LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 2228-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JANUARY 2, 1986 — THIS PERMIT EXPIRES

CLIFFORD D. MARSHALL — ISSUED TO

3045 NO. 39 STREET LINCOLN, NE 68504 — ADDRESS

T8N; R7E; Sec 2; Lot 20; Parcel C, 5.03 Acres; 12300 So. 82 Street — LEGAL DESCRIPTION

REMARKS: NON- TRANSFERABLE NEW CONSTRUCTION

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
PS		

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

REC'D AUG 1 1985

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2228-C

DATE: 31 JULY 1985

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 7E; Section 2;
   Block ____: Lot 20: Addition PARCEL C 5.03 ACRES
   Street Address 12300 S 82 ND ST
2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2. Describe ____
3. Type of Individual Sewage Disposal System: Septic Tank ☐ ; Other ☒ WASTE STABILIZATION POND
4. Distance to public sewer: ____ ft.

Clifford D. Marshall
Signature of Applicant (Owner or Lessee)

3045 N. 39TH ST. LINCOLN, NE. 68504
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/1/85. Date Frwd. 8/2/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd 8/2/85. Date Frwd. 8/2/85. ACTION: Approved ☒ Disapproved ☐ Signature: Gary M. Thomas
3. City or County Engineer: Date Rec'd. 8/2/85. Date Frwd. 8/2/85. ACTION: Approved ☒ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL ____

Site Visits:
Date: 4-25-86 by: mm (need fence)
Date: 5/3/93 by: C.C.H. (not sealed) fenced signs etc
Date: ____ by: ____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/3/93 By: Jerrold C. Hood

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

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

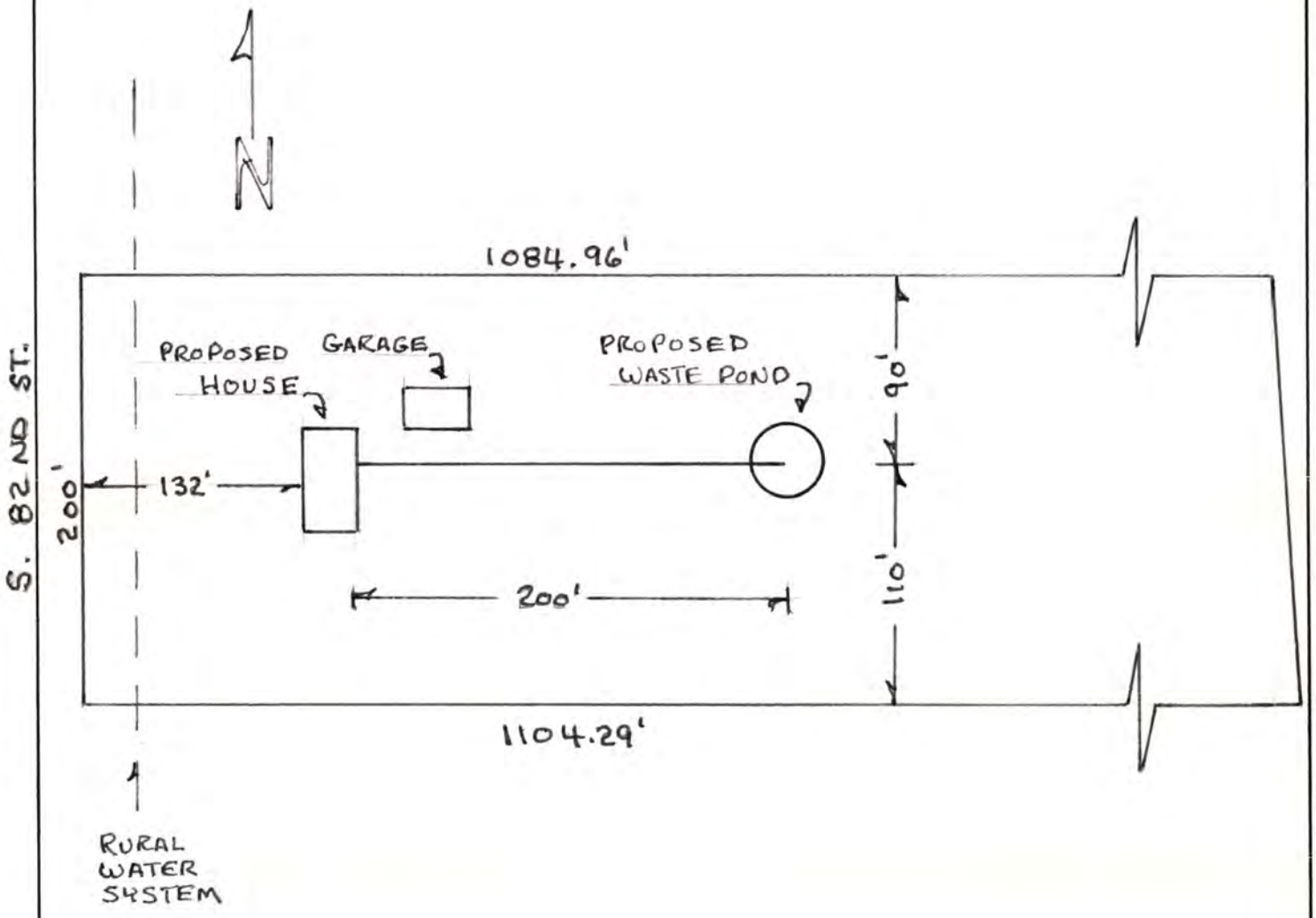
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

