LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 177-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — October 30, 1981
TYPE OF PERMIT — THIS PERMIT EXPIRES

Pella Reformed Church — Adams Nebraska — 68301
ISSUED TO — ADDRESS

T7N, R8E, Section 27
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
CB	4-30-81	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER
2832

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

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._____

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

DATE: April 22-81

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 27 ;
Block_____; Lot_____; Addition_____
Street Address Pella Road + Highway 2

2. Property Use: Residential_____ ☑; Commercial_____ ☐
No. Bedrooms 2
Describe_____
Other Use ☐
Describe_____

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

4. Description of proposed alteration, extension or repair: cut in old system 30' down line + Angled New line 100' with 3" drop + we used 2' wide 4' long ½ moon tile in a 5' wide 34" deep trench + covered with gravel with in 6 in ground level

5. Work to be done by: Owner ☑ ; or Contractor ☐ , _____
Contractor's Name

6. Estimated cost of project:
If total costs are above $400.00, then a fee of $30.00 must accompany this form.

a. Materials	$	739 00
b. Labor	$	donate
c. Other	$	
TOTAL	$	739 00

Loyal Doescher for Pella Reformed church
Signature of Applicant (owner or lessee)

Hickman, Neb. 68372
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: April-1981 by: sm *
Date:_____ by:_____
Date:_____ by:_____

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

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

* System was covered without Health Dept. Inspection

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

3140 "N" STREET
NON TRANSFERABLE

ENVIRONMENTAL HEALTH DIVISION
Lincoln, NE 68510-1514
PERMIT

(402) 441-8000

Permit

SEWAGE INSTALLATION
SEPTIC SYSTEM

No. 98380190201

Issued 12/04/98
Expires 06/04/99
Revenue Code 3157

PAID

FEES: $150.00

Establishment

PELLA REFORMED CHURCH
T7N R8E SEC 27
LOT 15IT
15901 PELLA RD-ADAMS

Permittee

PELLA REFORMED CHURCH/ERIC JOHNSON
RRT 001
ADAMS NE 68301

TOTAL $150.00

Issued By Health Director
Lincoln-Lancaster County Health Department

008355

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

98380190Z

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Legal Description 7-8-27 Location 15901 Pella Rd

Owner/Requestor Pella Reformed Church

WELL/SEWAGE SYSTEM INSPECTION FORM

Based on an inspection this day, the items circled below identify the violations in construction or operation. Some items may not apply. Components that could not be located are indicated as "unknown".

- X New system, initial
- ____ New system, followup
- ____ Existing system, repair
- ____ Existing system, followup
- ____ Loan approval
- ____ Consultation
- ____ Other (Specify)

REMARKS Some seep water around tank. Soils w/ moisture in heavy clay - Construction appears satisfactory. Old tank demolished. Should install a riser on tank.

Water System

1. Approved Permit; (Permit not applicable)
2. Sanitary Seal
3. Screened Vent/Conduit Sealed
4. Well Casing Material
5. Well House
6. Distance of Well from
   - A. Leach Field
   - B. Septic Tank
   - C. Sewer Line
   - D. Frost-Proof Hydrant
   - E. Lagoon
   - F. Accumulated Manure
   - G. Pit or Depression
7. Pressure Line from Sewage System
8. Other Deficiencies (Specify)

Sewage System X Septic ___ Lagoon

1. Approved Permit; (Permit not applicable)
2. Visible Discharge or Seepage
3. Location from Property Line Building
4. Location from Water System Component
5. Lateral Construction, Length, Drop
6. Septic Tank Size + Installation
7. Distribution box
8. Lagoon Fencing, Warning Signs, Vegetation, Dike Damage, Locked Gate, Water Depth
9. Constructed According to Sizing
10. Septic Tank: Constructed Properly, Maintained
11. Other Deficiencies (Specify)

Inspected by: Paul Dratzmann Received by: _____

Date: 12-8-98

WA1002

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

A

Permit Number: 983801902

Sewage Disposal System

Request for Site Clearance and Permit

Include Form B, Form C and Applicable Fees with this Application.

