110th, HOLMND, NE (29-41)
Tom PRICE

NAME AND ADDRESS OF OWNER

LCHD
2200 ST. MARY'S AVE
LINCOLN, NE
68502

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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. 13080 (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 (76-79)

IN 92 JUN -5 P1:28

OUT 92 JUN -6 P4:06

WATER CHEMISTRY

STATE LAB NO. 152919

COMPLETE INFORMATION BELOW

DATE COLLECTED 6-5-92 11:32 (MO. DAY YEAR HOUR)

SAMPLE COLLECTED BY PAUL DROTZMANN

SAMPLE LOCATION 22801 So. 110th HOLLAND NE

PROPERTY LEGAL DESCRIPTION: ~~COUNTY~~ Tom PRICE

QRTR NE¼ SECT 12 TWNSHP 7 N S RANGE 7 E W

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:
LLCHD
2200 ST. MARY'S AVE
LINCOLN NE 68502

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

REPORTED JUN -8 '92 P3:32

RECEIVED JUN -5 '92 P1:28

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:
☐ DAMAGE
☐ INSUFFICIENT AMOUNT
☐ IMPROPER CONTAINER

TEST(S) BY SW

FOR ACCOUNTING USE ONLY

LWN 88

Lincoln-Lancaster County Health Department

2200 St. Mary's Ave
Lincoln, NE 68502-3785
402-471-8000
M. Jane Ford, Director

June 12, 1992

Tom Price
Rt. 1, Box 181
Hickman, NE 68372

Dear Mr. Price:

You will be interested to know, Mr. Price, that on June 5, 1992, an inspection was made of the construction of the water well supplying 22801 South 110th street. Well construction and location appear to be satisfactory.

The results of bacterial and nitrate nitrogen water samples meet the requirements of a satisfactory drinking water supply at the time of sampling. Nitrate nitrogen is less than 0.1 ppm.

If there are any questions, please contact the Health Department.

Sincerely,

Paul Drotzmann, R.E.H.S.
Field Sanitarian
Division of Environmental Health

FG6150.RFT/8

RECEIVED JUN 0 4 1992

APPLICATION FOR WELL REGISTRATION AND SAMPLING

DATE: Wed. June 3, 1992

Legal Description of Property 22801 South 110th Street, Holland, NE
Directions to Property 1 mile east of Holland, ½ mile South, west side of road, blue house - blue garage

Land Owners
Name: Tom + Nancy Price
Address: Route #1 - Box 181 Hickman NE
Phone: 792-9331

Send Results to:
Name: Tom Price
Address: Route #1 - Box 181 Hickman 68372
Phone:

Land Owners Signature Tom J. Price
I hereby authorize the Health Department to inspect, sample, and register the well on the above property.

Well Data: Please fill in the following information as thoroughly as possible. Leave blank any areas that are unknown.

Approximate Depth of well _____
Casing Material _____
Casing Diameter _____
Is well located in a pit _____
Type of pump _____

POINT SOURCES - DISTANCE WITHIN 1/2 MILE OF WELL FROM: UPHILL/DOWNHILL FROM WELL

HOUSE FOUNDATION	60 (distance)	FEET	U/D
CESSPOOL	X	FEET	U/D
SEPTIC TANK	X	FEET	U/D
SEWAGE DISTRIBUTION FIELD	X	FEET	U/D
WASTE STABILIZATION LAGOON	300	FEET	U/D
BARN YARD	X	FEET	U/D
NEAREST WELL		FEET ?	U/D
NEAREST PASTURELAND	30	FEET	U/D
NEAREST CROPLAND	100	FEET	U/D
SHOP	X	FEET	U/D
GRAINERY	X	FEET	U/D
FUEL TANKS	X	FEET	U/D
OTHER POTENTIAL CONTAMINATION SOURCE	X	FEET	WHAT? _____

ADM.0002/34

$15.00 Fee

Nitrate 20.1
6-8-92
Coliform 0

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: 13 June 1979

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☒ Evaluation of the Individual Water Supply
☒ Evaluation of the Sewage Disposal System

Legal description of property: Twp. 7N ; Range 7E of 6th P.M. ; Section S.E¼ Sec 12
Block ; Lot 37 ; Addition .
Street Address 22801 S. 110th Hickman .
Directions on how to get to property .
.
Location of well by drive .
Where is tap: Inside ☐ Outside ☒ ? .

