LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2158-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MAY 19, 1985 — THIS PERMIT EXPIRES

BRAD SOUTHWICK — ISSUED TO

701 E. 4TH STREET HICKMAN, NE 68372 — ADDRESS

T0N; R6E; Sec 18 SE¼; SW 40th & Hwy 33 — LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE 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
EB	11/20/84	

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 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:

Location: Township 8N ; Range 6E ; Section & ¼ Section 18 N/2 SE/4
Property Dimensions: _____ ft. x _____ ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10-25 to 10-26 . Weather: Precip. T Temp. 50's .

OWNER: % GENE BRAKE/WOODS BROS. REALTY

Address: _____

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				
Hold 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./ Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	46	10-25	1:00 PM	10/26	1:00 PM	10/26	4:35 PM	19	5:05 PM	20	30	1	30
2	↓							20		21		1	30
3								27¼		19		1¾	18
4								24¼		25¾		1½	20
5								14¼		15		¾	40
6								25		25¾		¾	40
7								22⅜		24		1⅝	19

Brad Southwick
Signature of Person Conducting Test

Address 701 E. 44th Haines Rte Phone 792-2462

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

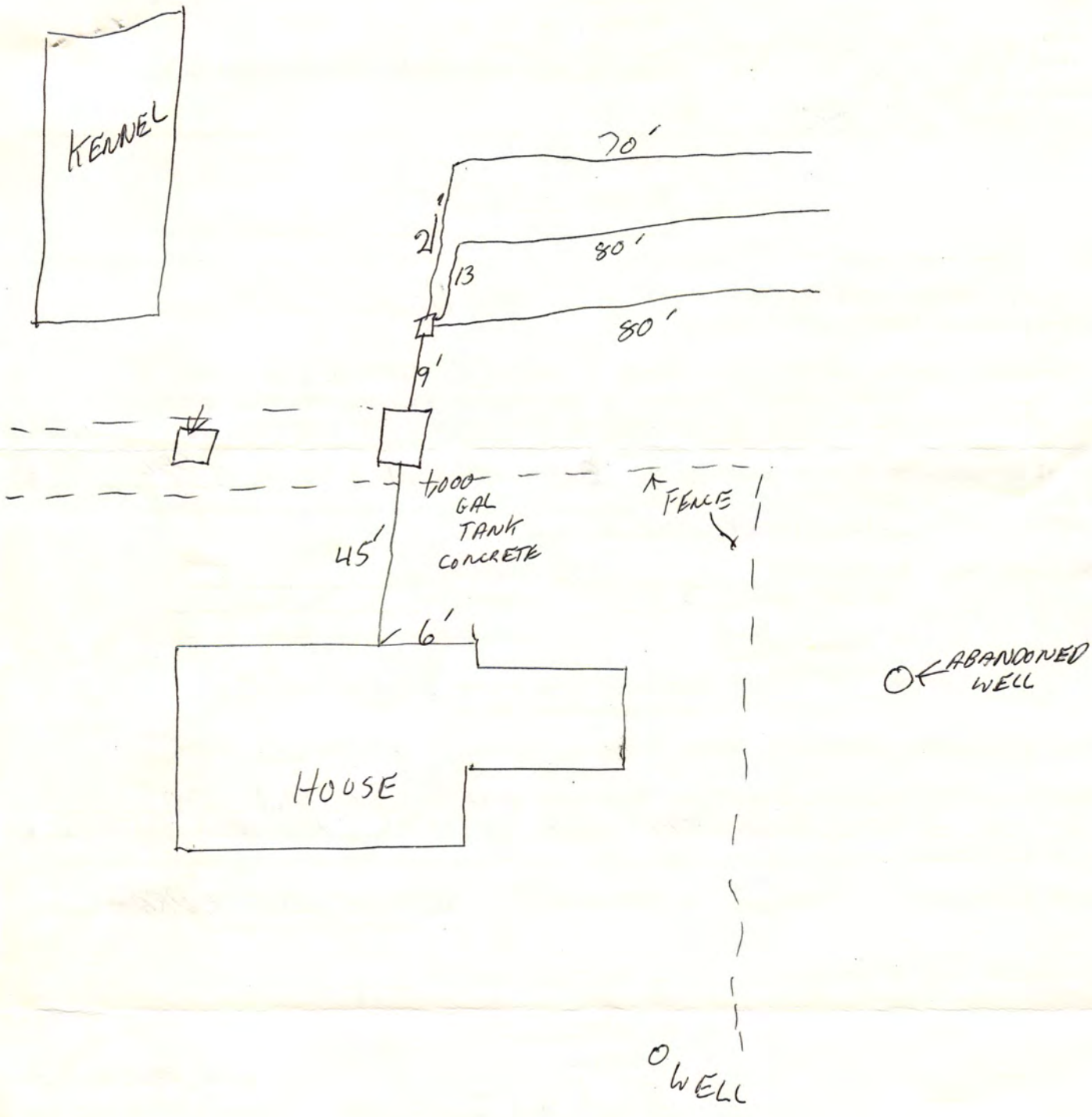
(Do not write below this line)

