LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2007-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION
TYPE OF PERMIT

JANUARY 7, 1984
THIS PERMIT EXPIRES

SHIRLEY MOORE — Rt 1, BOX 166 — HICKMAN, NE 68372
ISSUED TO — ADDRESS

T7N; R8E; Sec. 8; Lot 4IT; SE¼
LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE

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: PB
DATE: 1/6/83
AMOUNT:
VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

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

20109-0977

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

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

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

FILE NO. 2007-C

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

DATE: June 8, 1983

The undersigned hereby applies for a permit to ALTER ☒, EXTEND ☒, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp. 7N ; Range 8E ; Section 8 ;
Block ; Lot 4 1st ; Addition
Street Address 12760 Olive Creek Rd, Rt 1, Box 166, Hickman NE 68372

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

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

4. Description of proposed alteration, extension or repair: Disconnect existing laterals - install 70' sewer line to existing septic tank - install new distribution box - install 100' new lateral E - appox 90' new lateral installed to it.

5. Work to be done by: Owner ☐ ; or Contractor ☒, Harold Eastment
Contractor's Name

6. Estimated cost of project:

a. Materials	$	
b. Labor	$	
c. Other	$	
TOTAL	$	2100 00

Shirley D. Moore
Signature of Applicant (owner or lessee)

Rt. 1, Box 166, Hickman NE 68372
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: 7/8/83 by: J.C.H.
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐
by: Jerold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 7/8/83 by: J.C.H.

FORM HD-41(73) APPLICATION FOR PERMIT TO ALTER, EXTEND OR REPAIR INDIVIDUAL SEWAGE DISPOSAL SYSTEM

City Ordinance No. 9150 ☐

County Resolution No. 2832 ☐

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

FILE NO._____

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

DATE:_____

The undersigned hereby applies for a permit to ALTER ☐, EXTEND ☐, or REPAIR ☐ an existing Individual Sewage Disposal System, in conformance with appropriate Ordinance or Resolution, as described in this application and drawings attached hereto.

1. Legal description of property: Twp._____; Range_____; Section_____;
Block_____; Lot_____; Addition_____
Street Address_____

2. Property Use: Residential ✓ ☐; Commercial_____ ☐
No. Bedrooms 3 br.
Describe_____
Other Use ☐
Describe_____

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

4. Description of proposed alteration, extension or repair: 74'(S) line Dist Bot 184' 4' wide lateral

5. Work to be done by: Owner ☐; or Contractor ✓, Capital City Trenching
Contractor's Name

6. Estimated cost of project:

a. Materials	$_____
b. Labor	$_____
c. Other	$_____
TOTAL	$ 2300 00

Shirley L. Moore
Signature of Applicant (owner or lessee)

Rt 1, Tuckman 68372
Address

(Do not write below this line)

