LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. ~~1969-C~~

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

SEPTEMBER 29, 1983 — THIS PERMIT EXPIRES

DAN MEYER — ISSUED TO

1691 BURR STREET LINCOLN, NE 68502 — ADDRESS

T8N, R7E, SECTION 17 NW¼ — 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	3/29/83	

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

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

20109-0977

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. _____

DATE: 3/10/83

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 17 NW 1/4
   Block _____ : Lot _____ : Addition _____
   Street Address RR 1 Roca Nebraska

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 23 . Describe _____

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

4. Distance to public sewer: _____ ft.

Dan Meyer
Signature of Applicant (Owner or Lessee)

11691 Burn Street LNK 68502
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/28/83. Date Frwd. 3/29/83. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 3/15/83. Date Frwd. 3/25/83. ACTION: Approved ☒ Disapproved ☐ Signature: Michael Oehrlein

3. City or County Engineer: Date Rec'd. 3/29/83. Date Frwd. 3/29/83. ACTION: Approved ☐ Disapproved ☐ Signature: Larry V. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 11/21/84 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: 11/21/84 By: Jerrold C. Hood

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

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 8 ; Range 7 ; Section & ¼ Section NW¼-17
Property Dimensions: 5± ac. ft. x _____ ft. Area: 5± acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 3/5/83 to 3/6/83 . Weather: Precip. _____ Temp. _____ .

Wide shallow laterals will be necessary

OWNER: Don Meyer
Address: 1691 Burr Lane 68502

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	18"											½	
2	24"											1	
3	18"											¼	
4	24"											½	
5	24"											1¼	
6	24"											1	

John Strahmyer
Signature of Person Conducting Test

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

Address 4401 So. 27th Phone 467-1627

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Judson Silt Loam
Date: March 11, 1983

NO WAS NOT ℄
IS MORRILL CLAY LOAM

Approved Percolation Rate (a)
A. 40 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

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.

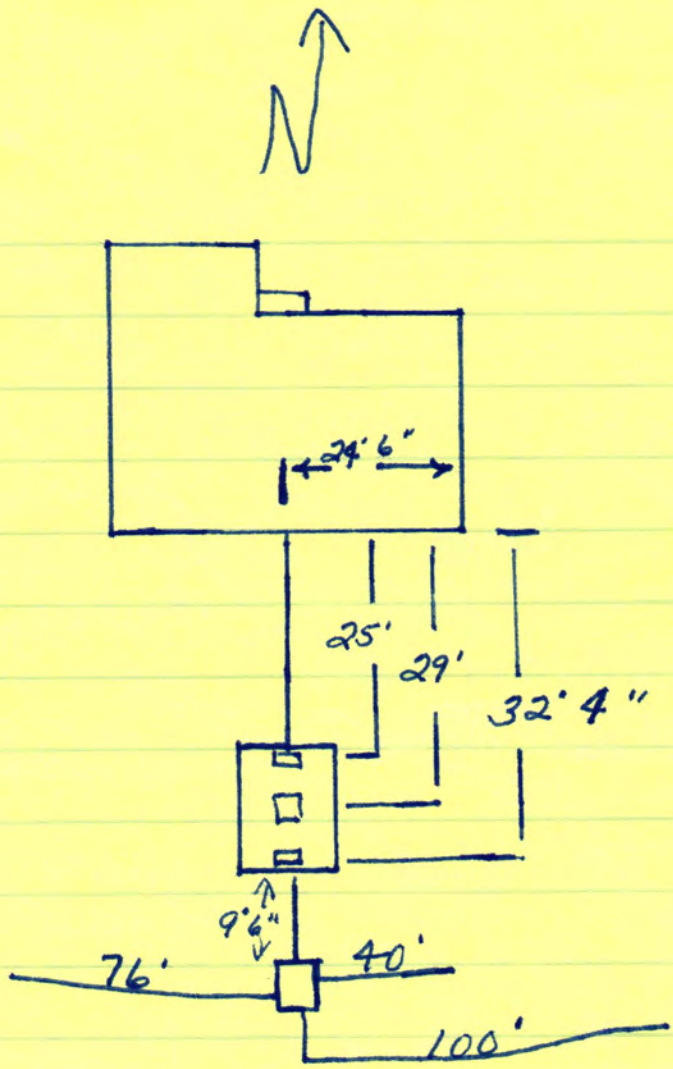
REVIEWING ACTION

Remarks: _____

Date: March 11, 1983

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals ~~215~~ ft.
3. With a Trench Width of ~~48~~ in.
4. Total Area of Lateral needed ~~860~~ sq.ft.

Gerrold C. Hood
Signature of Reviewing Official



Dan Meyers
1/2 mile North of Roca on South 46th St.

1- 1000 gal. Septic Tank
1 Dist Box
216 ft Lateral Line 4ft wide Trench
Pre Cast System.
Contractor Bouma Trenching
Firth, Nebr.
791-5760

010

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: 6-23-92

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

Legal Description of Property: TWP. 8N; RANGE 7E; SECTION 17 NW/4; BLOCK ___

LOT 93; ADDITION _____; Street Address 14905 S. 46th Roca NE 68430

Directions to Property South on S. 56th; right on Saltillo; left on 54th; right on Bennet Rd; left on 46th st. approx. 1.5 mi.

Location of Well _____ Tap Location: Inside ☐ Outside ☐

Location of Sewage System South of house Year Installed ~~1985~~ 1984

	NAME	ADDRESS	PHONE
Present Owner:	Dan & Allison Meyer	14905 S. 46th Roca, NE	
Tenant/Buyer:	Chris & Mary Kay Genzlinger	3629 W St. Lincoln NE	467-5873
Return to:	Pat Kavan - American Charter, 40th & South		

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

Signature of Applicant Christopher L. Genzlinger Address 3629 W st. Lincoln, NE

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HEALTH DEPARTMENT USE ONLY

Date Received JUNE 23, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE JUNE 25, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 6/25/92 by J.C.H.
Bacteria	☐	☐	Provisional:	☐	Date _____ by ___
Nitrate	☐	☐	Disapproved:	☐	Date _____ by ___

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

_____ See Attached Letter ☐

FINAL STATUS LA

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

APPROVED BY Jerrold C. Hood R.E.H.S. DATE JUNE 25, 1992

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