LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1008-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

September 7, 1977 — THIS PERMIT EXPIRES

Mrs. Bob Gilliam — ISSUED TO

RFD, Pleasant Dale, NE 68423 — ADDRESS

T7N: 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. 1008-C

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

DATE: Mar. 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. 8N ; Range 6E ; Section 30
Block _____; Lot _____; Addition _____ 6.12ac.
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.

Have deed to 40' ROW on W. Martell Rd

Mrs Bob Gilliam
Signature of Applicant (Owner or Lessee)

RFD Pleasant Dale
Address 68423

(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: Jerrold C. Hood

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

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. 1008-C

DATE: May 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. 8 N ; Range 6 E ; 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: 5-13-77 by: jw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 5/7/77
by: Jerold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-13-77 by: James Wevelka

File No. 6-033

~~LOTS 1 & 2, BLOCK 3~~

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. 1616.0 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. 733.64 feet;

Thence N. 90°-00' W. 365.94 feet to the N-S centerline of the NW^4 NE^4;

Thence N. 0°-08' E. 726.65 feet to a point 40.0 feet south of the north line of said Section;

Thence N. 88°-54' E. 364.25 feet parallel to the north line of said Section to the point of beginning, embracing an area of 6.12 acres, more or less.

Above Prepared 2-18-76

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 474-1541)

FILE NO. 1008-C

PROPERTY WHERE SOIL TESTED:
Location: Township _____: Range _____
Section & ¼ Sect. _____
Property Dimensions: _____ft. x _____ft.
Area: _____acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: _____
Address: _____

Dates of Tests: _____ to _____. Weather: Precip._____Temp._____

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. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)

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

_____
Signature of Person Conducting Test

Address _____

Phone _____

(Do not write below this line)

REVIEWING ACTION

REMARKS: System type to be determined after percolation test.

DATE: _____

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

_____
Signature of Reviewing Official

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)

Lots 1 & 2 Blk 3 Bluestem Heights

FILE NO. _____

SPECIFICATIONS

4601 W Martell Rd

DATE: _____

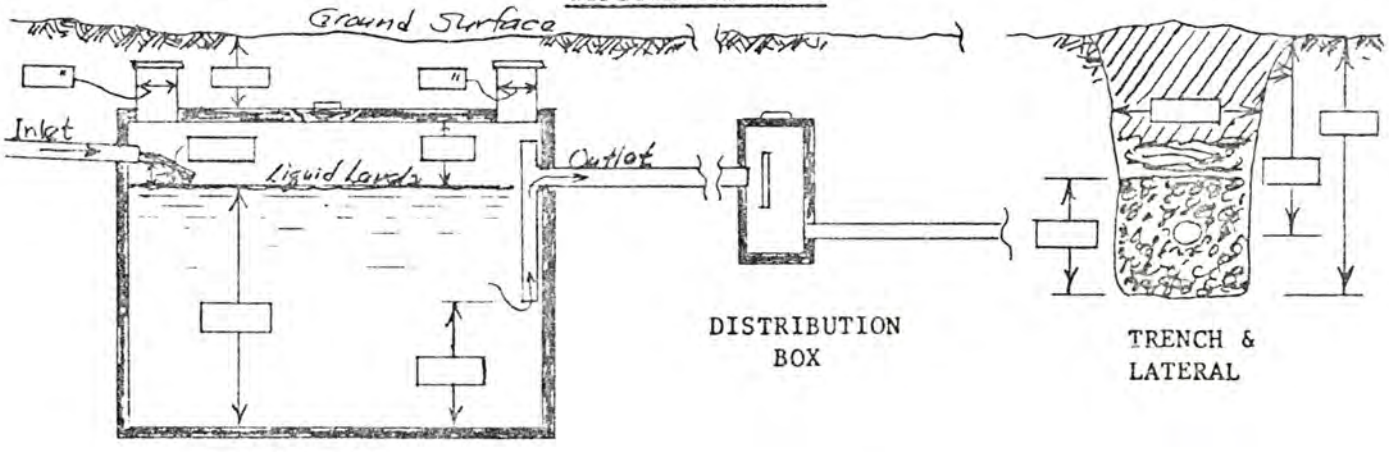
A. BUILDING SEWER:
1. Material _____; Diameter ____ in.
2. Distance above basement floor ____in.; or below basement floor ____in.
3. Distance between dwelling and septic tank ____ft.
4. Number of clean-outs _____.
5. Distances To:
Well or Suction Line ____ft.;
Stream ____ft.; Pressure Line ____ft.;
Property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

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments _____.
2. Capacity 1000 gals.; Liquid depth ____in.
3. Factory Built: Yes ☒ (Company Pre-Cast)
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 16 in.
8. Distances To:
Well or Suction Line 100+ ft.;
Stream ____ft.; Pressure Line ____ft.;
Property Line ____ft.

