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. 2558-C

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 of 6PM ; Section N.W. 1/4 sec. 24 ;
   Block _____ : Lot 13 It. : Addition _____
   Street Address 10001 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.

Thomas M. Hulbert
Signature of Applicant (Owner or Lessee)

10001 Roca RD.
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/11/87. Date Frwd. 9/11/87. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. _____. Date Frwd. _____. ACTION: Approved ☐ Disapproved ☐ Signature: _____
3. City or County Engineer: Date Rec'd. 9/11/87. Date Frwd. 9/11/87. ACTION: Approved ☒ Disapproved ☐ Signature: Larry D. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5-31-88 by: saw line, tank & area to be covered in
Date: 6-8-88 by: saw other work completed completed
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-5-88 By: Ron Yagow

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

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
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B

FILE NO. 1558-C

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E of 6PM ; Section & ¼ Section N.W. ¼ section 24.
Property Dimensions: 305 ft. x 780 ft. Area: 5½ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 9-8-87 to 9-9-87 . Weather: Precip. none Temp. 75° .

OWNER: Thomas M. Hulbert

Address: ~~12745 Pine Lake RD~~ 10001 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		Elapsed	Water	Percolation
Hole 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.)	Time (Min.)	Level Drop (in.)	Rates (Min./in.)
1	3'	9-8	9:00AM	9-9	9:00AM	9-9	12:30PM	6"	1:00PM	5¼"	30 min.	¾"	
2	3'	9-8	" "	" "	" "	" "	" "	" "	" "	5½"	" "	½"	
3	3'	9-8	" "	" "	" "	" "	" "	" "	" "	4¾"	" "	1¼"	
4	3'	9-8	" "	" "	" "	" "	" "	" "	" "	4¾"	" "	1¼"	
5	3'	9-8	" "	" "	" "	" "	" "	" "	" "	5¾"	" "	¼"	
6	3'	9-8	" "	" "	" "	" "	" "	" "	" "	5½"	" "	½"	

Thomas M. Hulbert
Signature of Person Conducting Test

Address ~~12745 Pine Lake RD.~~ 10001 ROCA RD Phone 488-7451

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

(Do not write below this line)

REVIEWING ACTION

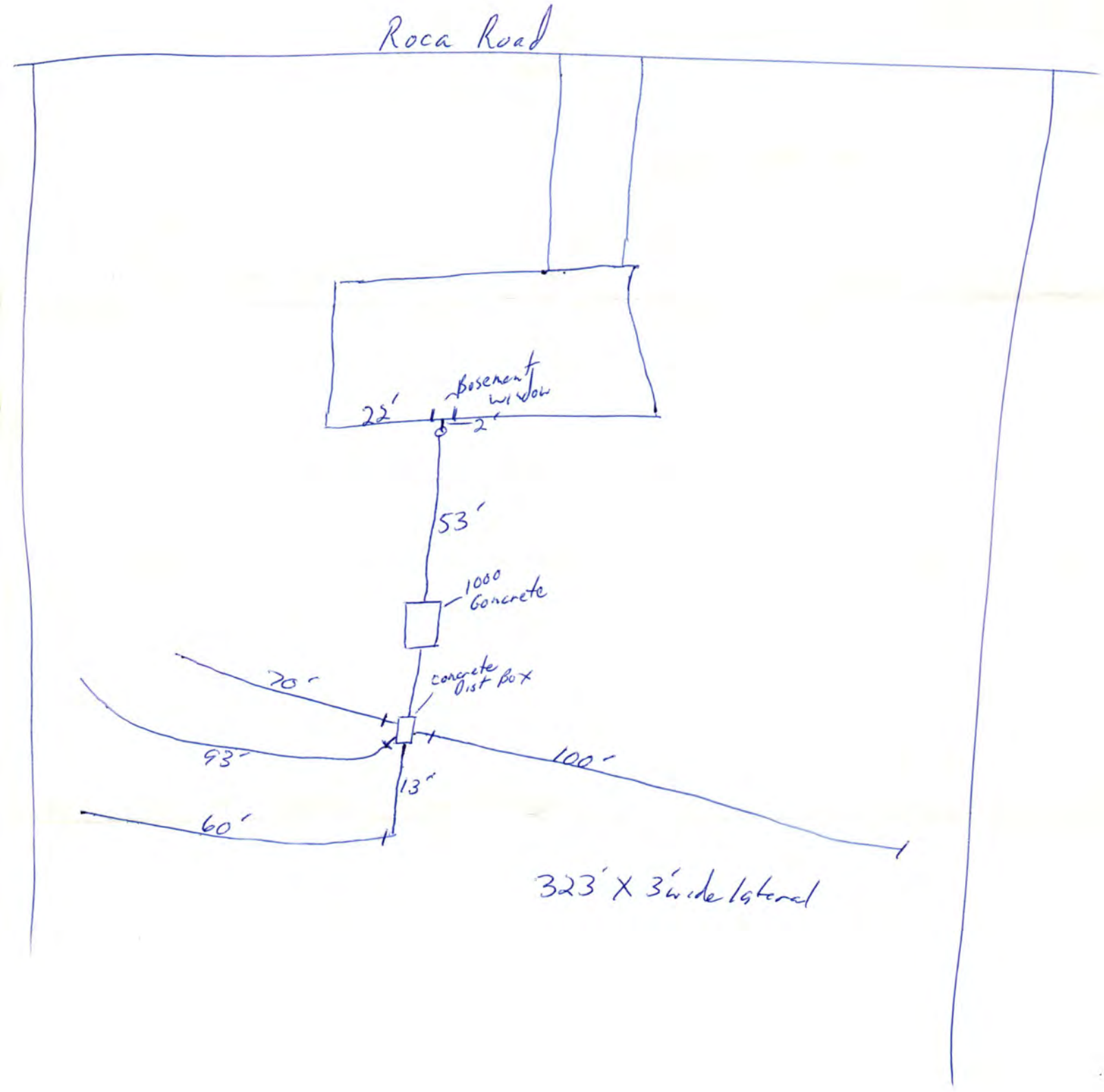
Remarks: _____
Soil Type (SCS): Wymore Silty Clay Loam
Date: SEPTEMBER 11, 1987