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

The undersigned hereby requests site clearance and permit to construct a Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

PLEASE PRINT OR TYPE

A. System Location (Indicate correct number and street)

Address 15901 Pella Road (no rural route) City Adams NE, Zip 68301

Legal Description 27 2N 8E 15 27
1/4 1/4 Section Township Range Subdivision Addition Block Lot

Geographical Location (if known): Longitude _____ Latitude _____

☐ Check if system mail address is not the same as the owner's address

B. Owner

Name Pella Reformed Church Signature Eric Johnson

Address RR1 Box _____ City/State/Zip Adams NE 68301

☐ Check if owner designed system Home Phone _____ Work Phone 788-2729

C. Contractor

Name Scott Prange Company Name Prange Const

Address RR1 Box 77 City/State/Zip Adams NE 68103

☑ Check if contractor designed system Work Phone 788-2208

D. Engineer/Installer ☐ Check and complete if engineer designed system

Designer Name _____ Firm _____ Work Phone _____

E. This System Will Serve a

☐ Residential Dwelling Number of Bedrooms _____ Is there a Whirlpool Bathtub YES (NO)

☑ Commercial Establishment/Other Facility Specify Church

Design flow in gallons per day _____ Type of Wastewater: ☑ Domestic ☐ Non-Domestic.

DO NOT WRITE BELOW THIS LINE

Approval Process ☐ Municipal Code 24.38 ☒ County Resolution No. 2832

1. **Health Department** Date rec'd 12-3-98 Date frwd _____ **ACTION** ☒ Approved ☐ Disapproved Signature Paul D[illegible]
2. **Supt. Bldg. Insp. or Village Clerk** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____
3. **City or County Engineer** Date rec'd _____ Date frwd _____ **ACTION** ☐ Approved ☐ Disapproved Signature _____

Installation Final Written Approval

By Paul D[illegible]

