LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2676-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

NOVEMBER 30, 1988 — THIS PERMIT EXPIRES

DENNIS E. FLESNER — ISSUED TO

3201 PIONEERS BLVD. LINCOLN, NE 68502 — ADDRESS

T8N; R6E; Sec 10; lot Part 1; ½ Mi. So. of W. Bennet Rd on SW 14, E Side
LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE ALTER, EXTEND OR REPAIR

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

RS

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: 471-7800)

FILE NO. 2676-C

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

DATE: 5-31-88

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: ~~See attachment~~ Twp. 8N ; Range 6E ; Section 10 ;
Block ____ ; Lot PART 1 ; Addition ____
Street Address ½ mile So. of W. Bennet Rd. on S.W. 147th east side of Road.

2. Property Use: Residential X ☒; Commercial ____ ☐
No. Bedrooms 4 Describe ____
Other Use ☐
Describe ____

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

4. Description of proposed alteration, extension or repair: Install new Lagoon

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

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$ 1800.00

Dennis E. Flesner
Signature of Applicant (owner or lessee)

3201 Pioneers Blvd. 68502
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: 6/20/88 by: J.C.H.
Date: ____ by: ____
Date: ____ by: ____

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 6/23/88 by: J.C. Noel

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

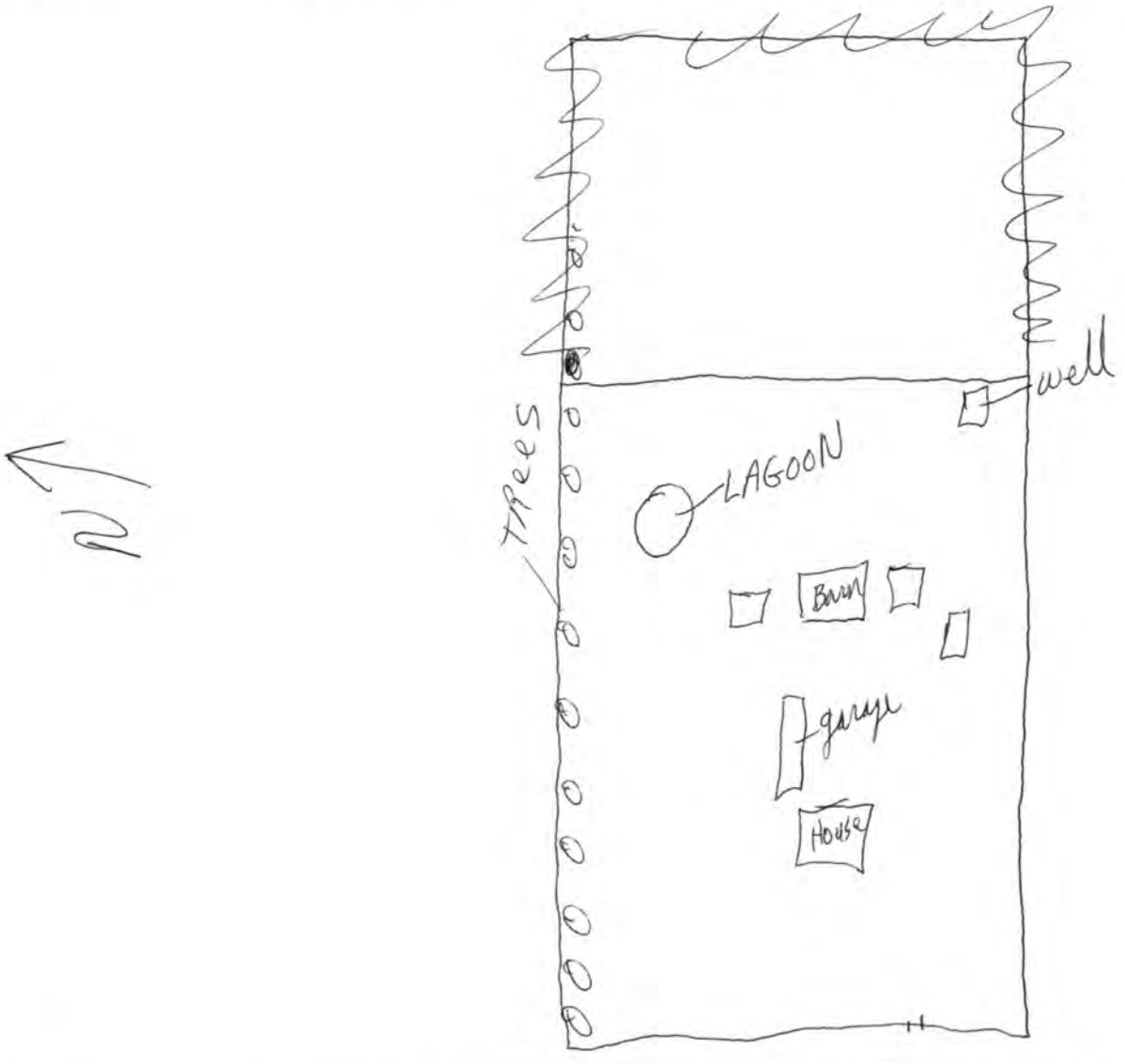
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. 2676-C

