LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT
SEWAGE INSTALLATION

No. 90380011901

Issued 05/02/90
Expires 11/02/90

ESTABLISHMENT
JOHN STROHMYER
T8N R7E SEC 24
LOT 12

FEES: Permit 013754 $150.00

Total $150.00

PERMITTEE
JOHN STROHMYER
4235 NW 57 ST
LINCOLN NE 68524

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE AMOUNT

PAID

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

9038 00119

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: $_____

FILE NO. 4/14 190

DATE: _____

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 24 ; N.W 1/4 irr. tract
   Block _____ : Lot 12 F.T. : Addition _____
   Street Address 10101 Roca Rd.
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: — ft.

John L Stuhmer
Signature of Applicant (Owner or Lessee)

4235 N.W. 57th
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 4/18/90 . Date Frwd. 5/4/90 . ACTION: Approved ☒ Disapproved ☐ Signature: Jerold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5-4-90 . Date Frwd. 5-4-90 . ACTION: Approved ☑ Disapproved ☐ Signature: Paul Boeuma
3. City or County Engineer: Date Rec'd. _____ . Date Frwd. 5/03/90 . ACTION: Approved ☒ Disapproved ☒ Signature: Lloyd Williamson

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5-14-90 by: run sewer line only
Date: 9/6/90 by: J.C.H. 14' short
Date: 9/7/90 by: J.C.H.

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 9/7/90 By: Jerold C. Hood

FORM 23-43

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: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E ; Section & ¼ Section Sec 24 irr tract N.W. 1/4
Property Dimensions: _____ ft. x _____ ft. Area: 6.5 acres. (Attach Sheet C with sketch of property).

Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .

Dates of Tests: 4/14/90 to 4/15/90 . Weather: Precip. Damp Temp. 50° .

OWNER: Jan Jass

Address: 0 10101 Roca Rd

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	28"	4/14	10:AM	4/15	10:AM	4/15	12:00	6	12:30	5	30	1¼	
2	"	"	"	"	"	"	"	"	"	5¼	"	¾	
3	"	"	"	"	"	"	"	"	"	5½	"	½	
4	"	"	"	"	"	"	"	"	"	4¾	"	1¼	
5	"	"	"	"	"	"	"	"	"	5¼	"	1	