Date 1-27-99

Business Office Use Only

Date Rec'd 12/3/98

Amt Paid #150.00

Rec'd By rdf Cash/Check No. 5079

FORM 23-100 10-96 White - Health Dept. Yellow - Engineer Pink - Bldg. Inspector

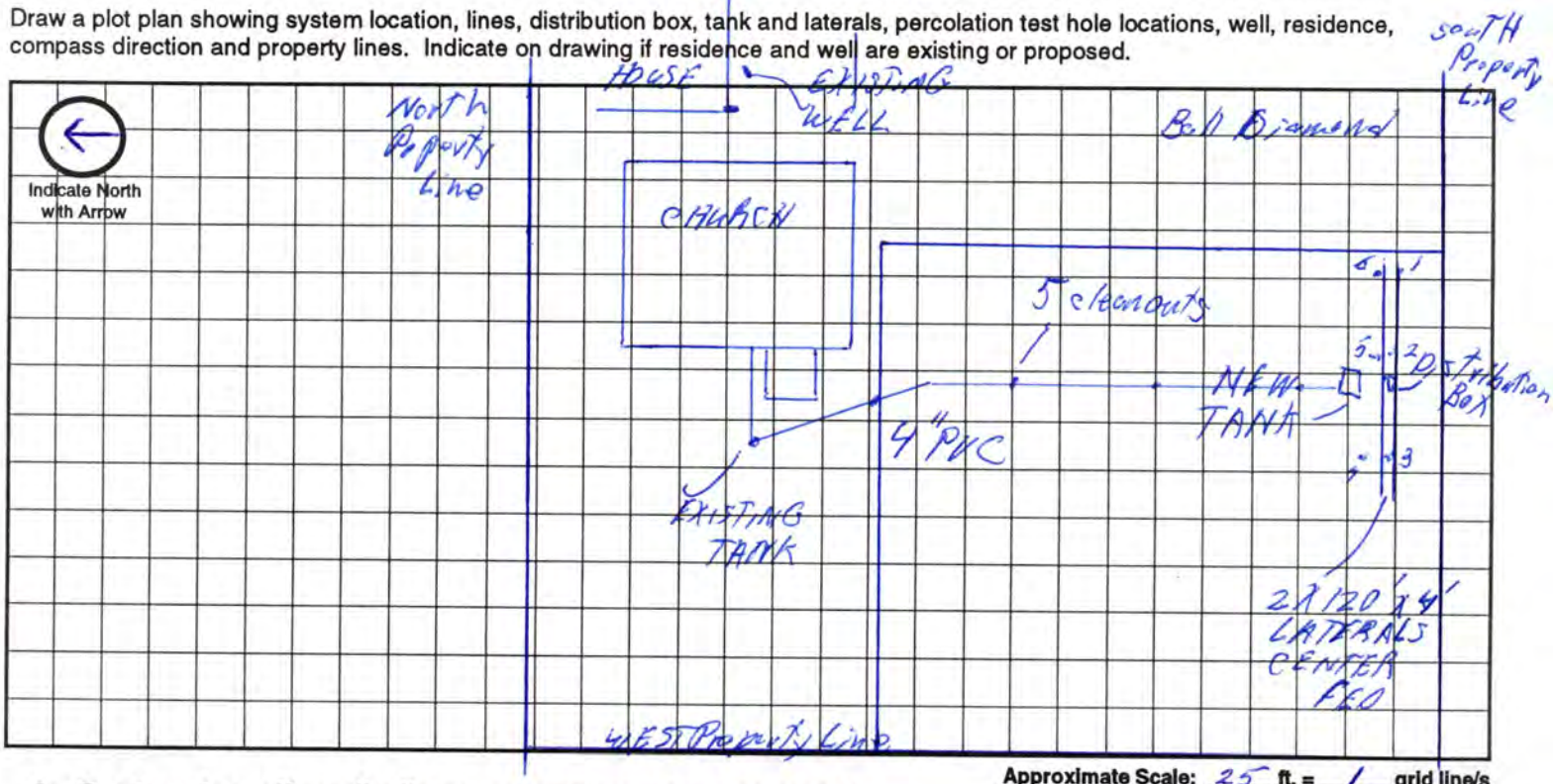
Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street • Lincoln, NE 68510-1514
Phone: 402-441-8022

C

Permit Number: 98380 1902

Sewage Disposal System
Preliminary Plan Specifications

Draw a plot plan showing system location, lines, distribution box, tank and laterals, percolation test hole locations, well, residence, compass direction and property lines. Indicate on drawing if residence and well are existing or proposed.



Approximate Scale: 25 ft. = 1 grid line/s

A. System Location (Indicate correct number and street)

Address (no rural route) 15901 Pella Rd City Adams NE, Zip 68301

B. Proposed Septic Tank/s

Tank Material: ☒ Concrete ☐ Plastic ☐ Other _____

C. Proposed Absorption System (See Form B for Percolation Information)

Percolation Rate 48 (min. per inch) Soil Type: _____ Land Slope: _____ %

Type of Absorption System: ☒ Trench ☐ Bed ☐ Other _____

Total Square Feet of Field Required: _____ sq. ft.

Type of Lateral: ☐ Half-Moon ☐ Perforated Pipe ☐ Other Lateral Material: _____

Capacity of Septic Tank 1500 gals Number of Absorption Beds: _____ Number of Distribution Laterals per Bed _____

Total Length of Laterals 240 ft. Number of Trenches _____ Trench Width _____

D. Setbacks Check the Boxes Below if the Required Setback has been Satisfied

Distance From	Private Well	Public Well	Surface Water	Gound Water	Pressure Water Lines	Property Lines	Foundations Yours	Foundations Neighbors	All Other Setbacks
Tank (ft)	50 ☑	500 ☐	50 ☑	NA ☐	25 ☑	20 ☑	15 ☑	25 ☐	☑
Field (ft)	100 ☑	500 ☐	50 ☑	4 ☐	30 ☑	20 ☑	30 ☑	40 ☑	☐
Lagoon (ft)	100 ☐	500 ☐	50 ☐	N/A ☐	30 ☐	50 ☐	100 ☐	200 ☐	☐

