LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 1955-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JULY 3, 1983 — THIS PERMIT EXPIRES

STEVEN LEHR RR #1 CRETE NE 68333 — ISSUED TO / ADDRESS

T8N, R5E, SECTION 17 — LEGAL DESCRIPTION

REMARKS: NONTRANSFERABLE NEW

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 60.00	$	$	$ 60.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
EB	11/6/83	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH
ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

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. 12/29/82 (9-16) MO/DAY/YR. 10:45 A.M. /HOUR BY J. C. Hood (17-28)

ADDRESS OR LOCATION SEC. 17, T8N, R5E (29-41)

NAME AND ADDRESS OF OWNER

STEVEN J. LEHR
RT. #1
CRETE, NEBRASKA

NEBRASKA DEPARTMENT OF HEALTH

FOR LABORATORY USE ONLY

SPECIAL REQUEST: ____ (42)
0. NONE 1. CHECK 2. REPLACEMENT

SAMPLE CONDITION: 1 (43)
1. GOOD 2. DAMAGED 3. INSUFFICIENT 4. OLD 5. RETURNED UNUSED

LABORATORY NO. 128 (44-47)

DATE EXAMINED 12-29-82 (48-53)

COLIFORM 0 (54-56) /100 mL.

FLUORIDE ____ (57-60) mg/LITER

NITRATE < 0.1 (61-64) mg/LITER

TPC ____ (65-68) /100 mL.

LAB. PROCEDURE ____ (69-75)

ANALIZED BY WTC (76-79)

OUT

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
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: 474-1541

A

FILING FEE: $ 60.00

FILE NO. 1955-C

DATE: 12-20-82

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:

1. Legal description of property: Twp. 8N ; Range 5E ; Section 17 ; SEE ATTACHED
   Block _____ : Lot _____ : Addition _____
   Street Address _____

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

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

4. Distance to public sewer: NONE ft.

Steven J. Lehr
Signature of Applicant (Owner or Lessee)

RT 1 Crete, Ne
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 1/3/83. Date Frwd. 1/3/83. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 1-6-83. Date Frwd. 1-6-83. ACTION: Approved ☒ Disapproved ☐ Signature: Carl Boes

3. City or County Engineer: Date Rec'd. 1/6/83. Date Frwd. 1/6/83. ACTION: Approved ☒ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8/28/00 by: L.C.H.
Date: _____ by: _____
Date: _____ by: _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/17/00 By: Jerrold C. Hood

APPEAL TO
COUNTY BOARD OF ZONING APPEALS #25

On October 29, 1982, Eugene J. Prososki for Carl Elsner, owner, applied for a building permit to construct a residence on the west 200 feet of the north 447.88 feet of the SE¼ of Section 17-8-5, and on Lot 2, Block 3, Elsner's Lakeside Estates 1st Addition Lancaster County, Nebraska at 5400 Redwing Drive.