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

John Stuhmer
Signature of Person Conducting Test

Address 4235 N.W. 57th LNK Phone 470-2262

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: April 18, 1990

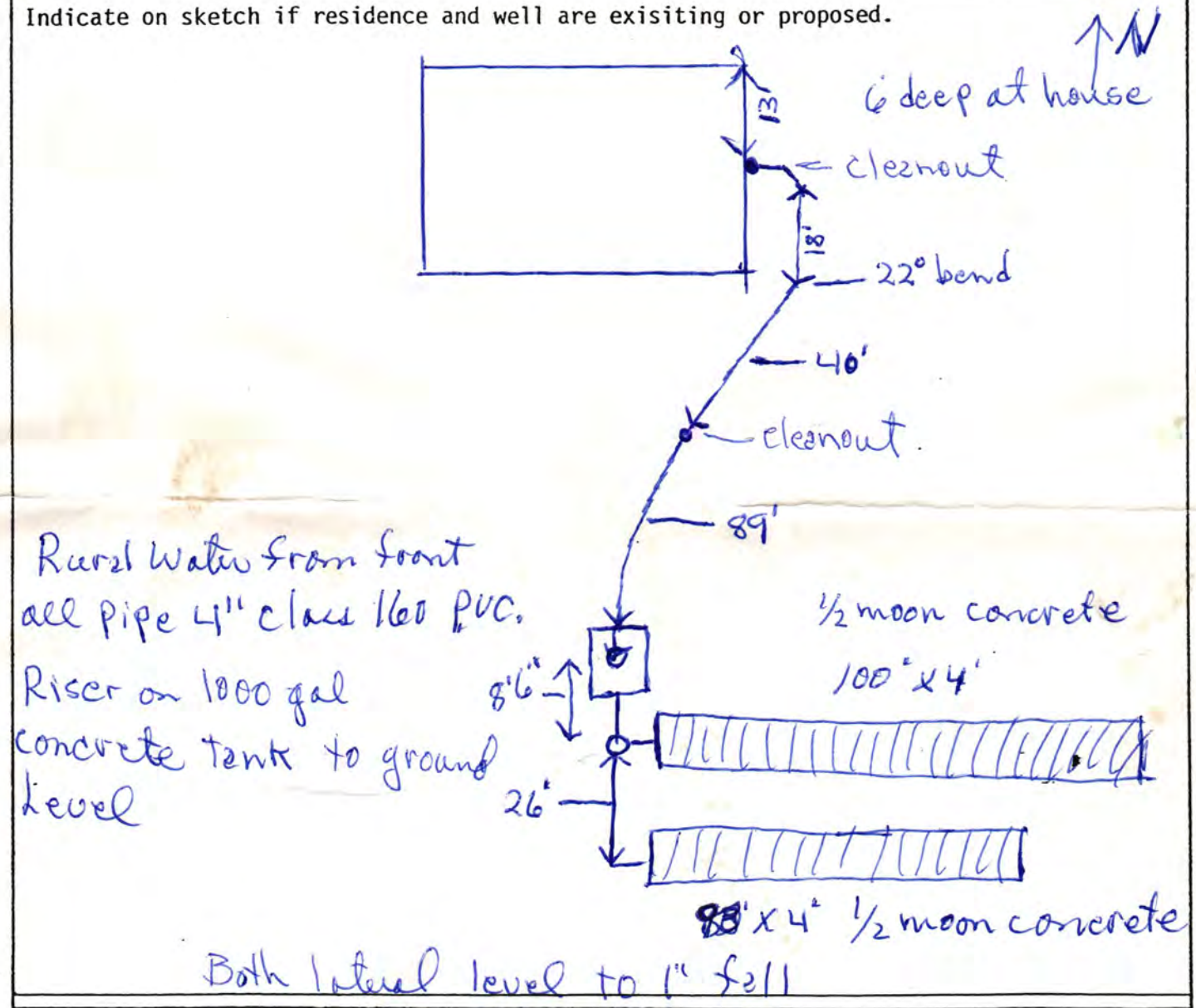
Approved Percolation Rate (a)
A. 32 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hoos
Signature of Reviewing Official

Jan Jasa 10101 Rocca Road

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._____

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



REVIEWING ACTION

Remarks: _____

_____

Date: _____

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.

_____

Signature of Reviewing Official

001

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: 10/19/92

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

Legal Description of Property: TWP. 9N (Township North); RANGE 7E; SECTION 24; BLOCK —

LOT 12; ADDITION —; Street Address 10101 Roca Rd Roca Ne

Directions to Property From 56th + Hwy 2 south on 56th to Saltillo Rd East on Saltillo to 68th South on 68th to Roca Rd East on Roca Rd 2½ miles South Side of Road

Location of Well Rural water Tap Location: Inside ☒ Outside ☒

Location of Sewage System South of house Year Installed 1990 Shelley Work 434-8512

	NAME	ADDRESS	PHONE
Present Owner:	Jan + Shelley Jasa	10101 Roca Rd Roca Ne 68430	792-9323
Tenant/Buyer:			
Return to:			

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

Signature of Applicant Jan Jasa Address 10101 Roca Rd Roca Ne

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HEALTH DEPARTMENT USE ONLY

Date Received OCTOBER 19, 1992 Received $150.00 Check ☒ Cash ☐

PRELIMINARY STATUS--DATE OCTOBER 20, 1992

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:		SITE VISIT:
Construction	☐	☐	Approved:	☒	Date 10/20/92 by L.G.H.
Bacteria	☐	☐	Provisional:	☐	Date ____ by ____
Nitrate	☐	☐	Disapproved:	☐	Date ____ by ____

Comments: RECOMMEND FILLING IN LOW SPOTS OVER LATERALS TO PREVENT SURFACE WATER FROM STANDING ON THEM. See Attached Letter ☐

FINAL STATUS RURAL WATER DISTRICT WATER

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

APPROVED BY Lorrold C. Hood R.E.H.S. DATE OCTOBER 20, 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