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



REVIEWING ACTION

Remarks: Lagoon must be sealed off.

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.

Gerrold C. Hood
Signature of Reviewing Official

2676-C

That part of Lot 1, Irregular Tract in the South 1/2 of the Northwest 1/4 of Section 10, Township 8 North, Range 6 East of the 6th P.M., Lancaster County, Nebraska, more particularly described as follows to wit:

Considering the West line of the Northwest 1/4 to bear North 0 degrees 00' 00" East, all other bearings used herein relative thereto;

Beginning at a point on the South line of the said Northwest 1/4, said point being 50.00' Easterly distant from the Southwest Corner of the Northwest 1/4 of said Section 10; thence along the East right-of-way of Southwest 14th Street North 0 degrees 00' 00" East 567.87; thence parallel to the South line of said Northwest 1/4 North 88 degrees 35' 08" East 680.50'; thence parallel to the West line of said Northwest 1/4 South 0 degrees 00' 00" West 567.87'; to a point on the South line of said Northwest 1/4; thence along the said South line South 88 degrees 35' 08" West 680.50 feet to the Point of Beginning.

FORM CONTROL NUMBER 24723

LANCASTER COUNTY
CASH RECEIPT

PAGE 1 OF 1

TRANSACTION CODE	C	R	CASH RECEIPT NUMBER	DATE OF DEPOSIT	ACCOUNTING PERIOD	BUDGET FY
			30221	M M D D Y Y: 05 31 88	M M Y Y	YY: 88

ACTION: [✓] ORIGINAL ENTRY (E) [ ] ADJUSTMENT (M)

BANK ACCOUNT: 111

OFFSET CASH ACCOUNT:

COMMENTS: L. & L. Co. Health Dept.

REFERENCE INVOICE NUMBER	REFERENCE INVOICE LINE NO.	FUND	AGENCY	ORGANIZATION	SUB ORG	ACTIVITY	REVENUE SOURCE	SUB REV SRCE	JOB NUMBER	REPT. CATEG	BAL SHEET ACCT.	OBJECT	SUB-OBJ	VENDOR/ PROVIDER	AMOUNT	INC./ DEC IND	P/F IND
		011	999				2559								30 00		
DESCRIPTION: Sewer permit																	
DESCRIPTION																	
DESCRIPTION																	
DESCRIPTION																	
DESCRIPTION																	
DESCRIPTION																	
DESCRIPTION																	