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

Jerrold C. Hood
Signature of Reviewing Official

As Built

10000 Roca Road
Tom Hulbert



047

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: 3/16/93

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

Legal Description of Property: TWP. 9N; RANGE 7E; SECTION 24; BLOCK ___

LOT 13; ~~ADDITION~~ in NW1/4; Street Address 10001 Roca Rd. Roca, Ne. 68430

Directions to Property Hwy 77 South to Roca Rd. Go East thru Roca, Ne. Then Contender 4 miles East. (South Side of Road.)

Location of ~~Well~~ ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System South of Home Approx 120 Ft. Year Installed 12/88 6/8/88

	NAME	ADDRESS	PHONE
Present Owner:	Ray & Sally Kostanek	10001 Roca Rd. Roca, Ne.	792-2829
Tenant/Buyer:	N/A		
Return to:	1st Commerce Savings ATTN: Jerry Pesek	P.O. Box 80036 Lincoln, Ne 68501	434-4842

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

Signature of Applicant Sally K Kostanek Address 10001 Roca Rd. Roca Ne 68430

HEALTH DEPARTMENT USE ONLY

Date Received 03/17/93 Received $150.00 Check ☑ (mo. ✓) Cash ☐ #29-502421955

PRELIMINARY STATUS--DATE MARCH 22, 1993

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐	☐
Nitrate	☐	☐

RURAL WATER DISTRICT

SEWAGE SYSTEM:
Approved: ☒
Provisional: ☐
Disapproved: ☐

SITE VISIT:
Date 3/22/93 by J.C.H.
Date ___ by ___
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 RURAL WATER DISTRICT

WATER SYSTEM: Approved: ☐

SEWAGE DISPOSAL SYSTEM: Approved: ☒ Provisional Approval: ☐

APPROVED BY Gerald C. Wood R.E.H.S. DATE MARCH 22, 1993

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
INDIVIDUAL SEWAGE SYSTEMS - County Resolution #2832

FG.4120

043

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

2200 ST. MARYS
LINCOLN, NEBRASKA 68502

FILE NO. 2558-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

MARCH 11, 1988 — THIS PERMIT EXPIRES

THOMAS M. HULBERT, 12745 Pinelake Rd, P.O. Box 68-A, Walton, NE 68461
ISSUED TO — ADDRESS