C. DISTRIBUTION BOX
1. Material Concrete; No. available outlets _____.
2. Factory Built: Yes ☒, (Company Precast _____) No ☐
3. Dimension: Length ____in.; Width ___in. Depth ____in.
4. Distance from Septic Tank 18 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 ____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 ____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

RECEIVED JUL 15 1992

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 St Marys Avenue Phone (402) 471-7800

ORIGINAL LOAN APPROVAL FILE
PREVIOUS HISTORY UNKNOWN

REAL ESTATE TRANSFER / LOA

This form must be completed and returned to request

MAKE CHECKS PAYABLE TO: Lincoln-Lancaster County Health Department.

☒ Evaluation of the Individual Water System Date: 7-13-92

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

Legal Description of Property: TWP. 8N; RANGE 6E; SECTION 30; BLOCK 3

LOT 1; ADDITION Bluestem Heights Street Address 4601 W. Martell Rd

Directions to Property Hyway 77 So to Hyway 33 West 4 miles South 1 mile on SW 42nd to W. Martell Rd. ½ mile West.

Location of Well Front of House Tap Location: Inside ☐ Outside ☐

Location of Sewage System Behind the house Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Andrew Block	4601 W. Martell Rd	794-4385
Tenant/Buyer:	Rick Carson	1820 W. Jean ave	476-3576
Return to:	Century Realty	2855 So 70th	483-2951

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

Signature of Applicant Paul D. Marshall Address 2855 So 70th

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 16, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JULY 16, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 7/16/92 by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 8/13/92 by J.C.H.
Nitrate <0.1 ppm	☒ 7-27-92	☐	Disapproved:	☒	Date ____ by ____

Comments: BROKEN SEWER CLEANOUT MUST BE REPAIRED. SHOULD FILL ANIMAL BURROWS IN NORTH SEWAGE LATERAL TO KEEP SURFACE WATER FROM FLOWING IN. See Attached Letter ☐
IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

FINAL STATUS

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

APPROVED BY _____ DATE _____

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

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: 7-13-92

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

Legal Description of Property: TWP. 8N; RANGE 6E; SECTION 30; BLOCK 3

LOT 1; ADDITION Lost Creek; Street Address 4601 W. Martell Rd

Directions to Property Hwy 77 So to Hwy 33 West to Saltillo Rd South 1 mile on SW 42nd St. W. Martell Rd. ½ mile West

Location of Well Front of House Tap Location: Inside ☐ Outside ☐

Location of Sewage System Behind the house Year Installed ____

	NAME	ADDRESS	PHONE
Present Owner:	Arthur Flock	4601 W. Martell Rd	794-4385
Tenant/Buyer:	Rick Carson	1820 W. Jean Ave	476-3576
Return to:	Century Realty	2855 So 70th	483-0751

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

Signature of Applicant Paul D Martell Address 2855 So 70th

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HEALTH DEPARTMENT USE ONLY

Date Received JULY 16, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JULY 16, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☒	☐	Approved:	☐	Date 7/16/92 by J.C.H.
Bacteria	☒	☐	Provisional:	☐	Date 8/13/92 by J.C.H.
Nitrate <0.1 ppm	☒ 7-27-92	☐	Disapproved:	☒	Date _____ by ____

Comments: BROKEN SEWER CLEANOUT MUST BE REPAIRED. SHOULD FILL ANIMAL BURROWS IN NORTH SEWAGE LATERAL TO KEEP SURFACE WATER FROM FLOWING IN. See Attached Letter ☐

IF SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED.

FINAL STATUS

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

APPROVED BY _____ DATE _____

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

'92 JUL 21 P12:20

REPORTED

'92 JUL 16 P3:09

RECEIVED

COMPLETE INFORMATION BELOW

WATER CHEMISTRY

STATE LAB NO. 15 3757

DATE COLLECTED 7 (MO) 16 (DAY) 92 (YEAR) 1:54 P.M. (HOUR)

SAMPLE COLLECTED BY JERROLD HOOD

SAMPLE LOCATION ANDREW FLOCK

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
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 less than 0.1 mg/l

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

TEST(S) BY JW

FOR ACCOUNTING USE ONLY

LWN 88

9712160 01
DEC 8 1997

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 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

CR 3507

Legal Description of Property: Street Address 4601 W. MARTEL RD

Twp 8N Range 6E Section 30 1/4 ___ 1/4 ___ Block 3 Lot 1 Addition Bluestem Heights