TOTAL 30 00

PREPARED BY: NAME _____ TITLE _____ DATE _____

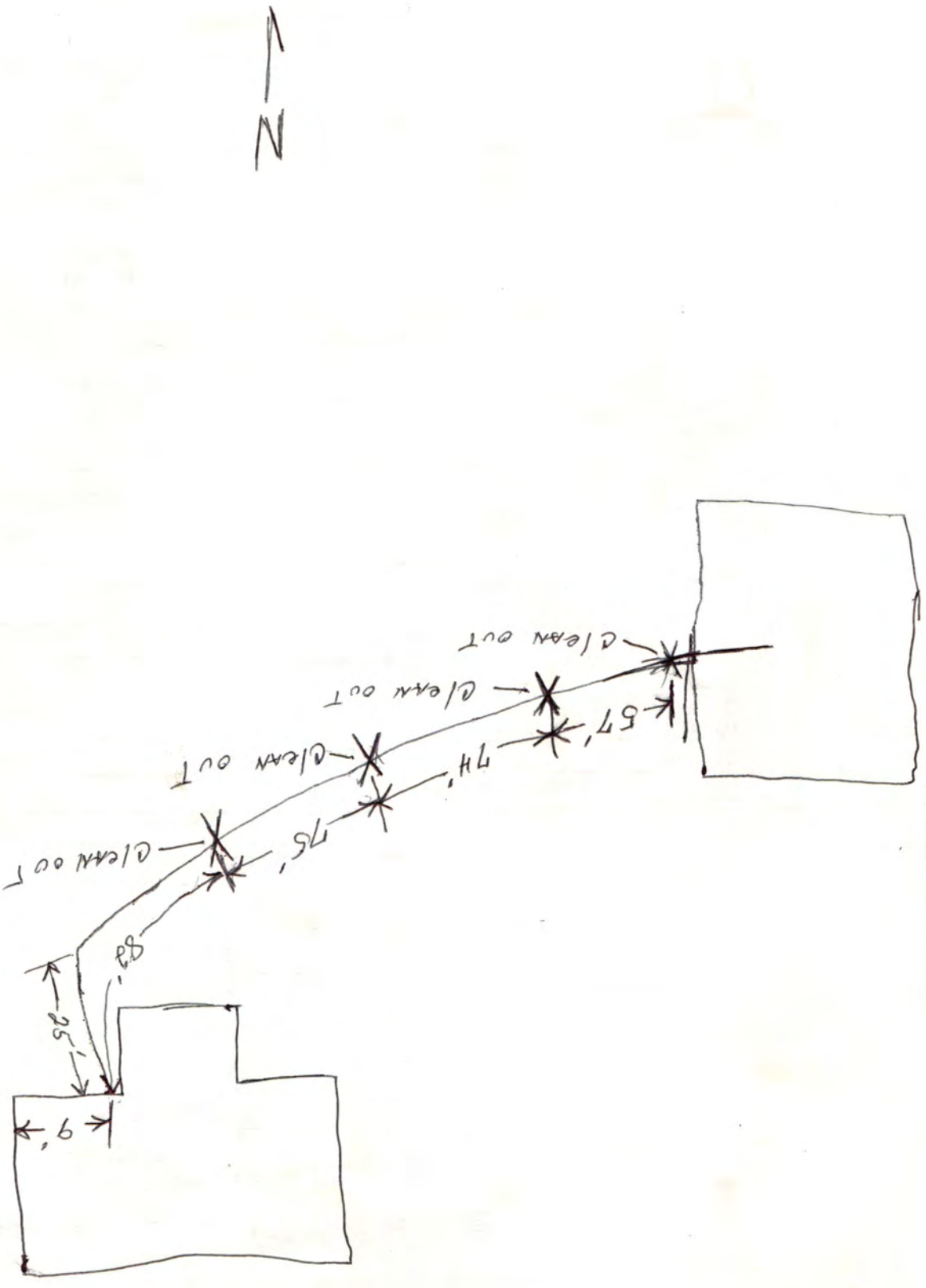
APPROVED BY: NAME _____ TITLE _____ DATE _____

APPROVED BY: NAME Stohs TITLE _____ DATE 5/31/88

ORIGINAL

AS BUILT DRAWING OF SYSTEM

DATE 6-20-88 INSTALLER Capital City Trenching



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

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

NON TRANSFERABLE

PERMIT

Permit No. 98390059701

SEWAGE SYSTEM REPAIR
SEWAGE REPAIR-NEW SEWER PIPE TO LAGOON

Issued 10/02/98
Expires 04/02/99
Revenue Code 3157

Establishment
CRAIG A GIFFORD
T8N R6E SEC 10 QTR NW
LOT 5
13652 SW 14 ST-ROCA

FEES: $50.00

PAID

Permittee
CRAIG A GIFFORD
13652 SW 14 ST
ROCA NE 68430

TOTAL $50.00

Issued By Health Director
Lincoln-Lancaster County Health Department

008168

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

Individual Sewage Disposal System
Application to Alter, Extend or Repair

☐ Municipal Code 24.38 ☒ County Resolution Number 2832

Date: 9-22-98	File No.: 983900597

The undersigned hereby applies for a permit to: ☒ **ALTER** ☐ **EXTEND** ☐ **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:** CR 3785
   Township 8 Range 6 Section 10 1/4 Section NW
   Block ____ Lot 5 Addition ____
   Street Address 13652 SW 14th, Roca NE 68430