T8N; R7E of 6 PM; Sec NW¼ 24; Lot 13; 1001 Roca Road
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
MC	9-11-87	

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

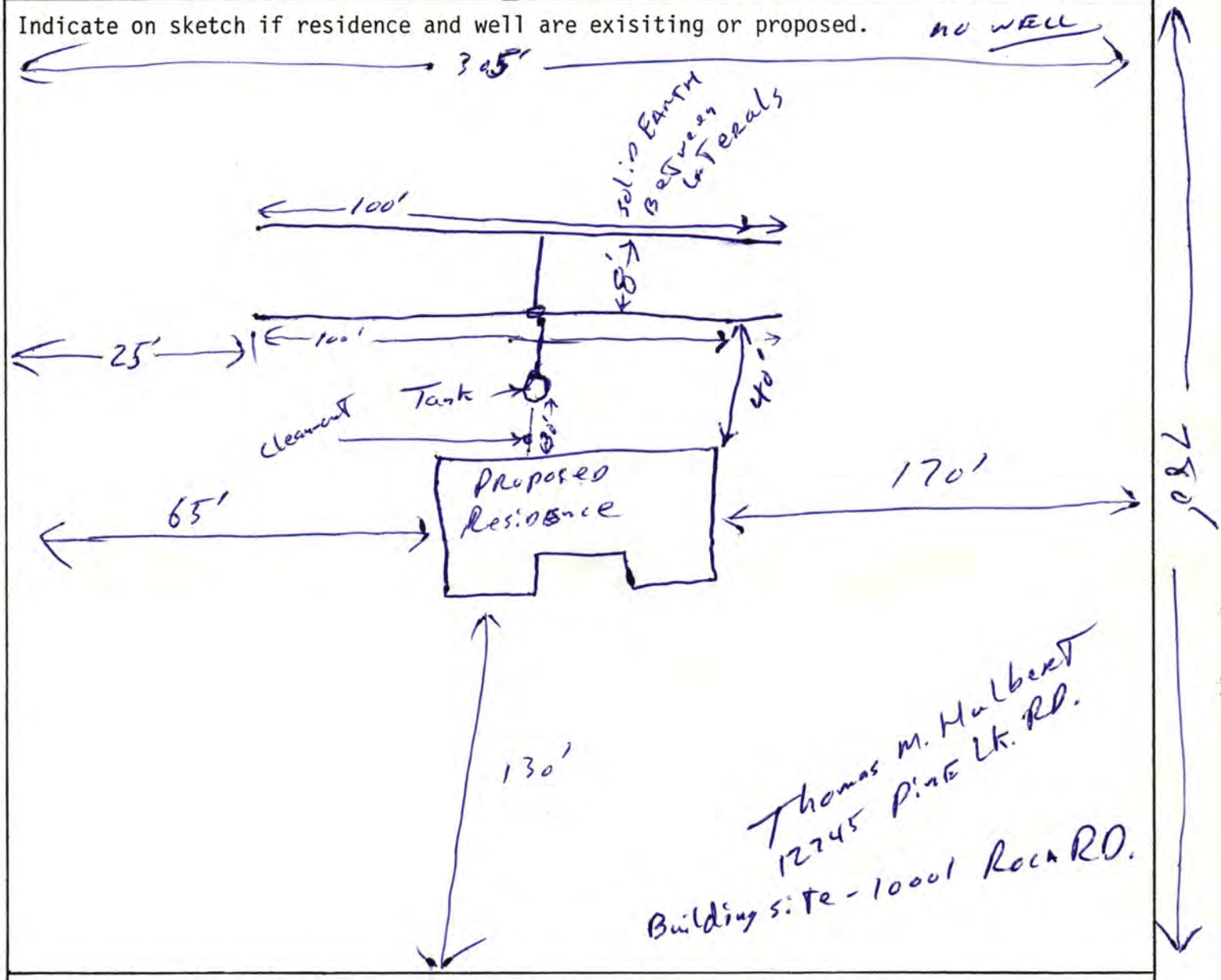
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
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2200 St. Marys Avenue
Lincoln, Nebraska 68502
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C

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

FILE NO. 1558-C

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



REVIEWING ACTION

Remarks: _____

Date: SEPTEMBER 11, 1987

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 862 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official