# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

No. 95380130301

Permit
SEWAGE INSTALLATION

Issued 06/12/95
Expires 12/12/95
Revenue Code 18754

Establishment
CLARENCE GRENDAHL
13201 N 40 ST
DAVEY NE 68336

FEES: $150.00

TOTAL $150.00

Permittee
CLARENCE GRENDAHL
13201 N 40 ST
DAVEY NE 68336

Issued By M. Jane Ford
Health Director

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

REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

**Lincoln-Lancaster County**
**HEALTH DEPARTMENT**
3140 "N" STREET LINCOLN, NE 68510-1514

A

FILING FEE: $_____

FILE NO. _____

DATE: 06/05/95

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein: (SOUTH ½ OF THE SW¼ OF THE SW¼)

1. Legal description of property: Twp. 7N ; Range 8E ; Section 32 ;
   Block _____ : Lot _____ : Addition _____
   Street Address S/ 120th + GAGE RD

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

3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒ (LAGOON)

4. Distance to public sewer: UNKNOWN ft.

Clarence McCall (BUILDER)
Signature of Applicant (Owner or Lessee)

S/ 120th + GAGE RD
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 6/5/95 . Date Frwd. 6/6/95 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 6-6-95 . Date Frwd. 6-6-95 . ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer : Date Rec'd. 06/06/95 . Date Frwd. _____ . ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10-3-95 by: JC
Date: 10-4-95 by: DC
Date: 11/22/95 by: D.C.H.

Reschedule

guidance

INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/22/95 By: Jerold C. Hood

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

Made passed formal.

FORM 23 43

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

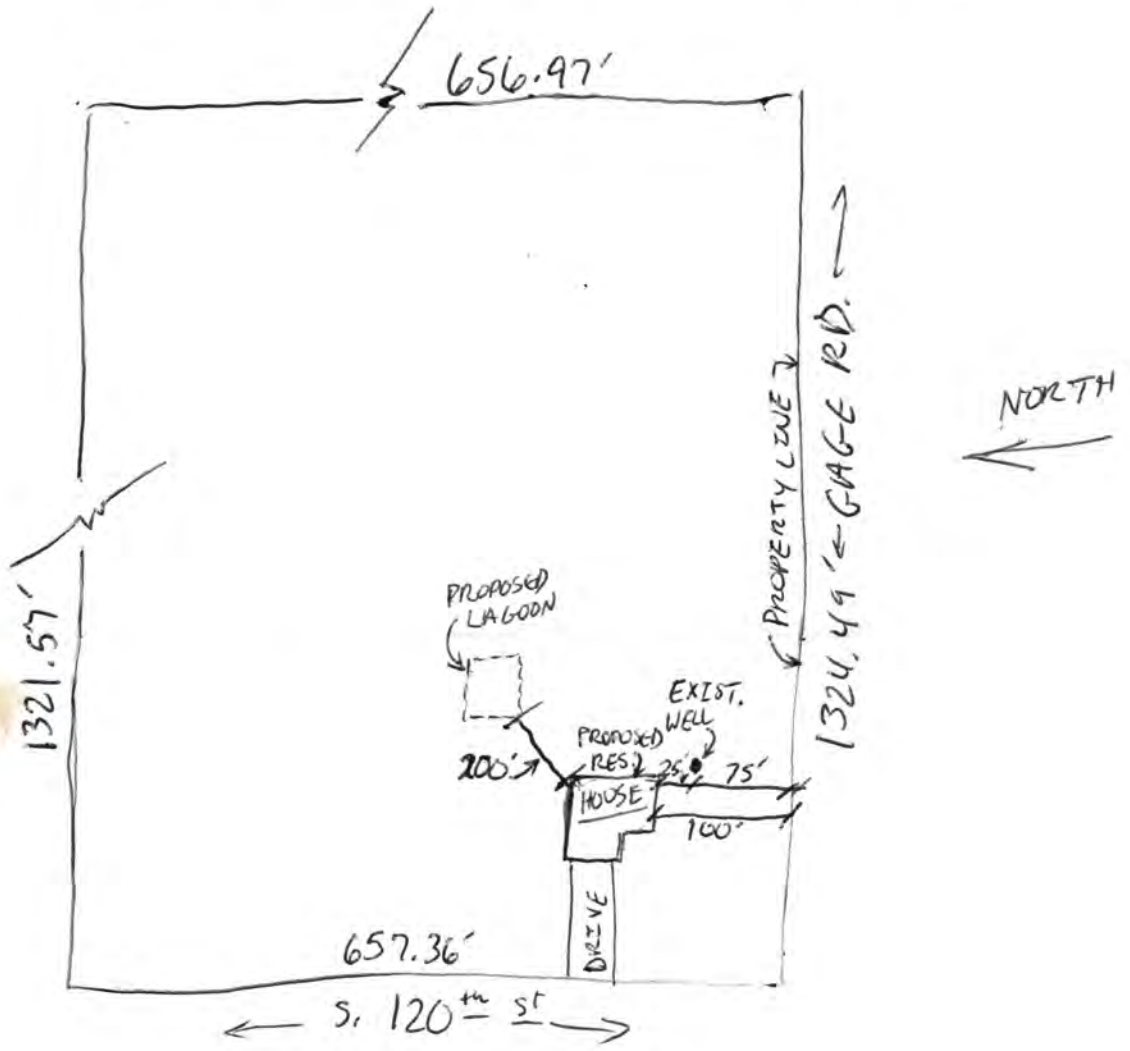
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