* * * * * * * * *

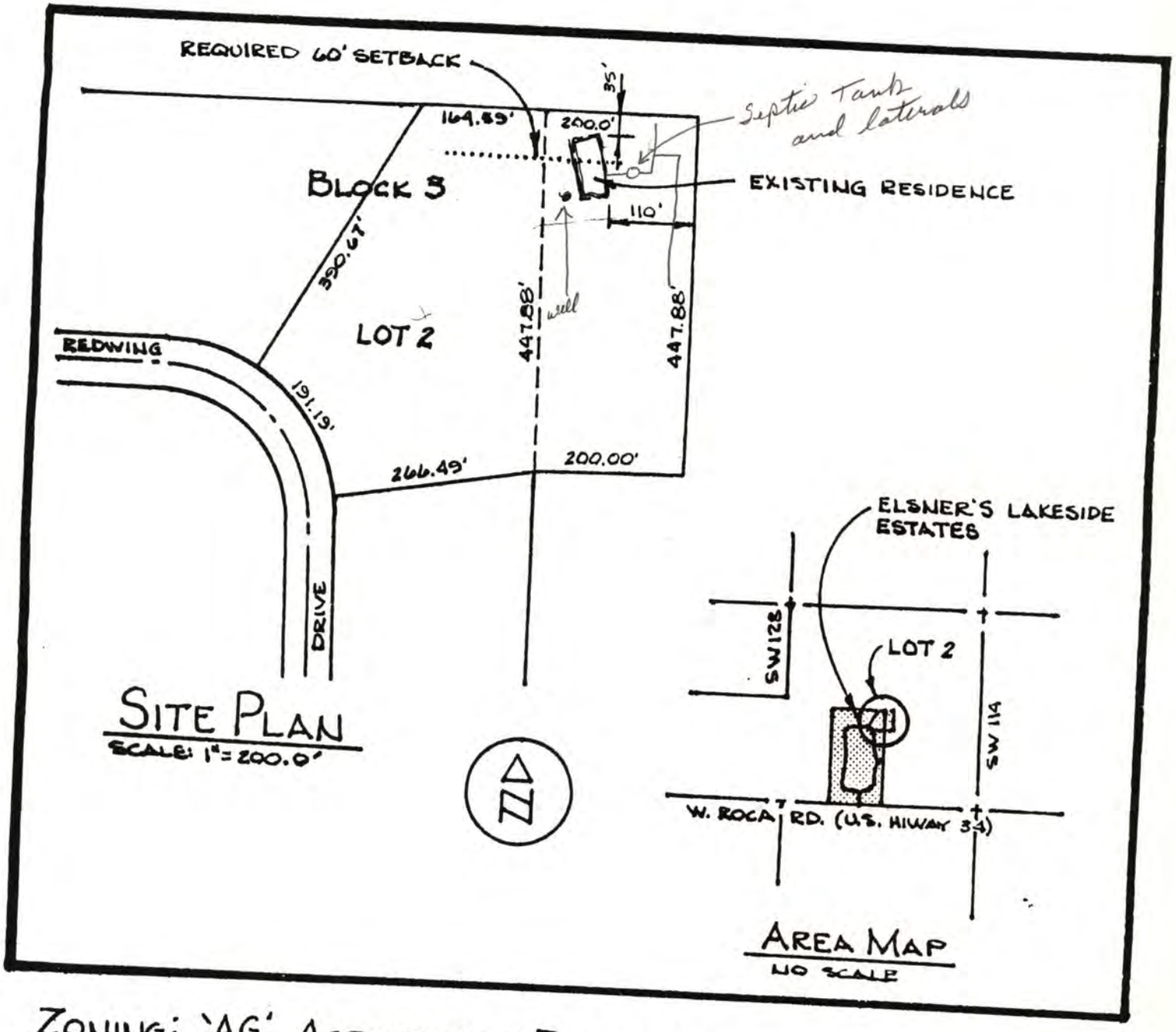
THIS APPEAL IS DIRECTED TO THE BOARD RELATIVE TO VARIANCE.

* * * * * * * * *

This permit was refused because Article 4, Section 4.017 Par. A of the 1979 Zoning Resolution of Lancaster County requires a 60 foot side yard.

* * * * * * * * *

The above decision of the Building Official is hereby appealed on the grounds that side yard requirement of 60.00 feet cannot be met.



ZONING: 'AG' AGRICULTURE DISTRICT

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: 474-1541

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: December 22, 1982

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 990 sq.ft.

Jerrold C. Hood
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: 474-1541

REC'D DEC 21

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: 466 ft. x 447 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: _____ to _____. Weather: Precip. _____ Temp. _____.