E. Required Signatures

Home Building Contractor Scott Ponza Date 12-2-98

Installer _____ Date _____

FORM 23-102 10-96

Sheet 1 of 2

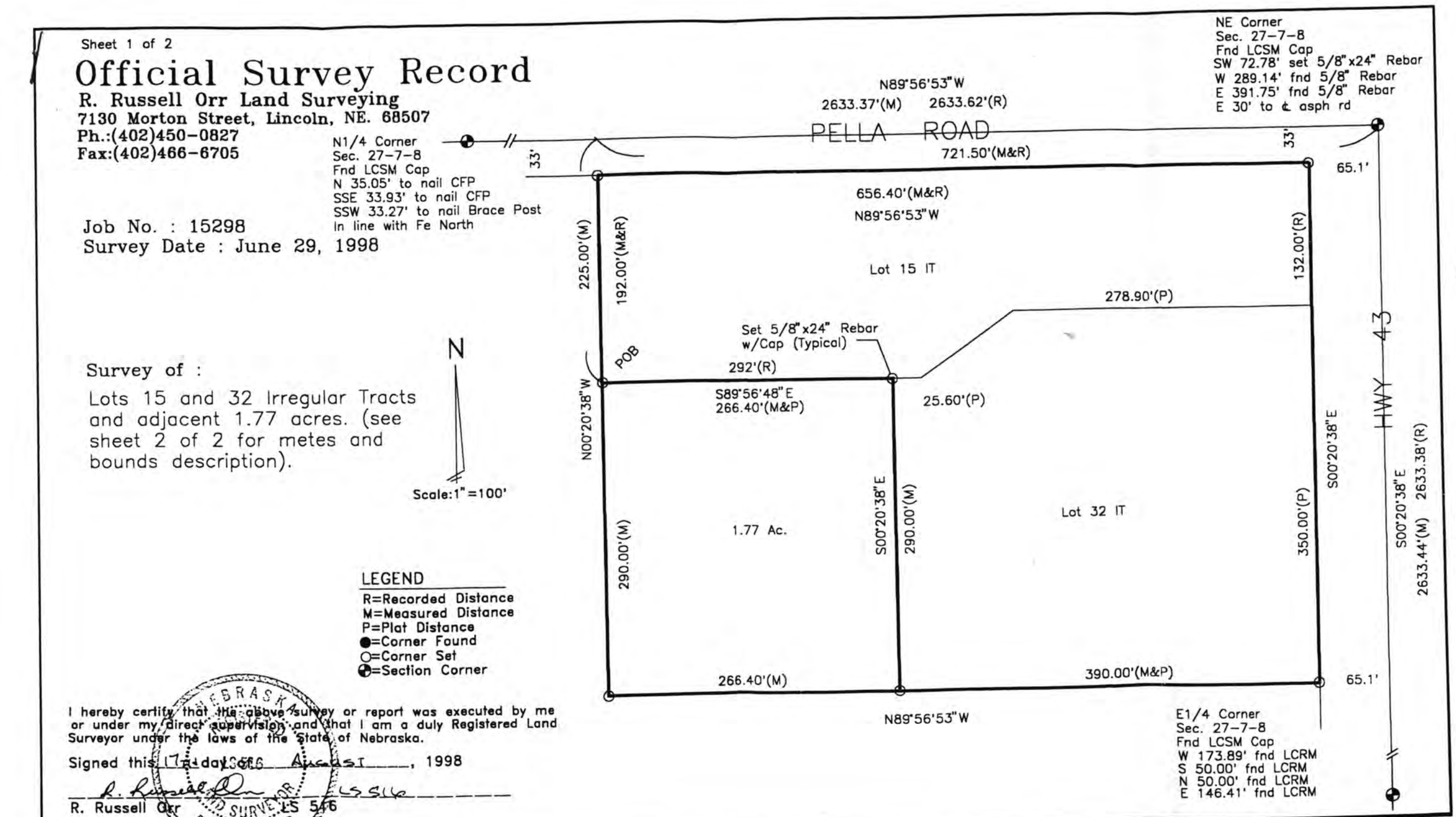
Official Survey Record

R. Russell Orr Land Surveying
7130 Morton Street, Lincoln, NE. 68507
Ph.:(402)450-0827
Fax:(402)466-6705

Job No. : 15298
Survey Date : June 29, 1998

Survey of :

Lots 15 and 32 Irregular Tracts and adjacent 1.77 acres. (see sheet 2 of 2 for metes and bounds description).