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 Describe ____

3. **Type of Present Individual Disposal System:** ☐ septic tank ☒ lagoon ☐ other

4. **Description of proposed alteration, extension or repair:** New sewer pipe to old lagoon. New pipe is from new residential construction

5. **Work to be done by:** ☐ owner ☒ contractor's name Larry Schwark

6. **Estimated project:** a. Repair, replace or minor extension with a cost of less than $400.00 (no fee required).
   b. Total cost is greater than $400.00 (Return fee with this application).
   c. A "construction permit" is required if the use, operation, location, or type of the system is being changed.

Print Name Craig A. Gifford Address 13652 SW 14th Roca, NE Phone 794-4001
Applicant Signature (owner or lessee) Craig A. Gifford

Please include the permit fee ($50.00) with this application

(Please do not write below this line)

Date rec'd 9-22-98 REVIEW: ☒ approved ☐ disapproved By: Jerrold C. Hood

Site visits:
Date 9-22-98 By ____
Date 6/4/99 By L.C.H.
Date ____ By ____

Installation final written approval
Date 6/4/99 By Jerrold Hood JC

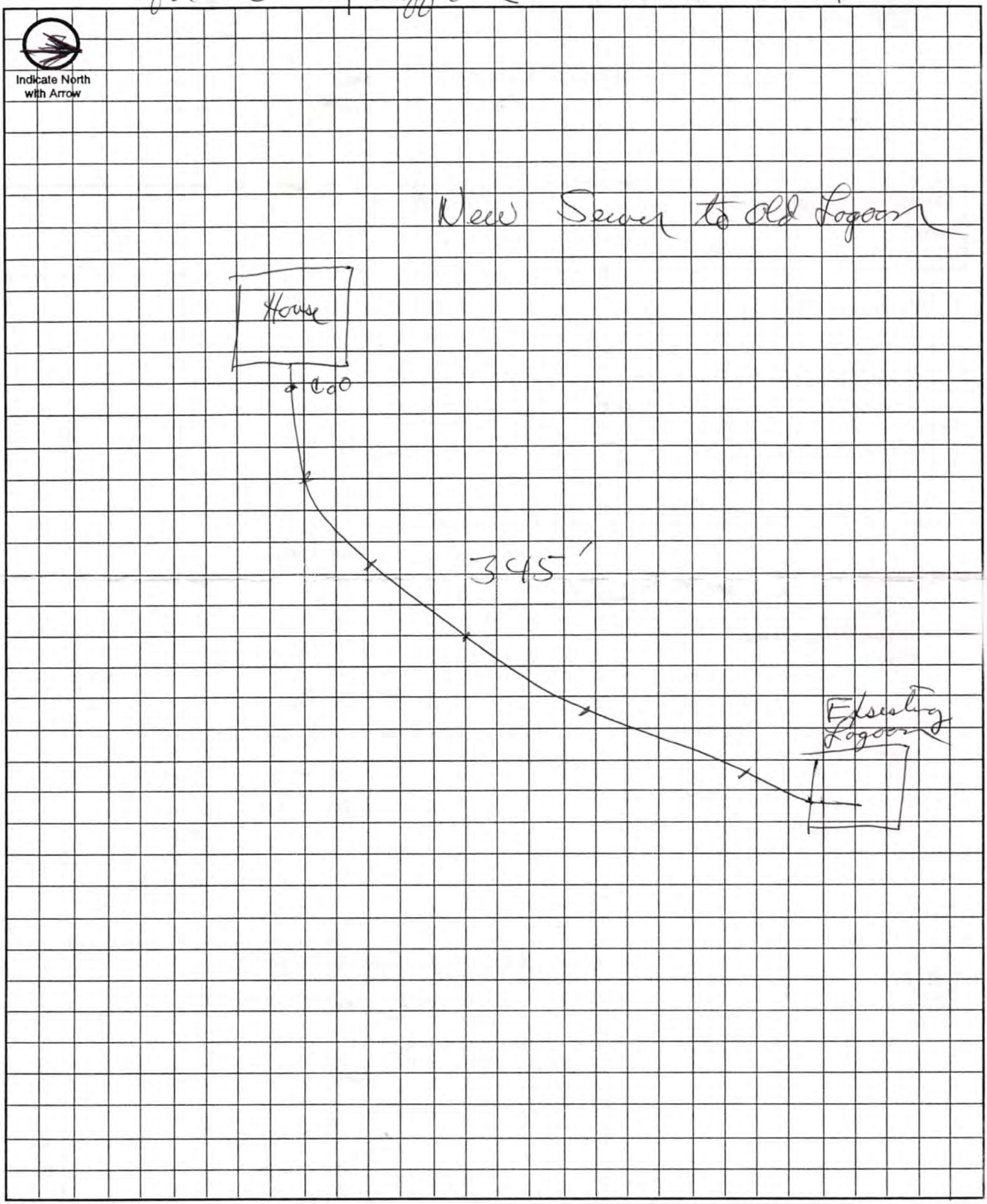
Return to: Lincoln-Lancaster County Health Department - Environmental Health Division
3140 "N" Street, Lincoln, NE. 68510
441-8022

