LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1009-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

September 7, 1977 — THIS PERMIT EXPIRES

Mrs. Bob Gilliam , RFD, Pleasant Dale, NE 68423 — ISSUED TO / ADDRESS

T8N; R6E; Section 30 — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health — ISSUING OFFICER

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

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. 1009-C

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

DATE: May 7, 1977

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

SEE ATTACHED

1. Legal description of property: Twp. 8 N ; Range 6E ; Section 30
Block _____; Lot _____; Addition _____ 6.17 ac
Street Address _____

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

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

4. Distance to public sewer: _____ ft.

Mrs. Bob Gillean
Signature of Applicant (Owner or Lessee)

RFD Pleasant Dale
Address

68423

Moved to 4010 W on N. Manley Rd.

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 3/7/77. Date Frwd. 3/7/77.
ACTION: Approved ☐ Disapproved ☒
Signature: Harold C. Hoob

2. Supt. Bldg. Insp.: Date Rec'd. 3-7-77. Date Frwd. _____.
ACTION: Approved ☐ Disapproved ☐
Signature: Tom Roasch

3. City or County Engineer: Date Rec'd. 3/7/77. Date Frwd. 3/7/77.
ACTION: ~~Approved~~ ☒ Disapproved ☐
Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL _____

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

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. 1009-C

DATE: Mar. 7, 1977

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. SEE ATTACHED

1. Legal description of property: Twp. 7N ; Range 6E ; Section 30 ; Block ; Lot ; Addition .
Street Address .

2. Property Use: Residential ☒; Commercial ☐
No. of Bedrooms 3
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).

Mrs. Bob Gilliam
Signature of Applicant (owner or lessee)

RFD Pleasant Dale
Address 68423

(Do not write below double line)

REVIEWING ACTION

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

2. Site Visits:
Date: 5-12-77 by: jw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 3/7/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-12-77 by: James Wewerka

File No. 6-033

LOTS 2 & 3, BLOCK 2

A tract of land described as follows; Commencing at the NE corner of Section 30, T. 8 N., R. 6 E. of the 6th P.M., Lancaster County, Nebraska and extending S. 88° - 54' W. 1192.0 feet along the north line of said Section; thence S. 0°-00' W., 40.0 feet to the point of beginning;

Thence S. 0°-00' W. 741.78 feet;

Thence N. 90°-00' W. 364.0 feet;

Thence N. 0°-00' W. 734.79 feet to a point 40.0 feet south of the north line of said Section;

Thence N. 88°-54' E. 364.0 feet parallel to the north line of said Section to the point of beginning, embracing an area of 6.17 acres, more or less.

Above Prepared 2-18-76

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. 1009-C

SPECIFICATIONS

DATE: _____

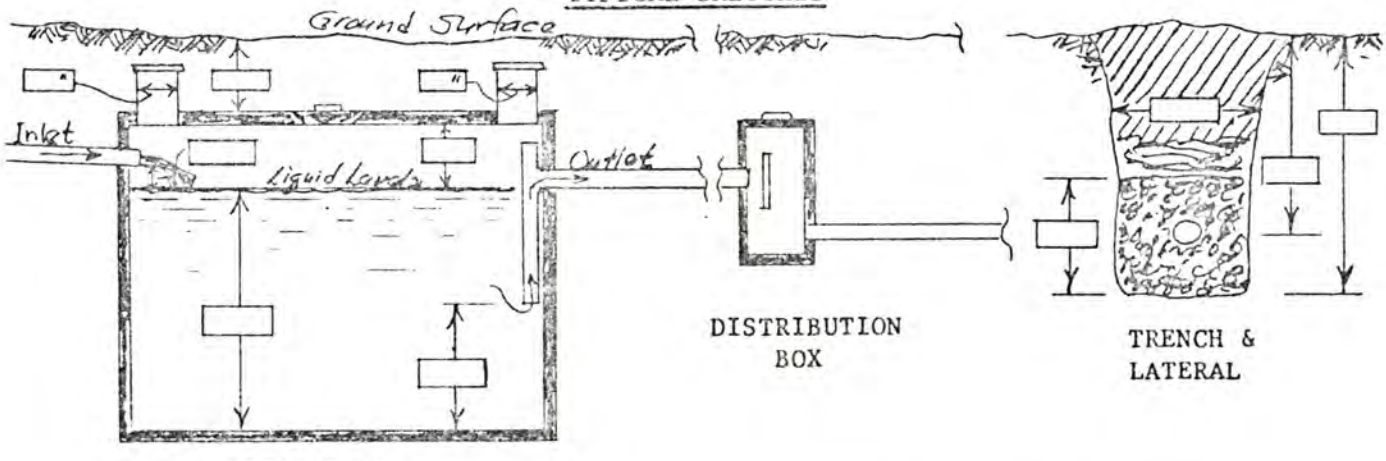
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material _____; No. of compartments _____.
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 ____in.
8. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