	NAME	ADDRESS	PHONE
Present Owner:	Richard & Ardith Eisenhauer	22801 S. 110th	
Tenant:		Lock box up	
Lending Agency:	First State Bank	Hickman	

(Do not write below double lines)

Health Department: Date Received 6-13-79
Received $45.00 Check ☐ Cash ☒
Site Visits: Date 6-14-79 by JM
Date 6-19-79 by JM
Date by

Fredrick E Wuthnick
Signature of Applicant
2527 S. 39th St.
Lincoln, Ne 68506
Address
Please send copy to Scott Colborn
ERA Regal Real Estate, Inc.
910 N. 70th Lincoln 68505

PRELIMINARY STATUS -- DATE 6-14-79

Water System:
Approved ☒ Disapproved ☐

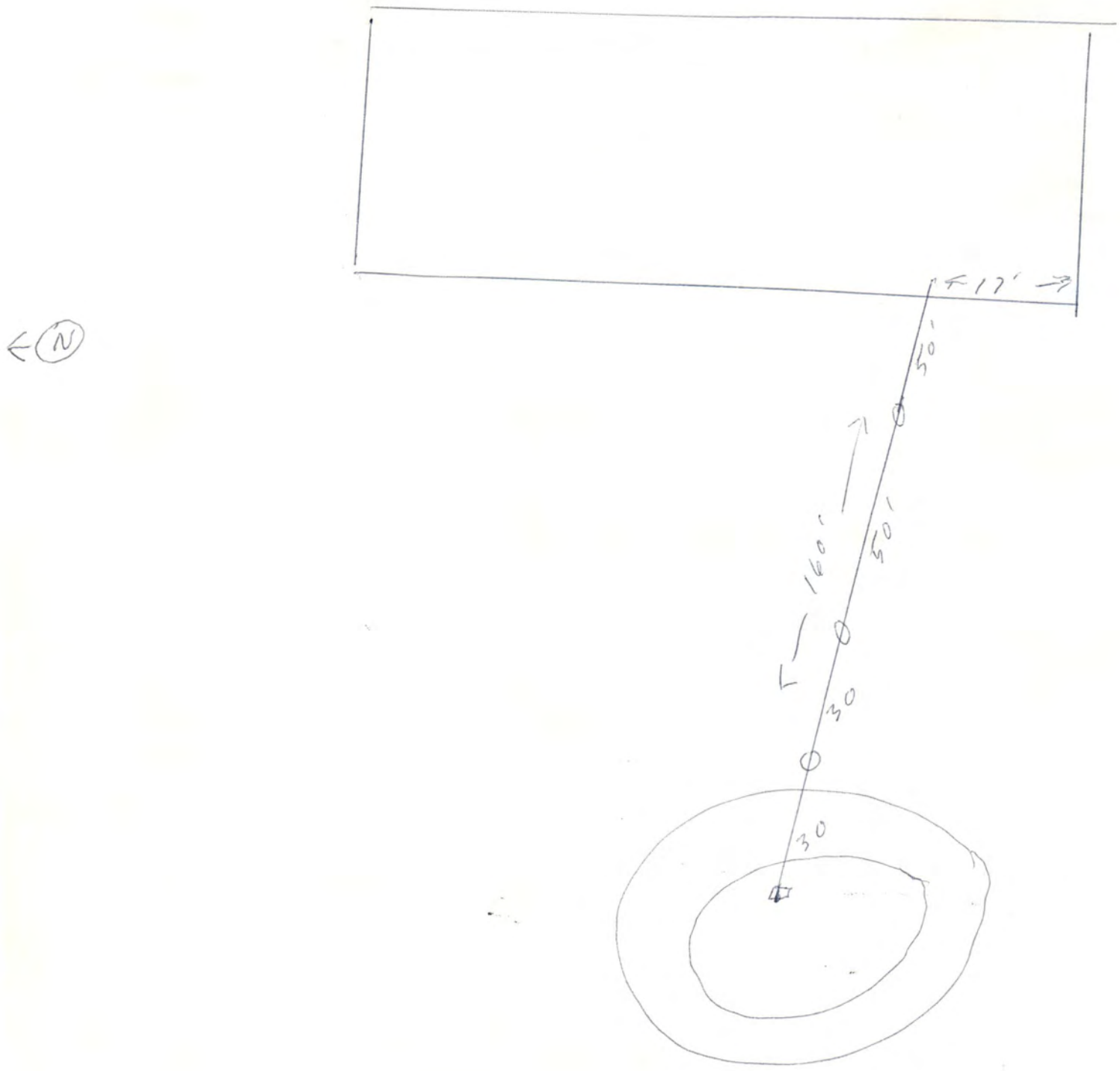
Sewage Disposal System:
Approved ☐ Provisional Approval ☐
Disapproved ☒