LEGEND

R=Recorded Distance
M=Measured Distance
P=Plat Distance
●=Corner Found
○=Corner Set
◒=Section Corner

I hereby certify that the above survey or report was executed by me or under my direct supervision and that I am a duly Registered Land Surveyor under the laws of the State of Nebraska.

Signed this 17th day of August, 1998

R. Russell Orr LS 546

R. Russell Orr LS 546

NEBRASKA REGISTERED LAND SURVEYOR R. RUSSELL ORR

A legal description of a tract of land in the Northeast Quarter of Section 27, Township 7 North, Range 8 East of the 6th P.M., Lancaster County, Nebraska, and more particularly described by metes and bounds as follows:

Referring to the Northeast Corner of said Section 27; Thence: N89°56'53"W, (an assumed bearing), on the North line of the Northeast Quarter of said Section 27, a distance of 721.50 feet; Thence: S00°20'38"E, a distance of 225.00 feet to the Point of Beginning; Thence: S89°56'48"E, on the Southerly line of Lot 15 Irregular Tract, a distance of 266.40 feet; Thence: S00°20'38"E, on the West line of Lot 32 Irregular Tract, a distance of 290.00 feet; Thence: N89°56'53"W, a distance of 266.40 feet; Thence: N00°20'38"W, a distance of 290.00 feet to the Point of Beginning and containing a calculated area of 1.77 acres more or less.

GENERAL EASEMENT AGREEMENT Lancaster County, Nebraska. Art & Leona Vanderbeek, henceforth, "Grantor", being the owner of the following real property:
Address, 15901 Pella Road
County, Lancaster Land Lot, Portion of NE 1/4 27-7-8 District, _____,
Lot, _____, block, _____ Unit, _____ S/D,
_____ AND, Pella Reformed Church, henceforth, "Grantee", being the owner of real property adjoining or adjacent to the above cited property, which said property is described as follows:
Address, 15901 Pella Road
County, Lancaster Land Lot, _____ District, _____,
Lot, 15 IT & 32 IT, block, _____ Unit, _____ S/D,
_____ AND Grantor, having received good and valuable consideration, including the sum of $1.00, receipt of which is expressly acknowledged by the same, on behalf of himself, his heir and assigns, DOES HEREBY GRANT to Grantee, his heirs and assigns, a perpetual easement for the following purposes: install and maintain an underground sewer system consisting of but not limited to sewer pipe, septic tank, and laterals to go through, over and across the Grantor's above described land.

Arthur C Vanderbeek & Leona M. Vanderbeek Witness GRANTOR
Sworn to and subscribed before me this day of , 199 . NOTARY PUBLIC

Pella Reformed Church by Jay K. Nieveen agent Witness GRANTEE
Sworn to and subscribed before me this day of , 199 . NOTARY PUBLIC

Roxie Timms 12-3-98

GENERAL NOTARY-State of Nebraska
ROXIE TIMMS
My Comm. Exp. May 5, 2001

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

D

Permit Number: 98801902

Sewage Disposal System

As Built Plans & Specifications

Date 1-26-99

System Location (Indicate correct number and street)

Address 15901 Bella Rd (no rural route) City Adams NE, Zip 68301

A. Building Sewer

1. Material: PVC
   Diameter: 4" in.
2. Distance above basement floor: Slab const. in.
   or distance below basement floor: _____ in.
3. Distance between dwelling and septic tank: 310 ft.
4. Number of clean-outs: 2 & 5
5. Distances to: well or suction line 150 ft.
   stream none ft.
   pressure line none ft.
   property line 90 ft.

B. Septic Tank

1. Material: Concrete
   Number of compartments: 1
2. Capacity: 1500 gal.
3. Factory built: ☑ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☑ below grade 12 in.
5. Inlet: ☑ baffle ☐ tee
6. Outlet: ☑ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: 48 in.
8. Distances to: Well or suction line 350 ft.
   Stream none ft.
   Pressure line none ft.
   Property line 90 ft.

