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. 395-C

DATE: 4 Mar 74

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. 8N ; Range 6E ; Section 12 ; Block 2 ; Lot 4 ; Addition Wilderness Park Estates 1st Addition.
   Street Address _____.

2. Property Use: Residential yes ☐ ; Commercial _____ ☐
   No. of Bedrooms 4
   Describe: _____
   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).

Carmi Spicer
Signature of Applicant (owner or lessee)

750 West B Lincoln Nebr
Address

(Do not write below double line)

REVIEWING ACTION

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

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

3. Date: 3/13/74 Approved ☒ ; Disapproved ☐
   by: Jerrold C. Hood

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

✕ APPARENTLY COVERED WITHOUT INSPECTION.

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. 395-C

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

DATE: 3 March 74

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. 8N ; Range 6E ; Section 2
Block 2 ; Lot 4 ; Addition Wilderness Park Estates First Addition
Street Address _____

2. Property Use: Residential Yes ☐ ; Commercial _____ ☐
No. of Bedrooms 4 . Describe: _____
Other Use _____ ☐
Describe: _____

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

4. Distance to public sewer: _____ ft.

Carmi Olivier
Signature of Applicant (Owner or Lessee)

750 West B Lincoln Nebr
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/13/74 . Date Frwd. 3/13/74 . 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. 3-13-74 . ACTION: Approved ☑ Disapproved ☐ Signature: Walter Hoppe

REMARKS OR REASONS FOR DISAPPROVAL _____

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

Phil Tx

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. 395-C

PROPERTY WHERE SOIL TESTED:
Location: Township Wilderness Park Estates; Range _____
Section & ¼ Sect. _____
Property Dimensions: 208 ft. x 648 ft.
Area: 3.1 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay [X]; Silty Clay Loam [ ]; Sandy Loam [ ]
Silty Loam [ ]; Clay Loam [ ]; Sandy Clay [ ]

Owner: Carmi D Spicer
Address 750 West B Lincoln

Dates of Tests: 8 Mar 74 to 9 Mar 74. Weather: Precip. ____ Temp. 50 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	30	8 Mar	5 pm			9 Mar	3 pm	6"	7 pm	1½	240	11¼	21.3/1
2	30	"	"			"	"	"	"	1	240	8¾	27.4/1
3	30	"	"			"	"	"	"	1	240	8	30/1
4	30	"	"			"	"	"	"	½	240	7½	32/1
5	30	"	"			"	"	"	"	¾	240	6	40/1
6	30	"	"			"	"	"	"	1	240	8½	28.2/1

Sum of Percolation Rates 178.9/6
Average of Rates: 29.8/1
Mean of Rates: 28.9/1

Carmi D Spicer
Signature of Person Conducting Test

Address 750 West B
Phone: 432-9302

(Do not write below this line)