Directions to Property HWY 33 West to SW 42 SOUTH ONE MILE TO MARTEL WEST 1/4 MILE, SOUTH SIDE OF ROAD

Location of Well NORTHEAST OF HOUSE Tap Location: Inside ☐ Outside ☐

Location of Sewage System WEST OF HOUSE Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	RICK A. CARSON	4601 W MARTELL, Martell	68404-5025
	AGENT MARY KUHLMANN	→	432-0223
Tenant/Buyer:	DON + SHERRY MILLER	P.O. BOX 23141	
		LINCOLN NE	798-0313
Return to:	First Federal Lincoln ATTN: Karen Harm	5533 S. 27th	
		LINCOLN NE 68512.	

Signature of Applicant [signature] Address ___ Date ___/___/___

HEALTH DEPARTMENT USE ONLY

Date Received 12/09/97 Received $150.00 Check ☑ Cash ☐ #6644

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 12/11/97

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: SUNKEN AREAS OVER SEPTIC LATERAL SHOULD BE FILLED IN WITH EARTH.

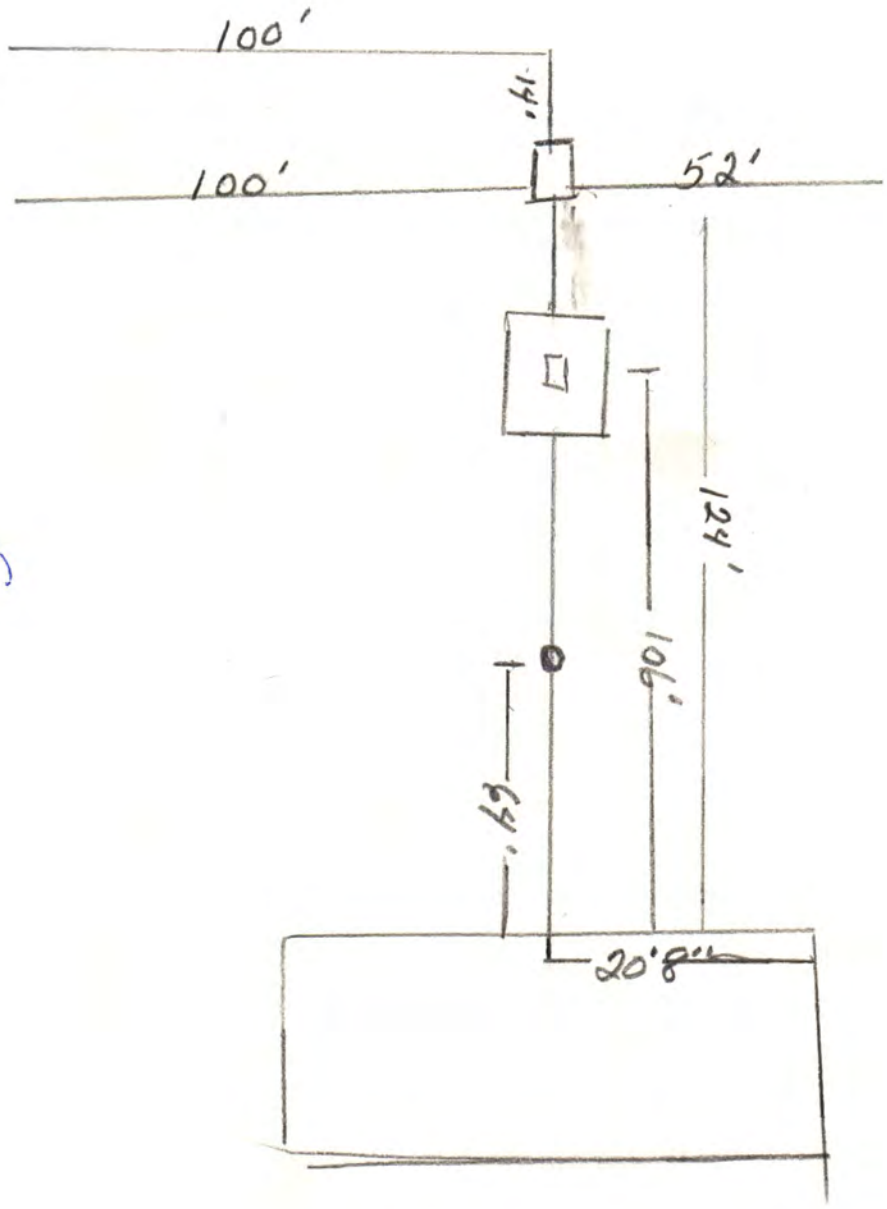
See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 12/15/97

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.



E

S

N

• well

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