REVIEWING ACTION

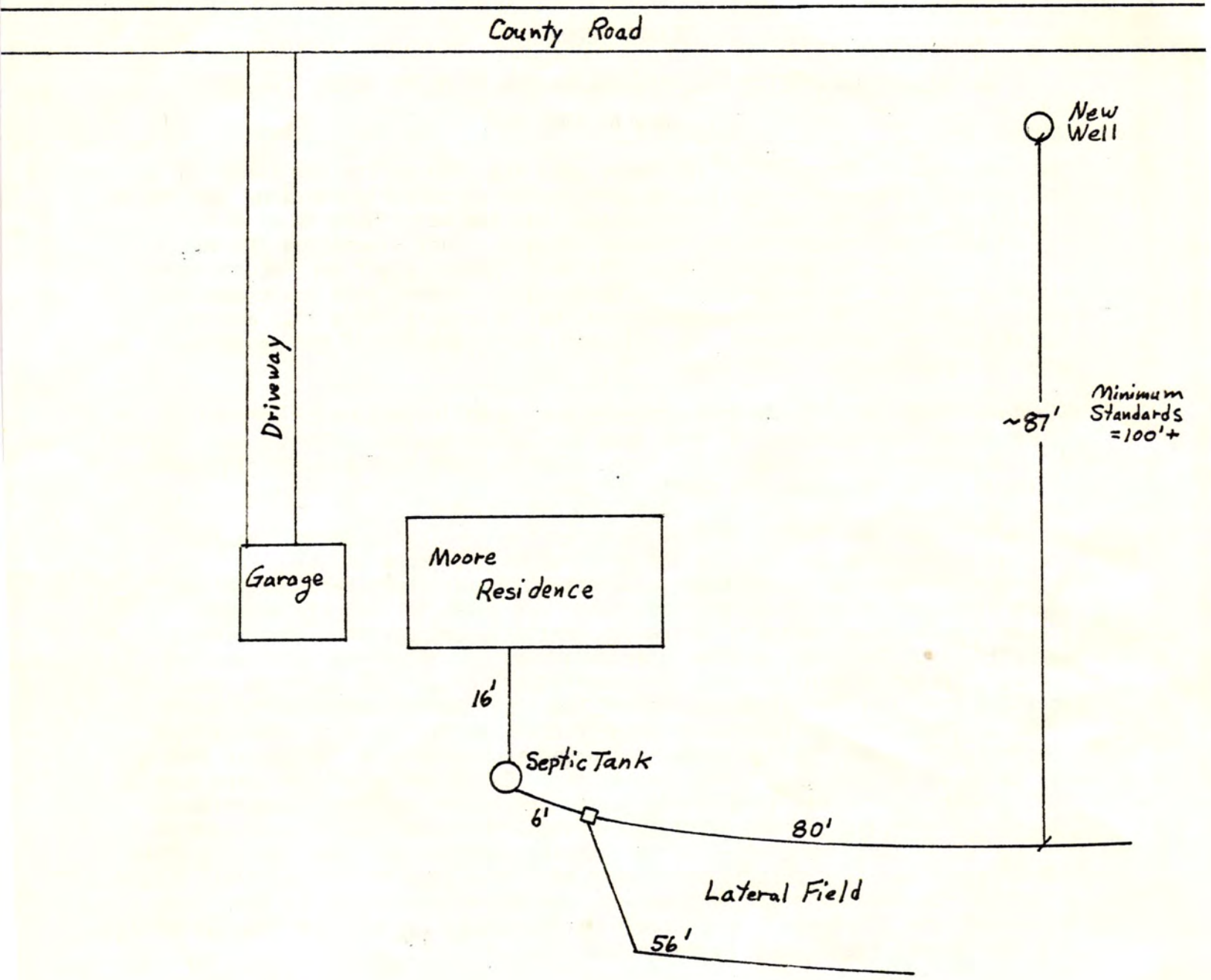
1. Date Rec'd:_____
Filing Fee: $_____

2. Site Visits:
Date:_____ by:_____
Date:_____ by:_____
Date:_____ by:_____

3. Date: Approved ☐; Disapproved ☐
by:_____

4. INSTALLATION FINAL WRITTEN APPROVAL
Date:_____ by:_____

MOORE PROPERTY R.R. #1
HICKMAN NEBRASKA



N

5/4/81 D.G.
Scale: Not to Scale

Dennis, your copy.

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 474-1541 Lincoln, Nebraska 68502

RAY R. STOLEE
ACTING DIRECTOR
M. JANE FORD
HEALTH DIRECTOR

June 18, 1981

Allen Moser
111 East 7th Street
Hickman, NE 68372

WATER WELL ON JOHN MOORE PROPERTY, RURAL ROUTE #1, HICKMAN, NEBRASKA

The water well on the John Moore property is constructed within 100 feet of the subsurface lateral of the septic system serving the home. "Minimum Standards for a Private Water Well in Nebraska, 1972", recommends the well be located at least 100 feet from a subsurface lateral system.

It is not the policy of this department to approve wells which are not constructed or located according to specified standards. The present location of this well may not provide an immediate health hazard, but no assurance can be given by this department of the future quality of the water due to its location.

In previous discussions with you, it was suggested that the most economical method of maintaining the 100 foot separation would be to move the lateral system the necessary distance. To do this would be in the best long term interest of the property owner, considering future property transfers may result in loan companies requesting approval by this department.

If approval of the well is required, please contact this department after corrections have been made.

M. Jane Ford
Health Director

DG:bs

CC: John Moore
Rural Route #1, Box 166
Hickman, NE 68372

Lancaster County Commissioners Office

INTER-DEPARTMENT COMMUNICATION

TO: Joseph Edwards, Chairman

DATE: April 20, 1981 MJF

DEPARTMENT: Lancaster County Commissioner

FROM: M. Jane Ford, Director

ATTENTION

DEPARTMENT: Health

CARBONS TO: Jan Gauger, Allen Moser, Robert Colin, John Moore, and Doug Cyr

SUBJECT: REQUEST BY ALLEN MOSER TO THE BOARD OF HEALTH FOR A LETTER ASSURING PRESENT AND FUTURE VARIANCE FROM BOARD OF HEALTH POLICY #202.03 - Private Water Supplies

On May 12, 1981, Mr. Allen Moser appeared before the Board of Health requesting the Board to approve an improperly constructed well he had drilled on the John Moore property in February 1981.