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

FILE NO. 2228-C

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



REVIEWING ACTION

Remarks: LAGOON MUST BE SEALED.

Date: AUGUST 1, 1985

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.

Jerrold C. Hoos
Signature of Reviewing Official

FORM CONTROL NUMBER 10267

LANCASTER COUNTY
CASH RECEIPT

PAGE 1 OF 1

TRANSACTION CODE	C R	CASH RECEIPT NUMBER	DATE OF DEPOSIT (M M D D Y Y)	ACCOUNTING PERIOD (M M Y Y)	BUDGET FY (Y Y)
		18654	081085		86

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

BANK ACCOUNT: 11

OFFSET CASH ACCOUNT:

COMMENTS: Sewer Permit

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	PROVIDER VENDOR CODE	DESCRIPTION	AMOUNT	INC./DEC IND	P/F IND
		011	999				2559								60 00		

TOTAL 60 00

PREPARED BY:
NAME _____ TITLE _____

APPROVED BY:
NAME _____ TITLE _____

APPROVED BY:
NAME Stoke TITLE _____ DATE 8-2-85

ORIGINAL

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: 471-7800

D

DATE: _____

FILE NO. _____

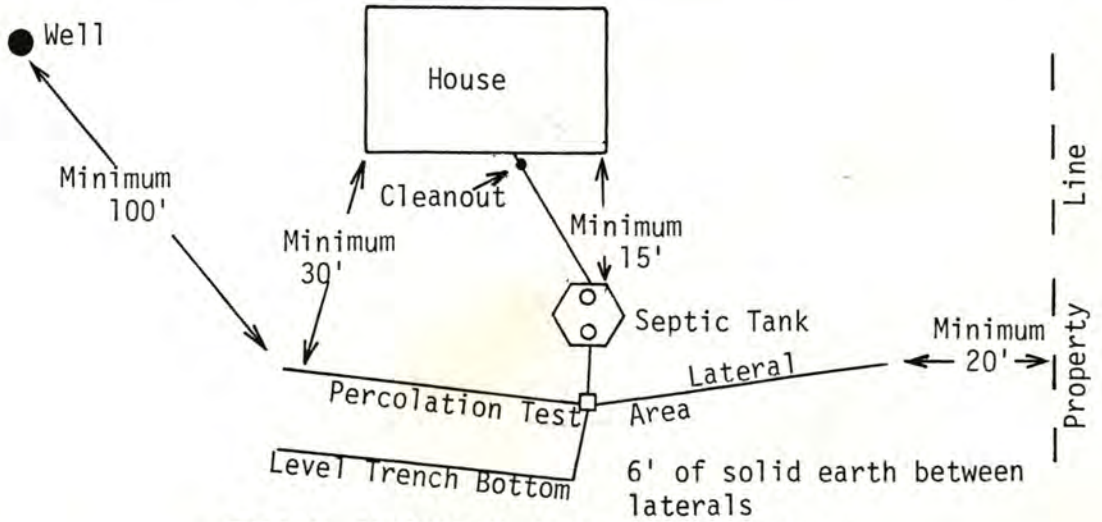
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 3034 ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 18 in.
3. Distance between dwelling and ~~septic tank~~ LAGOON 228 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:
1. Material _____ ; No. of compartments _____.
2. Capacity _____ 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 _____ 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 ☐
(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 _____ or
Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.;
Total length of laterals _____ ft.;
Distance between lateral lines ____ 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.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

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 12300 S 82nd

Twp 8N Range 7E Section 3 1/4 ___ 1/4 ___ Block ___ Lot 20 Addition ___

Directions to Property go to end of S. 70th, turn left on Saltillo, right on S 82nd 3rd house on left

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System South East of house - Lagoon Year Installed 1988

	NAME	ADDRESS	PHONE
Present Owner:	Cliff Marshall	12300 S 82nd	421-3862
Tenant/Buyer:			
Return to:	FIRSTIER ENVELOPE ENCLOSED		

* Please note - Owners are moving by Nov 15, Please call before Nov. 1st for arrangements

Signature of Applicant David London Address 2941 Center Lincoln NE 68503 Date 10/21/94

HEALTH DEPARTMENT USE ONLY

Date Received 10/24/94 Received $150.00 Check ☑ Cash ☐ #1653

PRELIMINARY STATUS--By Gerald C. Hood **DATE:** 10/26/94

RURAL WATER

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☐	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☐ ___/ml	☐ ___/ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☐ ___ppm	☐ ___ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: LAGOON VERY WELL MAINTAINED!

See Attached Letter ☐

FINAL STATUS

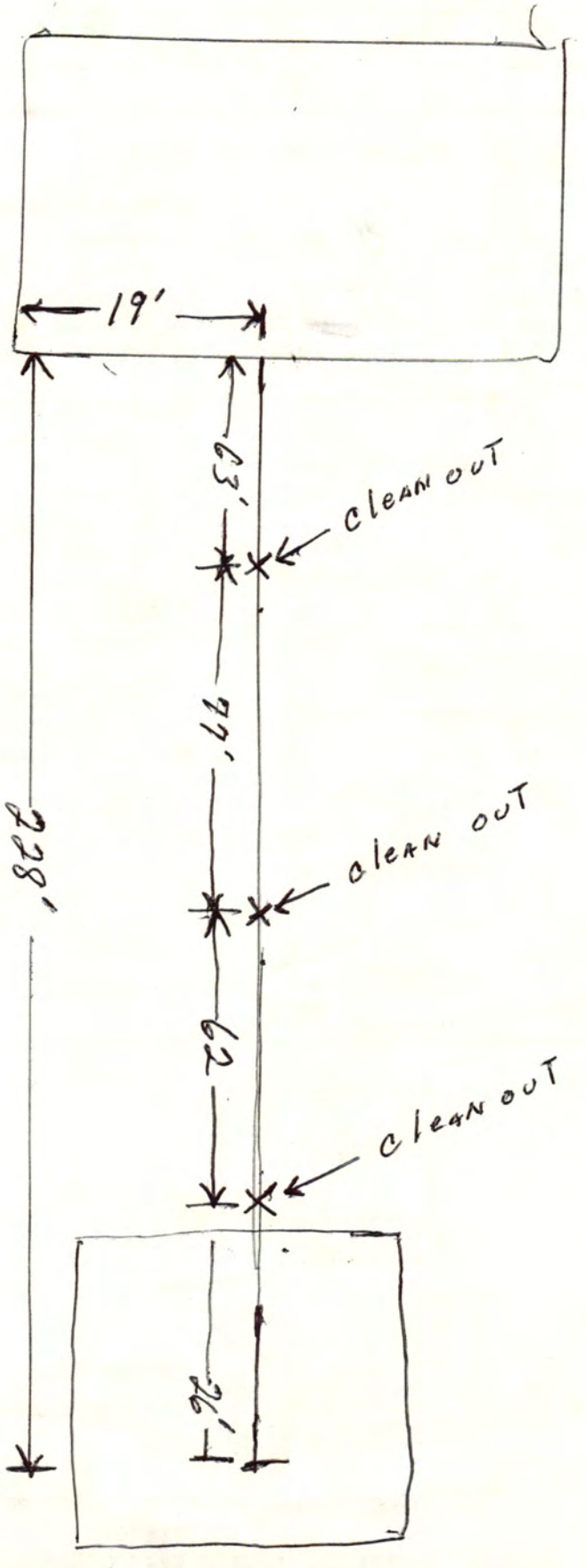
WATER SYSTEM: Approved: ☐ RURAL WATER DISTRICT **SEWAGE DISPOSAL SYSTEM** Approved: ☑ Provisional Approval: ☐