REVIEWING ACTION

Remarks: Seems a little fast for Wymore
Soil Type (SCS): Wymore Silty Clay Loam
Date: November 9, 1984

Approved Percolation Rate (a)
A. 25 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Wood
Signature of Reviewing Official



FARM STEAD
PROPERTY LINES WELL AWAY FROM HOUSE

001

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 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 RR1, BOX 22 MARTELL, NE 68404

Twp 8N Range 6E Section 18 1/4 ___ 1/4 ___ Block ___ Lot ~~11~~ Addition ___

Directions to Property on Hwy 33 & SW 42 on the NW corner

Legal Description: Lot 11 SE 18-8-6

Location of Well SE corner of fenced in yard Tap Location: Inside ☐ Outside ☐

Location of Sewage System North of the house Year Installed last inspected 1984

	NAME	ADDRESS	PHONE
Present Owner:	Gary D. Hinkley	RR 1, Box 22 Martell, NE 68404	794-6965
Tenant/Buyer:			
Return to:	Lincoln Bank South		

Signature of Applicant By: Carla Holmquist Address 4100 So. 27th St
Lincoln, NE 68502 Date 10 / 12 / 93

HEALTH DEPARTMENT USE ONLY

Date Received 10 / 13 / 93 Received $150.00 ✓ M.O. Check ☒ ✓ Cash ☐

#75371

PRELIMINARY STATUS--By PAUL DIEDRICHMANN **DATE:** 10 / 15 / 93

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☒	☐	Approved ☒	Date ___/___/___ by ___
Bacteria	☒ 0 /ml	☐ ___ /ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☒ <0.1 ppm	☐ ___ ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: Septic tank should be pumped if not done in past two years. H.D. records show an old well on the property. It should be properly abandoned

See Attached Letter ☐

FINAL STATUS

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

Approved by Paul Diedrichmann Date 10 / 28 / 93

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.

X

029

BIOLOGICAL EXAMINATION OF DRINKING WATER

SAMPLE T[redacted]CTED AND MAILED ON:

MO[redacted] (4) DAY (5) SAMP/DAY (6-7)

ACCOU[redacted] (16-22) ADD. TESTS (23) 1. FL 2. N 3. BOTH 4. TPC

DATE COLL 10-15-93 11:50 (MO./DAY/YR./HOUR (9-16)) BY P. DROTZMANN (17-28)

ADDRESS OR LOCATION Gary Hinkley SW 42nd + Hwy 33 (29-41)

NAME AND ADDRESS OF OWNER

LLCHD
2200 St. Mary's Ave
LINCOLN NE 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. 26312 (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 (69-75)

ANALIZED BY (76-79)

IN OCT 15 P3:04

OUT OCT 16 P5:57

WATER CHEMISTRY

STATE LAB NO. 1511952

COMPLETE INFORMATION BELOW

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

COLLECTED 10-15-93 11:50
MO DAY YEAR HOUR

E COLLECTED BY PAUL DROTZMANN

LE LOCATION Gary Hinkley SW 42nd / HWY 33

PROPERTY LEGAL DESCRIPTION: COUNTY LANC

QRTR ____ SECT 18 TWNSHP 8 (N) S RANGE 6 (E) W

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

LLCHD
2200 St. Mary's Ave
LINCOLN, NE 68502

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

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

FOR ACCOUNTING USE ONLY

LWN 88

REPORTED '93 OCT 18 P5:41

RECEIVED '93 OCT 15 P3:04

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. 2158-C

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

DATE: 11-15-84

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 6E ; Section 18 SE/4 ;
Block ; Lot ; Addition
Street Address SW 40th & Hwy 33

2. Property Use: Residential ☒; Commercial ☐
No. Bedrooms 3
Describe
Other Use ☐
Describe

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

4. Description of proposed alteration, extension or repair: INSTALL 230' OF 3" WIDE PERFORATED PIPE LATERAL; ABANDON OUTHOUSE & DUG WELL

5. Work to be done by: Owner ☐ ; or Contractor ☑ , SOUTHWICK SEWER & DRAIN
Contractor's Name

6. Estimated cost of project:

a. Materials	$
b. Labor	$
c. Other	$
TOTAL	$ 2200 00

WOODS BROS REALTY
Brad Southwick for 3201 PIONEER
Signature of Applicant (owner or lessee)
701 C 47th
Hickman, Ne. 68372 LINCOLN, NE 68516
Address

(Do not write below this line)

REVIEWING ACTION

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

2. Site Visits:
Date: 11/13/84 by: J.C.H.
Date: by:
Date: by:

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

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 11/20/84 by: J. C. Hood