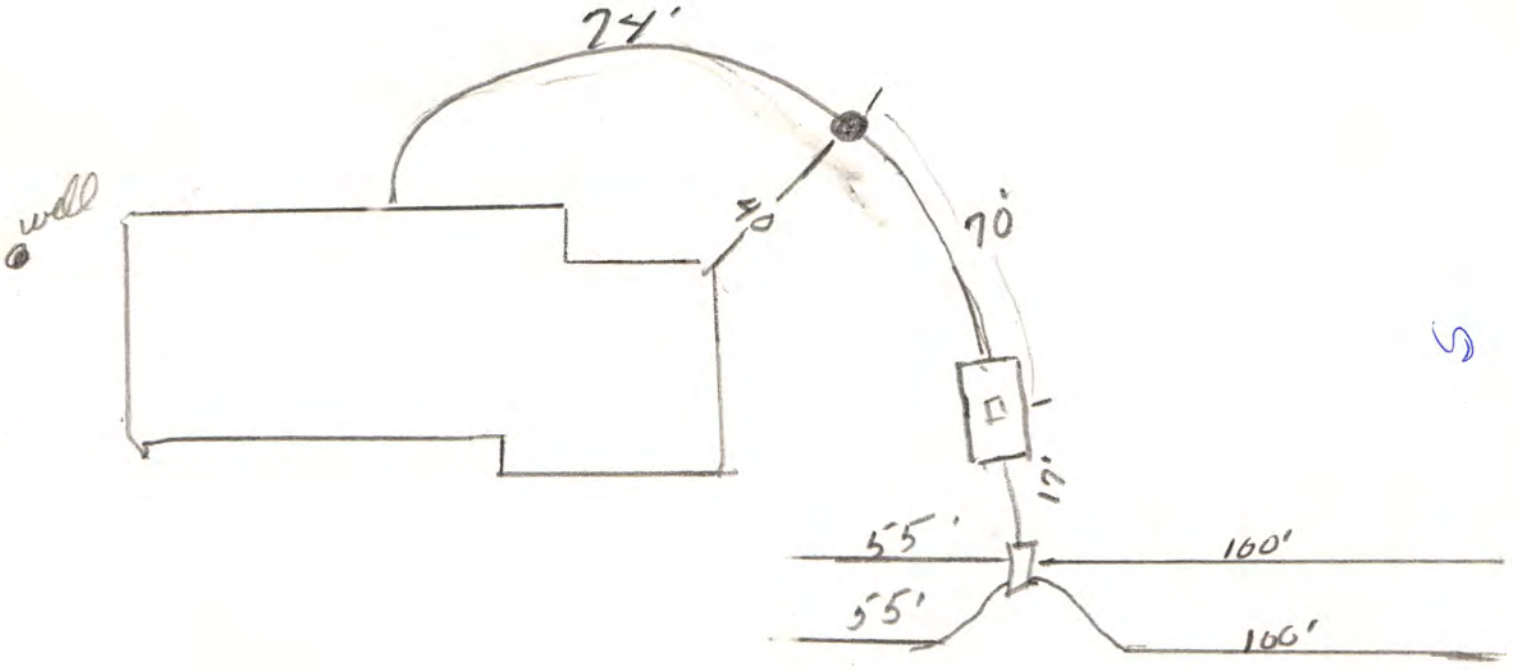
C. DISTRIBUTION BOX
1. Material _____; No. available outlets _____.
2. Factory Built: Yes ☐, (Company _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank ____ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: _____
2. Lateral Lines: Depth below grade ___in.
Number ____; Length of each line ___ft
Total length of Laterals 305 ft.;
Slope ____in/100 ft. Diameter of pipe ____ in.; Shape _____
Material: concrete ☐; fiber asbestos ☐; clay ☐; other _____
Distance between lateral lines ____ft.
3. Trench Dimensions: Depth ___in.; Width 36 in.
4. Filter Material: _____.
Depth of material from trench bottom _____in.
5. Distances To:
Well or Suction Line ____ft.;
Stream _____ft.; Pressure Line ____ft.
Property Line ____ft.
6. Percolation Rate: _____minutes/inch