Approved by Gerald C. Hood R.E.H.S. Date 10/26/94

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.

AS BUILT DRAWING OF SYSTEM

DATE 4-25-86 INSTALLER Capital City Trenching Inc.



LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 2228-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

JANUARY 2, 1986 — THIS PERMIT EXPIRES

CLIFFORD D. MARSHALL — ISSUED TO

3045 NO. 39 STREET LINCOLN, NE 68504 — ADDRESS

T8N; R7E; Sec 2; Lot 20; Parcel C, 5.03 Acres; 12300 So. 82 Street — LEGAL DESCRIPTION

REMARKS: NON- TRANSFERABLE NEW CONSTRUCTION

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
PS		

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

REC'D AUG 1 1985

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: 471-7800

A

FILING FEE: $ 60.00

FILE NO. 2228-C

DATE: 31 JULY 1985

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:

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4. Distance to public sewer: ____ ft.

Clifford D. Marshall
Signature of Applicant (Owner or Lessee)

3045 N. 39TH ST. LINCOLN, NE. 68504
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 8/1/85. Date Frwd. 8/2/85. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd 8/2/85. Date Frwd. 8/2/85. ACTION: Approved ☒ Disapproved ☐ Signature: Gary M. Thomas
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REMARKS OR REASONS FOR DISAPPROVAL ____

Site Visits:
Date: 4-25-86 by: mm (need fence)
Date: 5/3/93 by: C.C.H. (not sealed) fenced signs etc
Date: ____ by: ____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5/3/93 By: Jerrold C. Hood