**C**

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.




REVIEWING ACTION

Remarks: _____

_____

Date: _____

Minimum Design Requirement
1. Capacity of Septic Tank _____ gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed _____ sq.ft.

_____
Signature of Reviewing Official

FORM 20105-0477
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: 471-7800

**B**

FILE NO. _____

PROPERTY WHERE SOIL TESTED: (SOUTH ½ OF THE SW ¼ OF THE SW ¼)

Location: Township 7N ; Range 8E ; Section & ¼ Section 32.
Property Dimensions: 657 ft. x 1324 ft. Area: 19.9 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 6-3-95 to 6-4-95. Weather: Precip. _____ Temp. 75°.

OWNER: Tim & Paula Bolander

Address: So. 120th & Gage

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~~ Rise (in.) | Percolation Rates (Min./in.) |
| 1 | 36in | 6/3 | 11:45 | 6/4 | 12:30 | 6/4 | 12:30 | 6in | 1:00 | 7 3/4in | 30min | 1 ¾" | (17.1) |
| 2 | 36in | 6/3 | 11:50 | 6/4 | 12:35 | 6/4 | 12:35 | 6in | 1:05 | 10 1/2in | 30min | 4 ½" | 6.7 |
| 3 | 36in | 6/3 | 11:55 | 6/4 | 12:40 | 6/4 | 12:40 | 6in | 1:10 | 8 1/4in | 30min | 2 ¼" | 13.3 |
| 4 | 36in | 6/3 | 12:00 | 6/4 | 12:45 | 6/4 | 12:45 | 6in | 1:15 | 7 1/2in | 30min | 1 ½" | 20 |
| 5 | 36in | 6/3 | 12:05 | 6/4 | 12:50 | 6/4 | 12:50 | 6in | 1:20 | 7in | 30min | 1" | 30 |
| 6 | 36in | 6/3 | 12:10 | 6/4 | 12:55 | 6/4 | 12:55 | 6in | 1:25 | 7 1/4in | 30min | 1 ¼" | 24 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

Clarence Trunkhill
Signature of Person Conducting Test

Sum of Percolation Rates: 111.1
Average of Rates: 18.5
Mean of Rates: _____

Address 13201 No/ 40th DAVEY 68336 Phone 430-0382

(Do not write below this line)

REVIEWING ACTION

Remarks: Lagoon would have to be sealed
Soil Type (SCS): _____
Date: June 6, 1995