C. Distribution Box

1. Material: Plastic
   Number available outlets: 5
2. Factory built: ☑ Yes ☐ No
3. Distance from septic tank: 33 ft.

D. Absorption Field

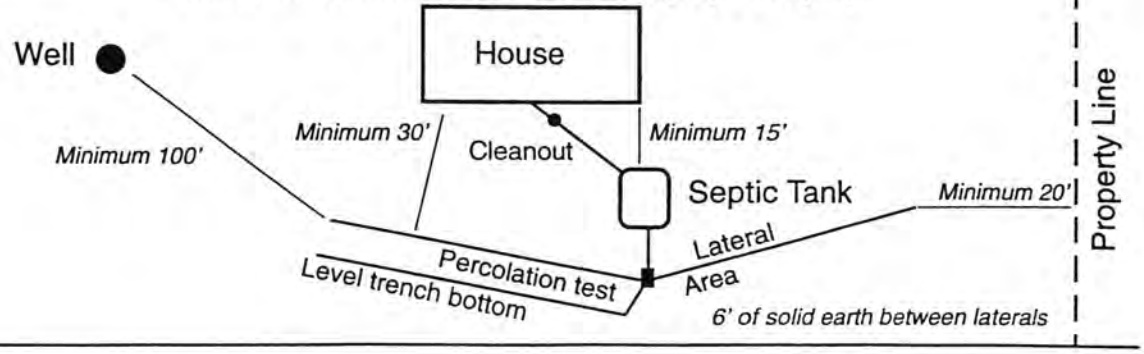
(Provide as-built drawings on back of this form)

1. Type: ☑ Half rounds ☐ Perforated pipe
   Diameter of half round: 18"
   or perforated pipe: _____
   Material: ☐ fiberglass ☑ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number 3
   Length of each line: 80 ft. 80 ft.
   80 ft. _____ ft., _____ ft.
3. Trench dimensions: Width 4 ft.
   Slope Level in/100 ft.
   Average depth 48 in
4. Filter material: Gravel
   Depth of material 24 in.
5. Distances to: Well or suction line 380 ft.
   Stream none ft.
   Pressure line none ft.
   Property line 34 ft.

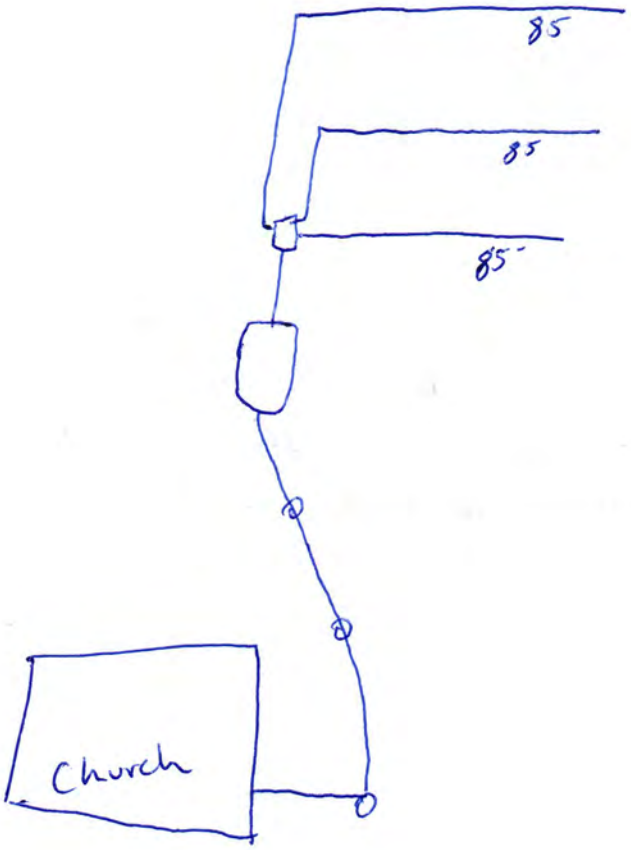
Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96