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

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
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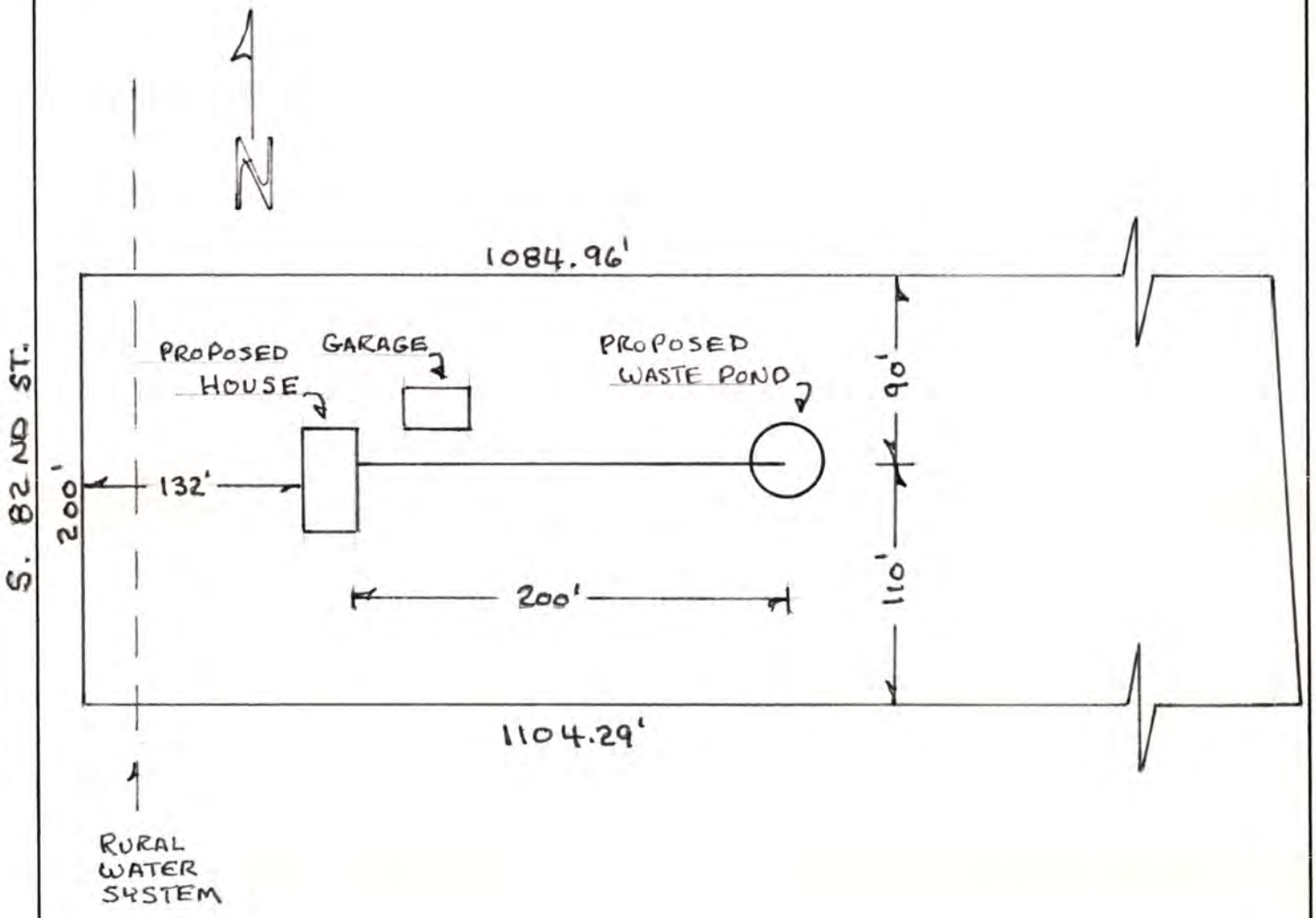
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Phone: 471-7800

C

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

FILE NO. 2228-C

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



REVIEWING ACTION

Remarks: LAGOON MUST BE SEALED.

Date: AUGUST 1, 1985

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Signature of Reviewing Official

FORM CONTROL NUMBER 10267

LANCASTER COUNTY
CASH RECEIPT

PAGE 1 OF 1

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BANK ACCOUNT: 11

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COMMENTS: Sewer Permit

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		011	999				2559								60 00		

TOTAL 60 00

PREPARED BY:
NAME _____ TITLE _____

APPROVED BY:
NAME _____ TITLE _____

APPROVED BY:
NAME Stoke TITLE _____ DATE 8-2-85

ORIGINAL

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
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LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: _____