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

Jerrold C. Hood
Signature of Reviewing Official

# Lincoln-Lancaster County Health Department

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

## 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 $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 2940 So 120 St Zip

Parcel ID 20 - 32 - 300 - 008 - 000 (i.e. 99-99-999-999-999)

Twp 8N Range 8E Section 32 1/4 SW 1/4 Block ___ Lot 11 Addition ___

Directions to Property 68th & S to 70th Rd, East to 120th, So. approx 1 mile East side

Location of Well Buried 50' from SE corner of house Tap Location: Inside ☐ Outside ☒

Location of Sewage System N of House 200' Year Installed 1995-1996

Site Hazards (dogs, etc.) 3 Dogs in kennel

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | Timothy, Rolanda | 2940 So. 120th | 791-2140 |
| Tenant/Buyer: | John & Teresa Shultz | | |
| Return to: | Tim Tagg | 710 So. 23 St Lincoln NE 68510 | 450-7034 434-3605 (Fax) |

Signature of Applicant ___ Address 1735 So. 27 Lincoln, NE Date 4 / 28 / 05

### HEALTH DEPARTMENT USE ONLY

**RECEIVED** Date 5 / 3 / 05 Amount $200.00 Check No. 16325 Initials ___

**DATA ENTRY** Date ___/___/___ Case No. ___ Initials ___

**PRELIMINARY STATUS--By** Gerald C. Hood **DATE:** 5 / 3 / 05

| **WATER SYSTEM:** | Approved | Disapproved |
|---|---|---|
| Construction | ☒ | ☐ |
| Bacteria | ☒ 0 /ml | ☐ ___ /ml |
| Nitrate | ☒ 0.4 ppm | ☐ ___ ppm |

| **SEWAGE SYSTEM** | |
|---|---|
| Approved | ☒ |
| Provisional | ☐ |
| Disapproved | ☐ |

**Additional Site Visits**

Date 5 / 9 / 05 by J.C.H

Date 5 / 13 / 05 by J.C.H

Date 5 / 16 / 05 by J.C.H

**Comments:** TWO TESTS SHOW BACTERIA IN WATER SUPPLY. ~~SEWAGE CONSTRUCTION PERMIT?~~

See Attached Letter ☐

### FINAL STATUS

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

Approved by Gerald C. Hood M.E.H.S. Date 5 / 18 / 05

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: 9-00

5/13/05 5/16/05

MAY 0 5 2005

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

**Laboratory Report Printed on: May 04, 2005**

**LLCHD**
**LINCOLN LANCASTER COUNTY HEALTH DEPT.**
**JOHN CHESS**
**3140 N STREET**
**LINCOLN, NE 68510**

## Laboratory Analysis For: PRIVATE COLIFORM

**Sample Comments:**

Laboratory Number: **P27361-15**
Sampled By: **JERROLD HOOD**
Location: **294000 S. 120TH ST**
Sample Point:

Date Collected: **03-May-2005 02:28 PM**
Date Received: **03-May-2005**

| Parameter | Results | Units | Method | Analysis Date | Analyst |
|---|---|---|---|---|---|
| TOTAL COLIFORM | **Total coliform present - does not meet bacteriological standards** | cfu/100ml | 9223B-PA | 05/04/05 | TW/JN |
| E. COLI | **E. coli absent** | cfu/100ml | 9223B-PA | 05/04/05 | TW/JN |

**Note: see reverse side of report for description of acronyms and data qualifiers**

**For inquiries on result interpretation call: (402) 471-6435.**

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

MAY 12 2005

**Laboratory Report Printed on: May 10, 2005**

**LLCHD**
**LINCOLN LANCASTER COUNTY HEALTH DEPT.**
**JOHN CHESS**
**3140 N STREET**
**LINCOLN, NE 68510**

## Laboratory Analysis For: PRIVATE COLIFORM

**Sample Comments:**

Laboratory Number: **P27361-16**
Sampled By: **JERROLD HOOD**
Location: **294000 S. 120TH ST**
Sample Point:

Date Collected: **09-May-2005 10:40 AM**
Date Received: **09-May-2005**

| Parameter | Results | Units | Method | Analysis Date | Analyst |
|---|---|---|---|---|---|
| TOTAL COLIFORM | **Total coliform present - does not meet bacteriological standards** | cfu/100ml | 9223B-PA | 05/10/05 | TW/JN |
| E. COLI | **E. coli absent** | cfu/100ml | 9223B-PA | 05/10/05 | TW/JN |

**Note: see reverse side of report for description of acronyms and data qualifiers**

**For inquiries on result interpretation call: (402) 471-6435.**

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

MAY 17 2005

**Laboratory Report Printed on: May 16, 2005**

**LLCHD**
**LINCOLN LANCASTER COUNTY HEALTH DEPT.**
**JOHN CHESS**
**3140 N STREET**
**LINCOLN, NE 68510**

## Laboratory Analysis For: PRIVATE COLIFORM

**Sample Comments:**

Laboratory Number: **P27361-6**
Sampled By: **JERROLD HOOD**
Location: **29400 SOUTH 120TH ST**
Sample Point:

Date Collected: **13-May-2005 11:35 AM**
Date Received: **13-May-2005**

| Parameter | Results | Units | Method | Analysis Date | Analyst |
|---|---|---|---|---|---|
| TOTAL COLIFORM | **Total coliform absent - meets bacteriological standards** | cfu/100ml | 9223B-PA | 05/14/05 | TW/JN |
| E. COLI | **E. coli absent** | cfu/100ml | 9223B-PA | 05/14/05 | TW/JN |

**Note: see reverse side of report for description of acronyms and data qualifiers**

**For inquiries on result interpretation call: (402) 471-6435.**

Nebraska Health and Human Services
Regulation and Licensure - Laboratory Services
3701 S 14th Street
Lincoln, NE 68502
402-471-2122
402-471-2080 (fax)

MAY 1 8 2005

**Laboratory Report Printed on: May 17, 2005**

LCHD
LINCOLN LANCASTER COUNTY HEALTH DEPT.
JOHN CHESS
3140 N STREET
LINCOLN, NE 68510

**Laboratory Analysis For: PRIVATE COLIFORM**
**Sample Comments:**

Laboratory Number: **P27361-7**
Sampled By: **JERROLD HOOD**
Location: **29400 S 120TH**
Sample Point:

Date Collected: **16-May-2005 02:05 PM**
Date Received: **16-May-2005**

| Parameter | Results | Units | Method | Analysis Date | Analyst |
|---|---|---|---|---|---|
| TOTAL COLIFORM | **Total coliform absent - meets bacteriological standards** | cfu/100ml | 9223B-PA | 05/17/05 | TW/JN |
| E. COLI | **E. coli absent** | cfu/100ml | 9223B-PA | 05/17/05 | TW/JN |

**Note: see reverse side of report for description of acronyms and data qualifiers**
**For inquiries on result interpretation call: (402) 471-6435.**

# Lancaster County

County Assessor/Register of Deeds
Property Information

InterLinc

## Parcel Identification No: 20-32-300-008-000

| | |
|---|---|
| **Taxing District:** | 0063 RURAL |
| **Property Class:** | RGBA RURAL FARM IN GREENBELT |
| **Neighborhood:** | 3800 MARKET AREA EIGHT |
| **Situs Address:** | 29400 S 120 ST RURAL |
| **Final Value Summary for Tax Year 2004** | |
| **Total Value:** | 152,328 |

**Property Owner:**

BOLANDER, TIMOTHY P & PAULA N
29400 S 120 ST
FIRTH NE 68358

**Legal Description:**

LOT 11 SW 32-7-8



**Click Photo to Enlarge**

**Sale History:**

| Instrument # | Sale Date | Sale Pri |
|---|---|---|
| 95-013396 | 05/08/1995 | 20,950 |

Land and Miscellaneous

Residential Information Display Building 01

Building Sketch Display Building 01

Map

Treasurer's Information

County Assessor Property Information