OWNER: Steven J Lehr

Address: Rt. 1 Crete, Ne

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	36"	12/18/82	3:00 PM	12/19	3:00 PM.	12/19	6:30	34	7:00	34 ½	30	½	
2	"	"	"	"	"	"	"	35	"	35 ⅜	"	⅜	
3	"	"	"	"	"	"	"	36 ¾	"	37 ½	"	¾	
4	"	"	"	"	"	"	"	35 ½	"	36 ⅛	"	⅝	
5	"	"	"	"	"	"	"	35 ¾	"	36 ¼	"	½	
6	"	"	"	"	"	"	"	33 ⅞	"	34 ¼	"	⅜	

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

Steven J Lehr
Signature of Person Conducting Test

Address Rt Crete, Ne Phone 826-2288 office 826-2246

(Do not write below this line)

REVIEWING ACTION

Approved Percolation Rate (a)
A. 60 min./inch
B. _____ min./inch
C. _____ min./inch

Remarks: _____

Soil Type (SCS): NW area of Burchard Clay Loam & Steinauer Loam

Date: December 22, 1982

Jerrold C. Wood
Signature of Reviewing Official

FORM 20104-0477
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: 474-1541

D

DATE: 12-20-82

FILE NO. _____

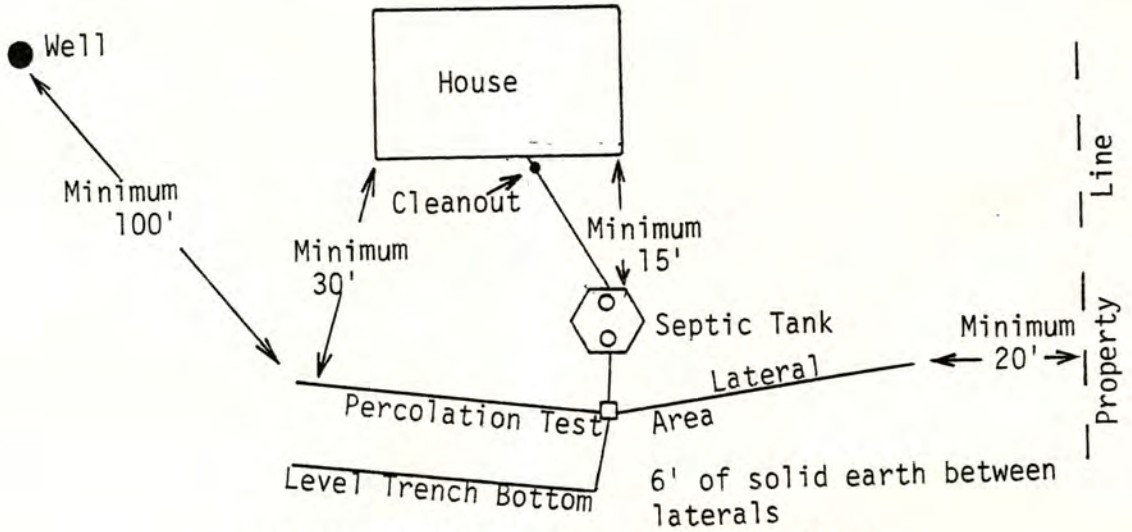
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Metal; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 8 in.
3. Distance between dwelling and septic tank 26 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 100 ft.; Stream 150 ft.; Pressure Line _____ ft.; Property Line 60 ft.

B. SEPTIC TANK:
1. Material plastic; No. of compartments 1.
2. Capacity 1600 gals.;
3. Factory Built: Yes ☒ No ☐
(Company _____)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade ____ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 18 in.
8. Distances to:
Well or Suction Line 100 ft.; Stream 120 ft.; Pressure Line _____ ft.; Property Line 100 ft.