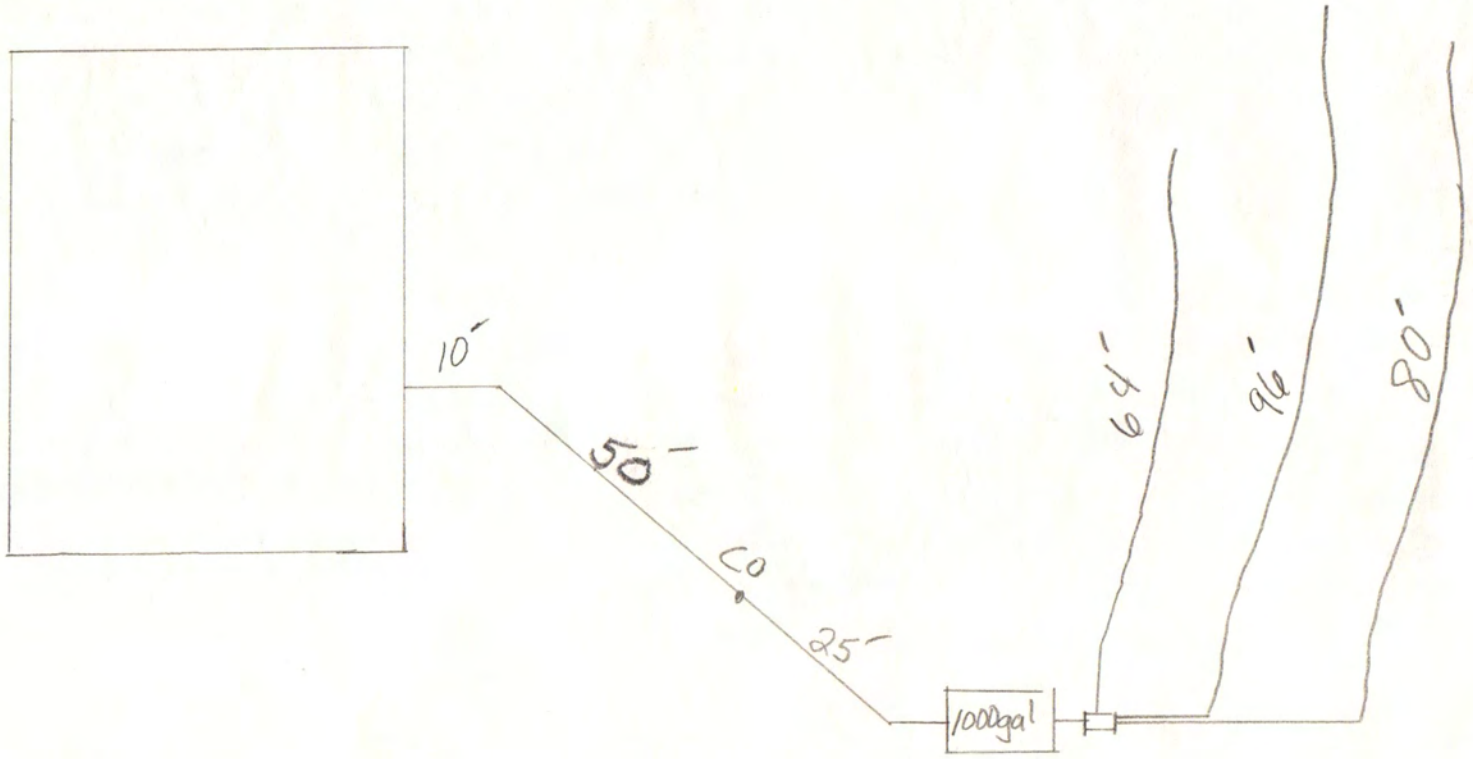
REVIEWING ACTION

REMARKS: _____

Approved Percolation Rate(s)
A. 29.8 min./inch
B. _____ min./inch
C. _____ min./inch

DATE: March 13, 1974

Gerrold C. Hood
Signature of Reviewing Official



11700 South 7th

Spicer Residence

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. 395-C

SPECIFICATIONS

DATE: 4 Mar 74

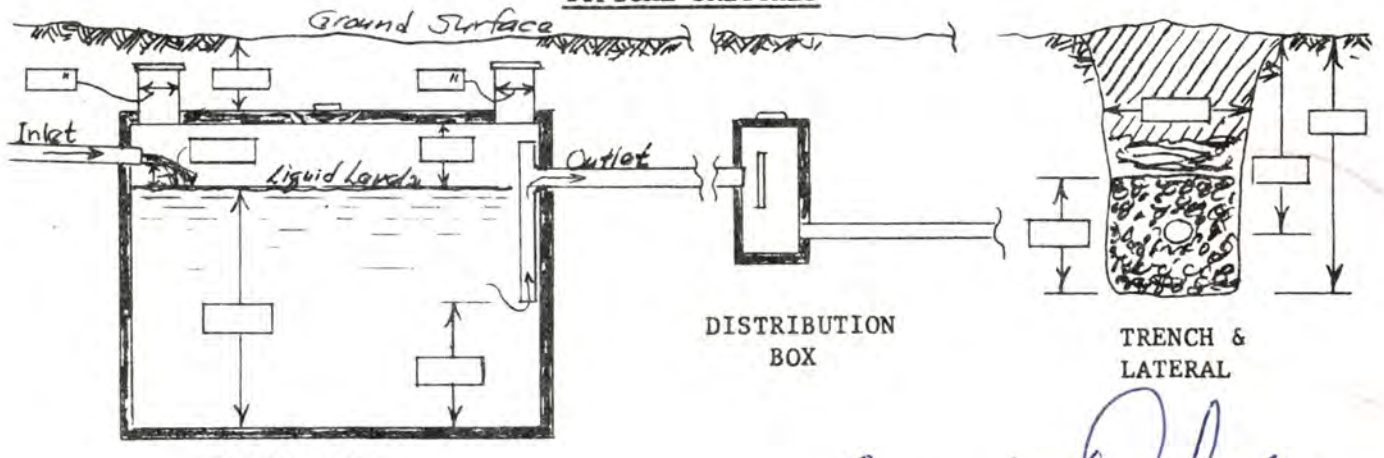
A. BUILDING SEWER:
1. Material Cast Iron; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 50 ft.
4. Number of clean-outs 2.
5. Distances To:
Well or Suction Line 100 ft.;
Stream None ft.; Pressure Line None ft.;
Property Line 25 ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Cement; No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth ___ in.
3. Factory Built: Yes ☒ (Company _____)
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 12 in.
8. Distances To:
Well or Suction Line 100 ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

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

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Cement ½ rounds 18"
2. Lateral Lines: Depth below grade 12 in.
Number 3; Length of each line 52 ft
Total length of Laterals 250 ft.;
Slope ___ in/100 ft. Diameter of pipe 18 in.; Shape half round
Material: concrete ☒; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines 8 ft.
3. Trench Dimensions: Depth 36 in.;
Width 48 in.
4. Filter Material: gravel.
Depth of material from trench bottom 6 in.
5. Distances To:
Well or Suction Line 150 ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line ___ ft.
6. Percolation Rate: _____ minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

Carmi Officer
Signature of Applicant

FAXed

Lincoln-Lancaster County Health Department

JUN 22 2005

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 11700 S 7th ST Roca 68430

Parcel ID 08-02-200-014-000 (i.e. 99-99-999-999-999)

Twp 8N Range 6E Section 2 1/4 1/4 Block 2 Lot 4 Addition 1st Add Wilderness Park Estates

Directions to Property Hwy 77 South to Saltillo Rd, West on Saltillo to S. 7th. South on S 7th to Address 15'-20' by Some bushes

Location of Well North Side of House Tap Location: Inside ☑ Outside ☐

Location of Sewage System Septic in Back yard by Windmill Year Installed ?