Board adopted policy specifies that the minimum standards for a private water well in Nebraska (copy attached) be used as a basis for approval of water wells in Lancaster County. These standards recommend water wells be located at least 100 feet from any subsurface sewage disposal system. Mr. Moser had located the More well approximately 87 feet from the sewage disposal system.

The Health Department does not inspect and issue permits for the construction of water wells under County Resolution or State Statute. A well inspection is only performed at the request of a property owner or a loan company to assure to those responsible for the property that the well is properly constructed and safe. Mr. Moore requested the Health Department to inspect the new well prior to accepting it from Mr. Moser, to assure that the well would be acceptable for any future loan approval. Staff could not issue such an approval because of the improper well location.

At the Board meeting Mr. Doug Cyr, representing the County Attorney's Office, indicated the Board of Health has no apparent jurisdiction in this matter.

Staff pointed out that this well inspection was not an application of County Resolution 2832, which does not permit sewage systems to be constructed within 100 feet of an existing well, but action on the request of a property owner assuring approval for future loan requests. However Mr. Cyr indicated that this resolution could be interpreted to apply to this case.

Mr. Moser indicated efforts were made to locate the sewage system, but he was not aware the Health Department has been required, by County Resolution 2832, to record the location of these systems since 1967.

Mr. Moser also related concerns he had with other Board adopted policies on water supplies.

The Board unanimously approved the following two motions:

1. That periodically the Health Department notify the well drillers of current regulations, policies and procedures and that a committee review policies and procedures, resolutions, and ordinances with respect to wells and well construction and recommend any appropriate changes.
2. Mr. Moser's request for variance from policy #202.03 - Private Water Supplies - be referred to the County Board of Commissioners with recommendation of denial.

M.JF:bs

copy

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St. Marys Avenue Phone (402) 474-1541 Lincoln, Nebraska 68502

~~RXXRXSCOTT~~
~~XXXXXXXXXXXXXXXX~~
~~ACTING DIRECTOR~~
M. JANE FORD
HEALTH DIRECTOR

June 10, 1981

John Moore
Rural Route 1
Box 166
Hickman, NE 68372

REQUEST OF ALLEN MOSER TO THE COUNTY BOARD CONCERNING A VARIANCE FOR THE WELL CONSTRUCTED ON THE MOORE PROPERTY.

As I discussed with Mrs. Moore on the telephone, the Lancaster County Board denied Mr. Moser's request.

If Health Department approval of your well is desired, the well will have to be moved or the lateral field rerouted providing the required 100 foot separation.

If you have any further questions, please do not hesitate to call.

M. Jane Ford, Director
Lincoln-Lancaster County Health Department

MJF:bs

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. 541-C

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

DATE: OCT 16, 1974

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. 7 NORTH; Range 8 east; Section S.E ¼ sec 8
Block ____; Lot 4 I.T.; Addition ____
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 ☐

4. Distance to public sewer: NONE ft.

Douglas H. Hewell
Signature of Applicant (Owner or Lessee)

RT. 1 HICKMAN NE
Address

1

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 10/17/74. Date Frwd. 10/17/74. 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. ____. Date Frwd. 10-18-74. ACTION: Approved ☑ Disapproved ☐ Signature: Walter Hoppe MPA.

REMARKS OR REASONS FOR DISAPPROVAL ____

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

1

FORM HD-42(73) APPLICATION ☐ 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. 541-C

DATE: OCT 16-1974

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. 7 north ; Range 8 east ; Section SE¼ sec. 8 ; Block ; Lot 4 I.T. ; Addition .
   Street Address .

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

Douglas H. Hull
Signature of Applicant (owner or lessee)

RT. 1 HICKMAN, NE.
Address

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
   Date: 11-15-74 by: JW
   Date: by:
   Date: by:

3. Date: Approved ☒; Disapproved ☐ 10/17/74
   by: Jerrold E. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
   Date: 11-15-74 by: James Weverka