TYPICAL SKETCHES



_____
Signature of Applicant


24'
well
70'
12'
55'
100'
55'
100'

002

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

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

REAL ESTATE TRANSFER / LOAN APPROVAL

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: 2-3-92

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

Legal Description of Property: TWP. 8N; RANGE 6E; SECTION 30; BLOCK 2

LOT 2; ADDITION Houston Heights; Street Address 4501 W. Martell Rd

Directions to Property Hwy 77 to HW33-W on HW33 to SW 42nd (4mi) - S on SW 42 1/2 mile - W on Martell Rd 4th house on south side (drive is on 46th St)

SE Corner of Martell Rd & 46th - red barn in back

Location of Well North of chimney in flower bed in middle of yd Tap Location: Inside ☐ Outside ☒ front back

Location of Sewage System lagoon southwest corner of lot. Year Installed Septic tank changed to lagoon about 1981 or 82

	NAME	ADDRESS	PHONE
Present Owner:	Monte & Joyce Page	4501 W. Martell Rd	794-6955
Tenant/Buyer:	Same		wk 471-7940
Return to:	Joyce Page	2200 St Mary's Ave. CMHCLC	

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

Signature of Applicant Joyce E. Page Address 4501 W. Martell Rd. Martell

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HEALTH DEPARTMENT USE ONLY

Date Received FEBRUARY 4, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE 2/5/92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 2/5/92 by JCH
Bacteria	☒	☐	Provisional:	☐	Date 2/12/92 by JCH/jc
Nitrate	<10 mg/l ☒	☐	Disapproved:	☒	Date _____ by ___

Comments: NEED WARNING SIGNS ON LAGOON FENCE. NEED LOCK ON GATE. REMOVE WILLOW TREE FROM LAGOON & THIS SPRING KILL OUT CATAILS IN LAGOON. KEEP WEEDS DOWN. See Attached Letter ☐ Corrected by jc

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FINAL STATUS

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

APPROVED BY John Schlote DATE 2/10/92

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. 2/4/92 2:52pm (MO./DAY/YR./HOUR (9-16)) BY D. C. Wood (17-28)

ADDRESS OR LOCATION BLK 2, LOT 2, BLUESTEM HEIGHTS SEC. 30, T8N, R6E (29-41)

NAME AND ADDRESS OF OWNER JOYCE PAGE
LINCOLN-LANCASTER COUNTY
ENVIRONMENTAL HEALTH
2200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FOR LABORATORY USE ONLY

FEB -5 P 4:06

IN

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. 1412-2771 (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 [illegible] (76-79)

OUT

FEB -6 P 2:17

WATER CHEMISTRY

STATE LAB NO. 152-61

COMPLETE INFORMATION BELOW

DATE COLLECTED 2 (MO.) 5 (DAY) 92 (YEAR) 2:52 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION JOYCE PAGE

PROPERTY LEGAL DESCRIPTION: COUNTY LANCASTER

QRTR NE SECT 30 TWNSHP 8 N RANGE 6 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
1200 ST. MARY'S AVENUE
LINCOLN, NEBRASKA 68502

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

REPORTED '92 FEB -7 P1:13

RECEIVED '92 FEB -5 P4:06

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 CC

FOR ACCOUNTING USE ONLY

LWN 88