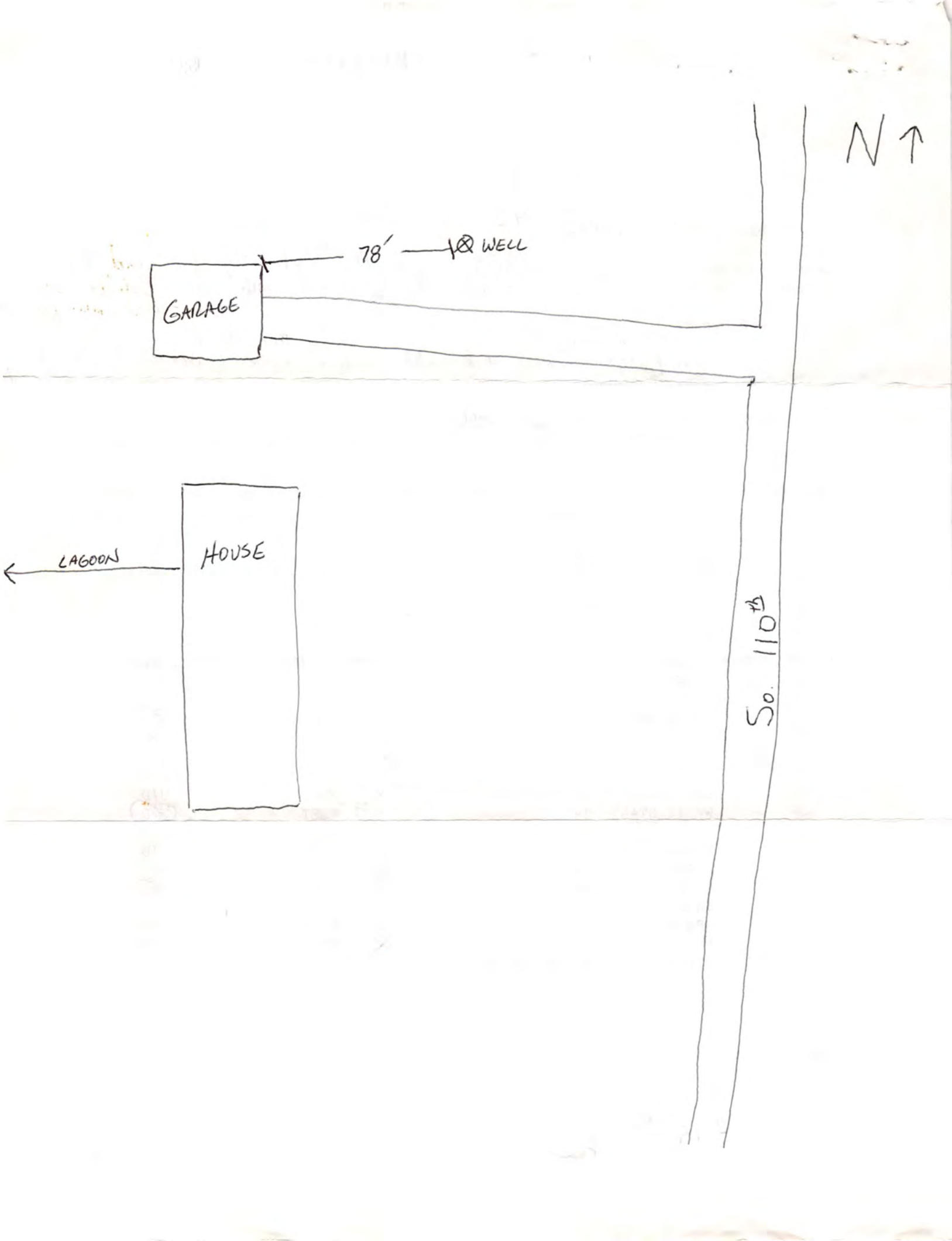
Corrections Required or Reasons for Disapproval Fence needs gate + lock, mow weeds. maintain 2' water level. Items Corrected JM .
☐ See Attached Letter.

FINAL APPROVAL -- DATE 6-19-79

Water System ☒ . Sewage Disposal System ☐ . BY James Warnka

Form Number 20215-0878


17'
50'
50'
160'
30
30
N


N
78'
WELL
GARAGE
HOUSE
LAGOON
So. 110th