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. 541-C

SPECIFICATIONS

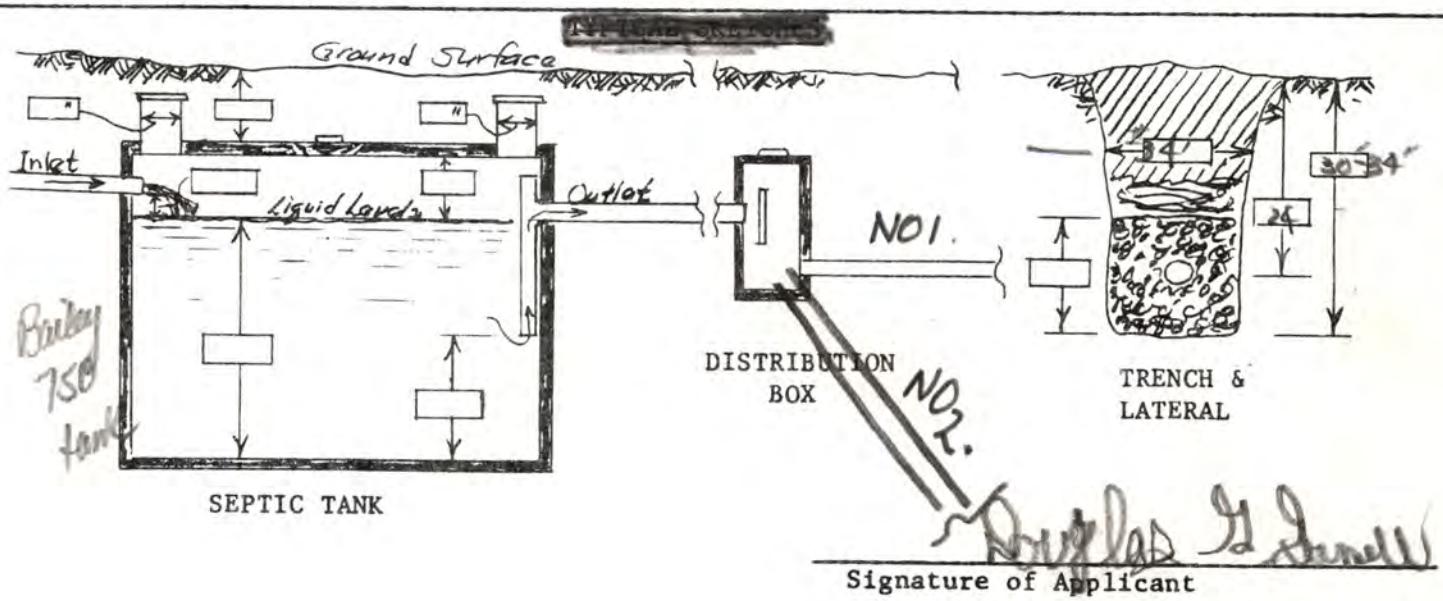
DATE: 10-16-74

A. BUILDING SEWER:
1. Material C.I.; Diameter 4 in.
2. Distance above basement floor ___in.; or below basement floor ___in.
3. Distance between dwelling and septic tank 16 ft.
4. Number of clean-outs ___.
5. Distances To:
Well or Suction Line 70 ft.;
Stream — ft.; Pressure Line 18 ft.;
Property Line ___ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material fiberglass; No. of compartments ___.
2. Capacity 750 gals.; Liquid depth ___in.
3. Factory Built: Yes ☒ (Company BAILEY) 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 90 ft.;
Stream — ft.; Pressure Line ___ft.;
Property Line ___ft.

C. DISTRIBUTION BOX
1. Material Cement; No. available outlets 6.
2. Factory Built: Yes ☒, (Company Pre Cast.) No ☐
3. Dimension: Length ___in.; Width ___in. Depth ___in.
4. Distance from Septic Tank 6 ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: CLAYLOAM
2. Lateral Lines: Depth below grade ___in. Number ___; Length of each line 80 ft Total length of Laterals 136 ft.; 56
Slope 4 in/100 ft. Diameter of pipe 12" in.; Shape ___
Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___
Distance between lateral lines 3'10" ft.
3. Trench Dimensions: Depth 30-36 in.; Width 48" in.
4. Filter Material: ___.
Depth of material from trench bottom 8 in.
5. Distances To:
Well or Suction Line 90 ft.;
Stream ___ft.; Pressure Line 30 ft.
Property Line ___ft.
6. Percolation Rate: 10 minutes/inch



Douglas G Jarrell
Signature of Applicant

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)

FILE NO. 541-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____; Range _____
Section & ¼ Sect. _____
Property Dimensions: ____ft. x ____ ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ☐; Silty Clay Loam ☒; Sandy Loam ☐
Silty Loam ☐; Clay Loam ☐; Sandy Clay ☐

Owner: D.G. GEMELL
Address R.R. Holland Neb

Dates of Tests: Sept 27 to Sept 28. Weather: Precip. dry Temp. 85 F.