9/23/98
CK #4776
$50.00
CW

White - EH Pink - Business Office Revised 1/98

As Built Drawing by Larry Schwank

for Craig Gifford 13600 SW 14th



Approximate Scale: _____ ft. = _____ grid line/s

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LOAN

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: April 8, 1991

☒ Evaluation of the Sewage Disposal System ☑ Enclosed is $150.00

Legal Description of Property: TWP. 8N; RANGE 6E; SECTION 10; BLOCK ____

LOT ____; ADDITION _____; Street Address 13650 SW 14th

Directions to Property 1½ mile north of Centerville filling station, on east side of road.

Location of Well SE of house Tap Location: Inside ☐ Outside ☑

Location of Sewage System east of house Year Installed 1988

	NAME	ADDRESS	PHONE
Present Owner:	Dale + Patricia Kugler	13650 SW 14th	794-4764
Tenant/Buyer:	Craig + Holly Bifford	5700 Abbey Ct - apt. #56	464-4245
Return to:	Lee Sittler	225 No. Cotner - 68505	467-4663

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

Signature of Applicant Lee Sittler Address Home RE (225 no. Cotner)

==========

HEALTH DEPARTMENT USE ONLY

Date Received April 8, 1991 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE April 8, 1991

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:	
Construction	☒	☐	Approved:	☐	Date 4/8/91	by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 4/17/91	by J.C.H.
Nitrate	☒	☐	Disapproved:	☒	Date _____	by ____

Comments: NEED WEEDS REMOVED & MOWED & CATAILS KILLED OUT. WARNING SIGNS NEED RETOUCHING. Corrected 4/17/91 Very good job. J.C.H. See Attached Letter ☐

FINAL STATUS

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

APPROVED BY Jerrold C. Hood R.S. DATE April 17, 1991

Approval or disapproval is based on written 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 operation. WELLS - Nebraska Safe Drinking Water Act,
- Standards for A Private Well in Nebraska

FG.4120 INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE TO BE COLLECTED AND MAILED ON:

MO. ____ (2-3) WK. ____ (4) DAY ____ (5) SAMP/DAY ____ (6-7)

ACCOUNT NO. ____ (16-22) ADD. TESTS 2 (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL. 4/8/91 1:41pm (9-16) MO./DAY/YR./HOUR BY J. C. Hood (17-28)

ADDRESS OR LOCATION SEC. 10, T8N, R6E NW¼ (29-41)

NAME AND ADDRESS OF OWNER DALE KUGLER
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. 6969 (44-47)

DATE EXAMINED ____ (48-53)

COLIFORM 3 (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 ET (76-79)

