# LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit
SEWAGE SYSTEM REPAIR

No. 94390042601

Issued 11/22/94
Expires 05/22/95
Revenue Code 18754

Establishment
SANDRA MEINKE
T8N R5E SEC 28

FEES: $50.00

TOTAL $50.00

Permittee
SANDRA MEINKE
RR0001
BOX 0111A
CRETE NE 68333

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"**

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: 471-7800)

FILE NO. _____

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

DATE: 11-22-94

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. 8N ; Range 5E ; Section 28 ;
Block _____ ; Lot _____ ; Addition _____
Street Address Route 1, Box 111A, Crete, NE 68333

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

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

4. Description of proposed alteration, extension or repair: Changed to lagoon.

5. Work to be done by: Owner ☐ ; or Contractor ☒ , Sudrla, Exeter, NE
Contractor's Name

6. Estimated cost of project:

| | | |
|---|---|---|
| a. Materials | $ | >560.73 |
| b. Labor | $ | |
| c. Other Dig lagoon | $ 200 00 | |
| TOTAL | $ 760 73 | |

Sandra Meinke
Signature of Applicant (owner or lessee)

RFD 1, Box 111A, Crete, NE 68333
Address

(Do not write below this line)

REVIEWING ACTION

1. Date Rec'd: _____
Filing Fee: $ 50.00

2. Site Visits:
Date: 11/15/94 by: J. C. H.
Date: 11/21/94 by: J. C. H.
Date: _____ by: _____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/1/94 by: J. C. Hood

# Lincoln-Lancaster County Health Department

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

## REAL ESTATE TRANSFER/LOAN APPROVAL FORM

This form must be completed and returned 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.

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

Legal Description of Property: Street Address Rt. 1 Box 111A, Crete, NE 68333

Twp 6 Range N 5 Section 29 1/4 SW 1/4 Block ___ Lot ___ Addition ___

Directions to Property South on Hwy. 77 out of Lincoln. At Hwy. 33 turn west to Crete. Go to S.W. 114th St. (Just over a hill.) Turn south 9/10 to W. Sprague Rd. At W. Sprague Rd or blinking light, turn left.

Location of Well Behind house, behind bush, West of single garage Tap Location: Inside ☐ Outside ☒

Location of Sewage System East of mound of dirt by double car garage. By little pole. Year Installed Fall 1972-Early 1973

| | NAME | ADDRESS | PHONE |
|---|---|---|---|
| Present Owner: | Sandra A. Meinke | Rt. 1 Box 111A Crete, NE 68333 | 402-826-5641 |
| Tenant/Buyer: | Larry & Susan Wackel | 436 E. 6th St Crete, NE 68333 | 402-826-4685 |
| Return to: | Charlotte I. James | 140 E. 6th St. Crete, NE 68333 | 402-826-3988 |

Signature of Applicant Larry R Wackel Address 436 E. 6th St. Crete, NE 68333 Date 11/2/94

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**HEALTH DEPARTMENT USE ONLY**

Date Received 11/4/94 Received $150.00 Check ☒ Cash ☐

**PRELIMINARY STATUS--By** Jerrold C. Hood **DATE:** 11/4/94

| **WATER SYSTEM:** | Approved | Disapproved |
|---|---|---|
| Construction | ☒ | ☐ |
| Bacteria | ☒ 0 /ml | ☐ ___ /ml |
| Nitrate | ☒ <0.1 ppm | ☐ ___ ppm |

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

**Additional Site Visits**
Date 11/15/94 by L.C.H.
Date 11/21/94 by L.C.H.
Date ___/___/___ by ___

**Comments:** EVIDENCE OF SEWAGE LEAKAGE AT END OF SEPTIC LATERAL Corrected 11/21/94 L.C.H.

See Attached Letter ☐

**FINAL STATUS**

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

Approved by Jerrold C. Hood R.E.H.S. Date 11/22/94

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.

# WATER MICROBIOLOGY

STATE LAB NO. 1427751

COMPLETE INFORMATION BELOW

DATE COLLECTED 11 (MO) 4 (DAY) 94 (YEAR) 11:2 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION SANDRA MEINKE

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SW SECT 28 TWNSHP 8 N RANGE 5 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

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

FOR LABORATORY USE ONLY

TEST METHOD: X MEMBRANE FILTER ☐ MPN

## COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

X THE WATER MEETS BACTERIOLOGICAL STANDARD

☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD

☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*

*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

SAMPLE NOT ANALYZED BECAUSE OF:

☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT

☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY CC

FOR ACCOUNTING USE ONLY

LWB 91

RECEIVED '94 NOV -4 P12:18

REPORTED '94 NOV -5 P2:19

'94 NOV -9 A8:30 REPORTED

'94 NOV -4 P12:18 RECEIVED

# WATER CHEMISTRY

STATE LAB NO. 1518570

COMPLETE INFORMATION BELOW

DATE COLLECTED 11 (MO.) 4 (DAY) 94 (YEAR) 11:21 A.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION SANDRA MEINKE

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR SW SECT 28 TWNSHP 8 N RANGE 5 E

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
3140 "N" STREET
LINCOLN, NEBRASKA 68510

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

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:
☐ INSUFFICIENT AMOUNT ☐ DAMAGE ☐ IMPROPER CONTAINER

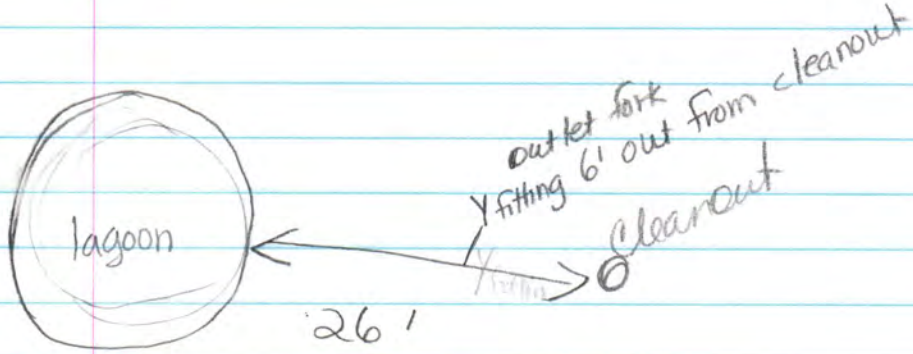
TEST(S) BY DWZ

FOR ACCOUNTING USE ONLY

LWN 88

Mr. Sudrla 826-2413

Cleanout to outlet at lagoon - 26 ft.
There is a Y fitting 6'




Sudrla put in 2 cleanouts this time.
First one, right where old tank - approx. 60' from sewer located at the middle north wall of house. Approx. 50' from house.

2nd one, at the lagoon, on the east side, along ridge of lagoon.

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There is another 3rd cleanout from previous.