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	34"	9-27	10 AM	9-27	6 PM	9-28	1 PM	10	1:30	7½	30	2½	
2	34"	9- ✓	✓	✓	✓	✓	✓	10	✓	7¼	30	2¾	
3	34"	✓	✓	✓	✓	✓	✓	8	✓	6	30	2	
4	35	✓	✓	✓	✓	✓	✓	8	✓	5½	30	2½	
5	34	✓	✓	✓	✓	✓	✓	10	✓	7	30	3	
6	36	✓	✓	✓	✓	✓	✓	10	✓	7	30	3	

Don Pentico (Harvey's Plbg.)
Signature of Person Conducting Test

Address BOX 232 Firth Neb.
Phone: 791-3714

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

(Do not write below this line)

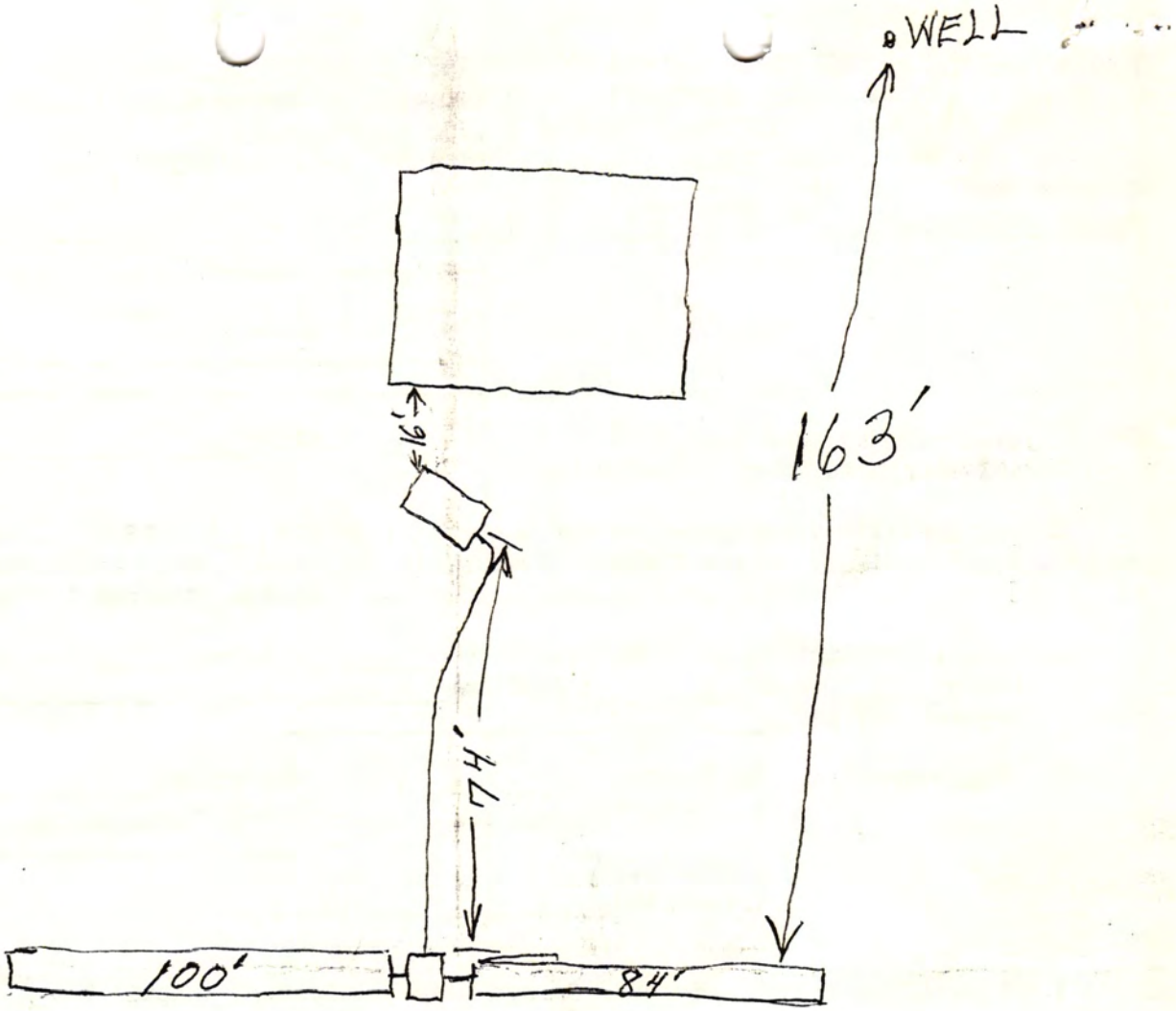
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 11 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: September 30, 1974

Jerrold C. Hook
Signature of Reviewing Official



N