IN APR -8 P3:15 '91

OUT APR -9 P12:59

WATER CHEMISTRY

STATE LAB NO. 15 2338

COMPLETE INFORMATION BELOW

FOR LABORATORY USE ONLY

DATE COLLECTED 4 (MO.) 8 (DAY) 91 (YEAR) 1:44 P.M (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION DALE KUGLER

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NW SECT 10 TWNSHP 8 N RANGE 6 E

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N less than 0.1 mg/l

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

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
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

TEST(S) BY

FOR ACCOUNTING USE ONLY

REPORTED

RECEIVED

91 APR -8 P3:15

91 APR -5 P3:17

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

LWN 88

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

SEP 30 1998 **D**

Permit Number:

Sewage Disposal System

As Built Plans & Specifications

Date 9-22-98

System Location (Indicate correct number and street)

Address 13600 SW 14 (no rural route) City Lincoln NE, Zip

A. Building Sewer

1. Material: Class 160
   Diameter: 4 in.
2. Distance above basement floor: _____ in.
   or distance below basement floor: 16" in.
3. Distance between dwelling and septic tank: 345 ft.
4. Number of clean-outs: 5
5. Distances to: well or suction line _____ ft.
   stream _____ ft.
   pressure line _____ ft.
   property line _____ ft.

B. ~~Septic Tank~~ Lagoon

1. Material: _____
   Number of compartments: _____
2. Capacity: _____ gal.
3. Factory built: ☐ Yes ☐ No
4. Manholes: Over inlet, diameter _____ in.
   Over outlet, diameter _____ in.
   Riser: ☐ above ☐ below grade _____ in.
5. Inlet: ☐ baffle ☐ tee
6. Outlet: ☐ baffle ☐ tee
7. Depth to top of tank, below unfinished grade: _____ in.
8. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

C. Distribution Box

1. Material: _____
   Number available outlets: _____
2. Factory built: ☐ Yes ☐ No
3. Distance from septic tank: _____ ft.

D. Absorption Field

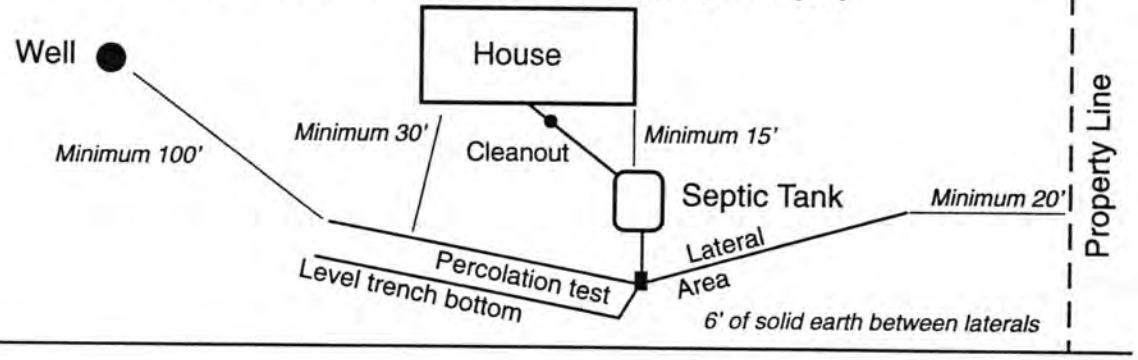
(Provide as-built drawings on back of this form)

1. Type: ☐ Half rounds ☐ Perforated pipe
   Diameter of half round: _____
   or perforated pipe: _____
   Material: ☐ fiberglass ☐ plastic ☐ concrete
   ☐ other _____
2. Lateral lines: Number _____
   Length of each line: _____ ft. _____ ft.
   _____ ft. _____ ft., _____ ft.
3. Trench dimensions: Width _____ ft.
   Slope _____ in/100 ft.
   Average depth _____ in
4. Filter material: _____
   Depth of material _____ in.
5. Distances to: Well or suction line _____ ft.
   Stream _____ ft.
   Pressure line _____ ft.
   Property line _____ ft.

Indicate North with Arrow

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

Individual Sewage System Design (Example)



FORM 23-103 10-96