FILE NO. _____

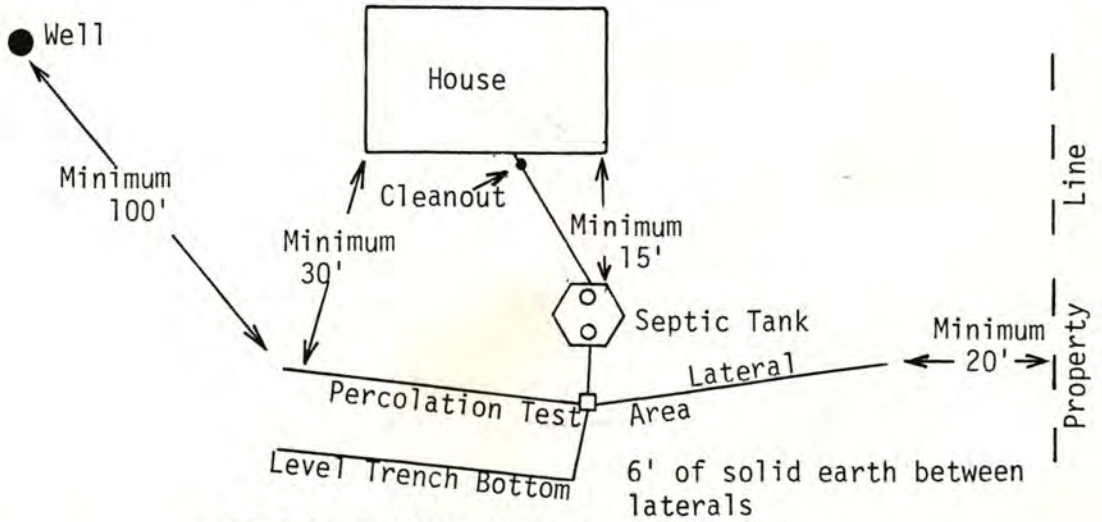
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Riser Above ☐ Below ☐ Grade ____ in.
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1. Type: Half Rounds ☐ Perforated Pipe ☐
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Perforated Pipe _____.
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number ___ ; Length of each line _____, _____, _____, _____, _____ ft.;
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Distance between lateral lines ____ ft.
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Slope _____ in/100 ft.; Average Depth _____ in.
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TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

Lincoln-Lancaster County Health Department

2200 St. Mary's Avenue, Lincoln, Nebraska 68502 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

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Directions to Property go to end of S. 70th, turn left on Saltillo, right on S 82nd 3rd house on left

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System South East of house - Lagoon Year Installed 1988

	NAME	ADDRESS	PHONE
Present Owner:	Cliff Marshall	12300 S 82nd	421-3862
Tenant/Buyer:			
Return to:	FIRSTIER ENVELOPE ENCLOSED		

* Please note - Owners are moving by Nov 15, Please call before Nov. 1st for arrangements

Signature of Applicant David London Address 2941 Center Lincoln NE 68503 Date 10/21/94

HEALTH DEPARTMENT USE ONLY

Date Received 10/24/94 Received $150.00 Check ☑ Cash ☐ #1653

PRELIMINARY STATUS--By Gerald C. Hood **DATE:** 10/26/94

RURAL WATER

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM	Additional Site Visits
Construction	☐	☐	Approved ☐	Date ___/___/___ by ___
Bacteria	☐ ___/ml	☐ ___/ml	Provisional ☐	Date ___/___/___ by ___
Nitrate	☐ ___ppm	☐ ___ppm	Disapproved ☐	Date ___/___/___ by ___

Comments: LAGOON VERY WELL MAINTAINED!

See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved: ☐ RURAL WATER DISTRICT **SEWAGE DISPOSAL SYSTEM** Approved: ☑ Provisional Approval: ☐

Approved by Gerald C. Hood R.E.H.S. Date 10/26/94

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AS BUILT DRAWING OF SYSTEM

DATE 4-25-86 INSTALLER Capital City Trenching Inc.