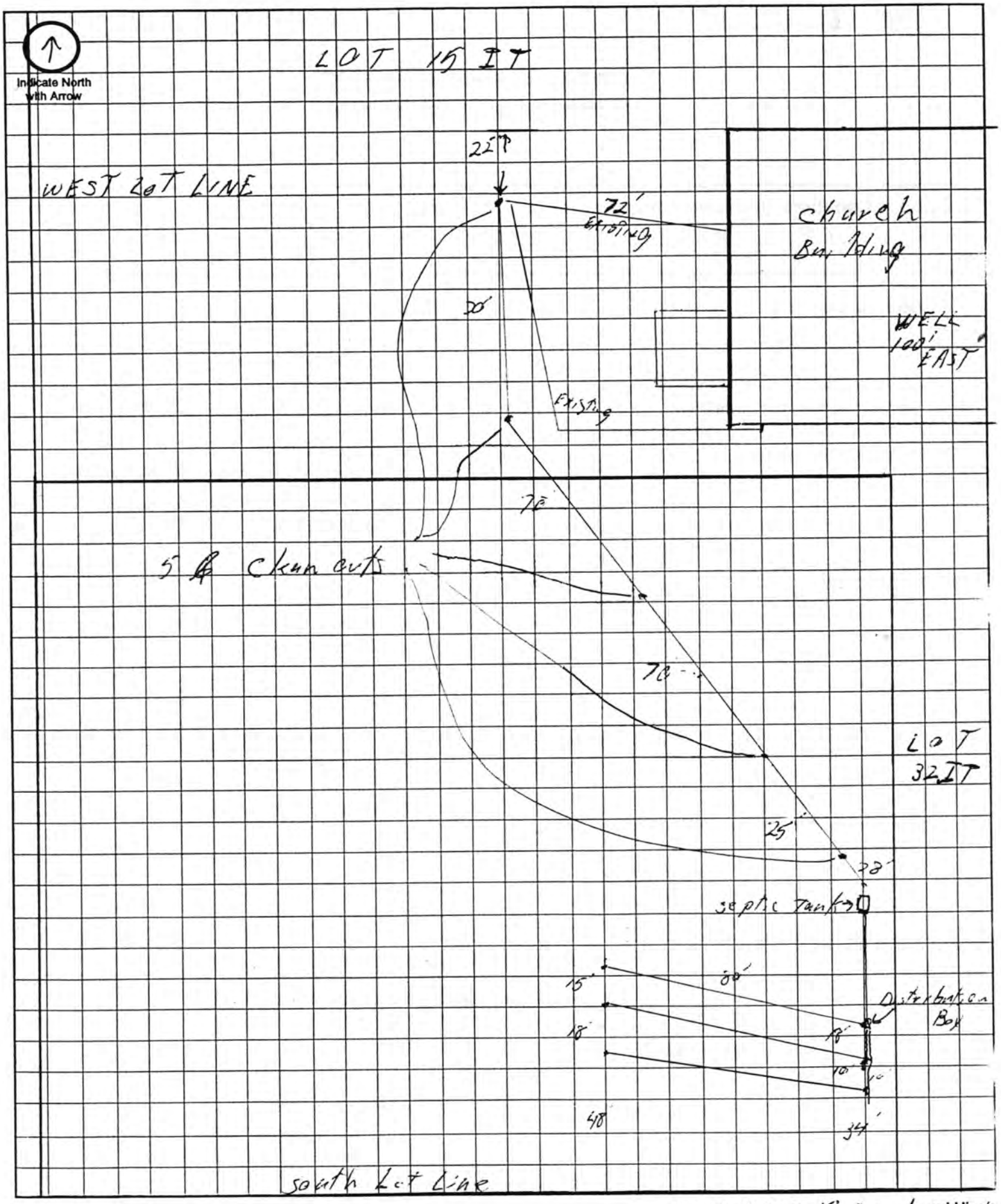


; 1 f. filtrator

as seen on
12-8-98
P.D.

N

As Built Drawing



Approximate Scale: 10 ft. = 1 grid line/s