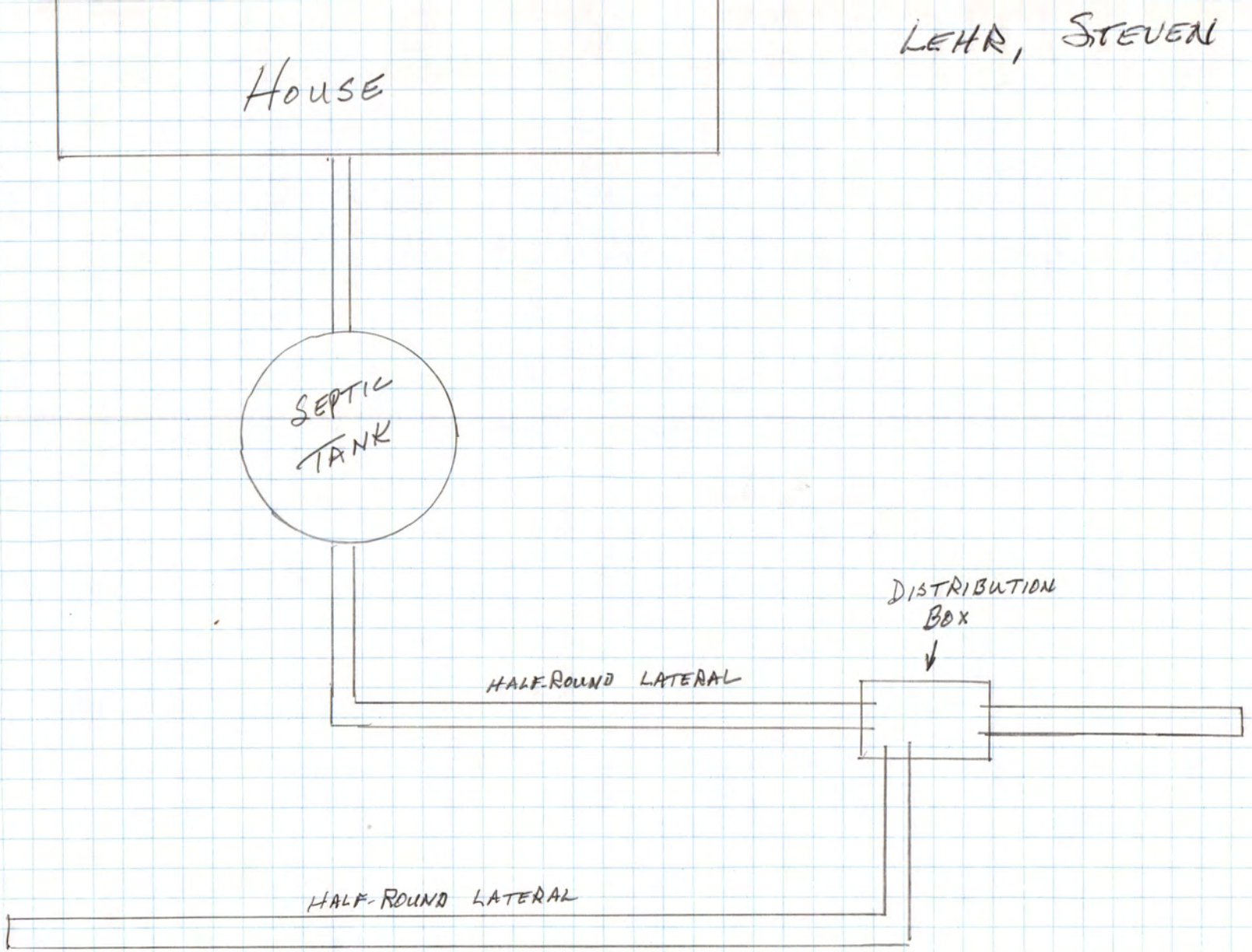
C. DISTRIBUTION BOX:
1. Material _____; Number - available outlets _____.
2. Factory Built: Yes ☐ No ☐
(Company _____)
3. Distance from Septic Tank _____ ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☒
Diameter of Half Round 18" (2) or Perforated Pipe 4".
Material: fiberglass ☐ ; plastic ☒ ; concrete ☒ ; other _____.
2. Lateral Lines:
Number 2 ; Length of each line 100, 100, _____, _____, _____ ft.;
Total length of laterals 100 ft.;
Distance between lateral lines 20 ft.
3. Trench dimensions: Width _____ ft.;
Slope _____ in/100 ft.; Average Depth _____ in.
4. Filter Material: gravel
Depth of Material 18-24" in.
5. Distances to:
Well or Suction Line 140 ft.; Stream 100 ft.; Pressure Line _____ ft.; Property Line 40 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

LEHR, STEVEN


HOUSE
SEPTIC TANK
DISTRIBUTION BOX
HALF-ROUND LATERAL
HALF-ROUND LATERAL