Site Hazards (dogs, etc.) Friendly Dog

	NAME	ADDRESS	PHONE
Present Owner:	Stephen Kuligowski	11700 S 7th ST Roca	429-2122
Tenant/Buyer:	Lorend Brenda Skala	(In Transit)	
Return to:	Cindi Hahn	7141 A ST Lincoln, NE 68510	730 5871 (Fax)

Signature of Applicant Loren Skala Address 3711 Faulkner Dr Apt 116, Lincoln 68516 Date 20 Jun 05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 6/22/05 Amount $200.00 Check No. 2903 Initials

DATA ENTRY Date / / Case No. Initials

PRELIMINARY STATUS--By Doug Lincoln **DATE:** 6/24/05

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ /ml
Nitrate	☑ 0.1 ppm	☐ ppm

SEWAGE SYSTEM	
Approved	☑
Provisional	☐
Disapproved	☐

Additional Site Visits

Date / / by

Date / / by

Date / / by

Comments:

See Attached Letter ☒

FINAL STATUS

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

Approved by Doug Lincoln Date 6/29/05

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

003

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800 Lincoln, Nebraska 68502

REAL ESTATE TRANSFER

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: October 27, 1992

☐ Evaluation of the Sewage Disposal System ☐ Enclosed is $45.00 $75.00

Legal description of property: TWP. 8N ; RANGE 6E ; SECTION 2

BLOCK 2 ; LOT 4 ; ADDITION Wilderness Park 1st Addition

Street Address Rt. #1, Box 53H, Roca, NE 68430

Directions to Property 1/3 mile west of Hwy 77 and Saltillo Rd to South 7th St. then South on South 7th; 3rd house on left (east) - 2 story blue house.

Location of Well 15 to 20 feet North of house Tap Location: Inside ☐ Outside ☐ (South Faucet on East Wall)

Location of Sewage System Approx. 115 feet Southeast of house Year Installed 1974 est.

	NAME	ADDRESS	PHONE
Present Owner:	Stephen and Arlene Kulikowski	Rt. 1, Box 553H, Roca, NE 68430	421-3216 no. 474-4302 wo.
Tenant/Buyer:	N/A Refinance		
Return To:	First Commerce Savings, Inc. ATTN: Mark Haley	3935 South St., Lincoln, NE 68506	434-4845

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

Signature of Applicant Stephen P Kulikowski Address Rt. #1, P.O. Box 53H Roca, NE 68430

HEALTH DEPARTMENT USE ONLY

Date Received 10-27-92 LH Received $45.00 Check ☐ Cash ☐

PRELIMINARY STATUS--DATE OCTOBER 27 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☐	Date 10/27/92 by
Bacteria	☒	☐	Provisional:	☐	Date by
Nitrate	☐	☐	Disapproved:	☐	Date by

Comments: PROBABLY WISE TO FILL IN SUNKEN SPOTS OVER LATERAL TO KEEP SURFACE WATER FROM STANDING ON THEM. IF SYSTEM HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: SEWAGE DISPOSAL SYSTEM:

Approved: ☐ Approved: ☐ Provisionsal Approval: ☐

APPROVED BY DATE

FN 20215-1079R
FORM 23-9

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE TO BE COLLECTED AND MAILED ON:

MO. _____ (2-3) DAY _____ (5) SAMP/DAY _____ (6-7)

ACCOUNT NO. _____ (8-22) ADD. TESTS 2 (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL. 10/27/92 3:06 P.M. (9-16) MO./DAY/YR./HOUR BY J. C. Hood (17-28)

ADDRESS OR LOCATION BLK 2, LOT 4, WILDERNESS PARK 1ST ADD, SEC. 2, T8N, R6E (29-41)

NAME AND ADDRESS OF OWNER STEPHEN KULIGOWSKI

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 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. 26533 (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 dw (76-79)

IN 92 OCT 27 P3:29

OUT 92 OCT 28 P2:38

WATER CHEMISTRY

STATE LAB NO. 155735

COMPLETE INFORMATION BELOW

DATE COLLECTED 10 (MO) 27 (DAY) 92 (YEAR) 3:05pm. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION STEPHEN KULIGOWSKI

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NW SECT 2 TWNSHP 8 N RANGE 6 E

NAME AND ADDRESS OF PERSON TO [illegible] EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS

THIS LAB REPORT IS TO BE MAILED TO:

LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

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 0.3 mg/l

NOT TESTED BECAUSE OF:
☐ DAMAGE
☐ INSUFFICIENT AMOUNT
☐ IMPROPER CONTAINER

TEST(S) BY RT
FOR ACCOUNTING USE ONLY

LWN 88

REPORTED '92 OCT 28 P6:07

RECEIVED '92 OCT 22 P3:29