LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
SEWAGE INSTALLATION

No. 94380117001

Issued 05/24/94
Expires 11/24/94
Revenue Code 18754

Establishment
DENNIS FREY
T8N R7E SEC 27
LOT 30
8001 MARTELL ROAD

FEES: $150.00

TOTAL $150.00

Permittee
DENNIS FREY
RR0001
BOX 0088A
HICKMAN NE 68372

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW
"POST IN A PROMINENT PLACE"

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

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FILING FEE: $_____

FILE NO._____

DATE: 5-13-94

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. 8 N ; Range 7E ; Section 27 ;
   Block _____ : Lot 30 : Addition _____
   Street Address 8001 Martell Rd

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe _____

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

4. Distance to public sewer: _____ ft.

Signature of Applicant (Owner or Lessee)

RT#1 Box 88A Nickman NE 68352
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/13/94. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold E. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5-19-94. Date Frwd. 5-23-94. ACTION: Approved ☒ Disapproved ☐ Signature: Annette Pool

3. City or County Engineer: Date Rec'd. 5-24-94. Date Frwd. 5-24-94. ACTION: Approved ☒ Disapproved ☐ Signature: Larry D. Worrell

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 5/13/94 by: P.D
Date: 6/16/94 by: J. C. H. Need fence & signs
Date: 8-23-94 by: P.D

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8-24-94 By: Paul Dunham

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

FORM 23-43

T8N R7E Sec 27

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

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DATE: 8001 Martel Rd
5-13-94

FILE NO. _____

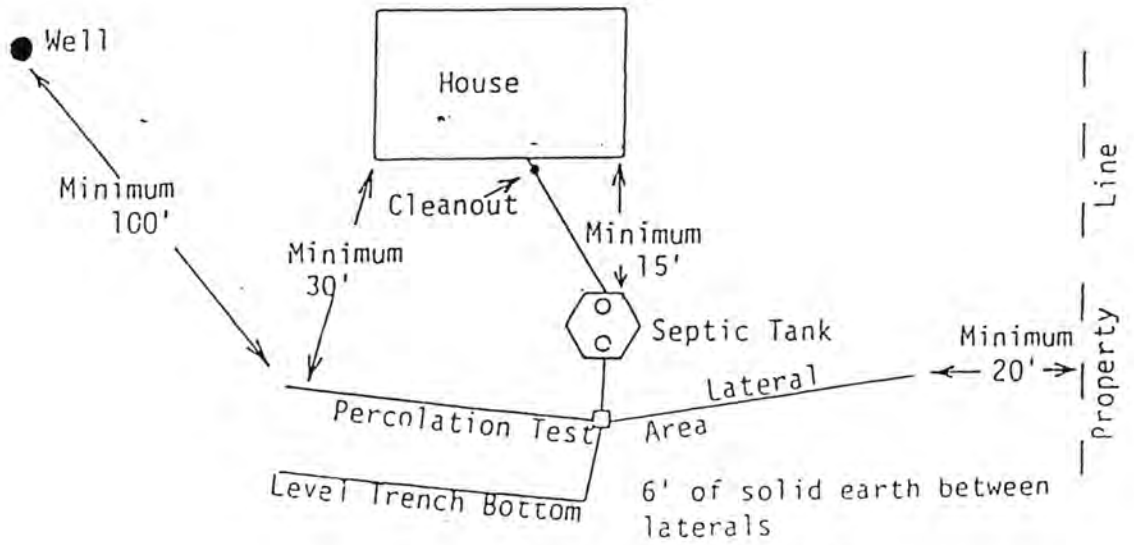
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 36 in.
3. Distance between dwelling and septic tank none ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line Rural water ft.;
Stream none 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

018

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

Legal Description of Property: Street Address 8001 Martell Road

Twp 8N Range 7E Section 27 1/4 ___ 1/4 ___ Block ___ Lot 30 Addition ___

2550 Directions to Property 1 Mile North of Hickman and 3/4 mile East on South side of Road.

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System South of Home Year Installed 9-94

	NAME	ADDRESS	PHONE
8/10/94 Present Owner:	Jeff Krejci	8001 Martell Road, Hickman, Ne	792-2411
Tenant/Buyer:			
Return to:	Jeff Krejci	8001 Martell Road, Hickman	792-2258

Signature of Applicant Jeff Krejci Address 8001 Martell Rd Hickman, Ne. 68372 Date 8/29/95

HEALTH DEPARTMENT USE ONLY

Date Received 8/30/95 Received $150.00 Check ☑ #309-641 Cash ☐

PRELIMINARY STATUS--By Jerrold Hood **DATE:** 9/1/95

WATER SYSTEM:	Approved	Disapproved
Construction	☐	☐
Bacteria	☐ ____/ml	☐ ____/ml
Nitrate	☐ ____ppm	☐ ____ppm

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: ___

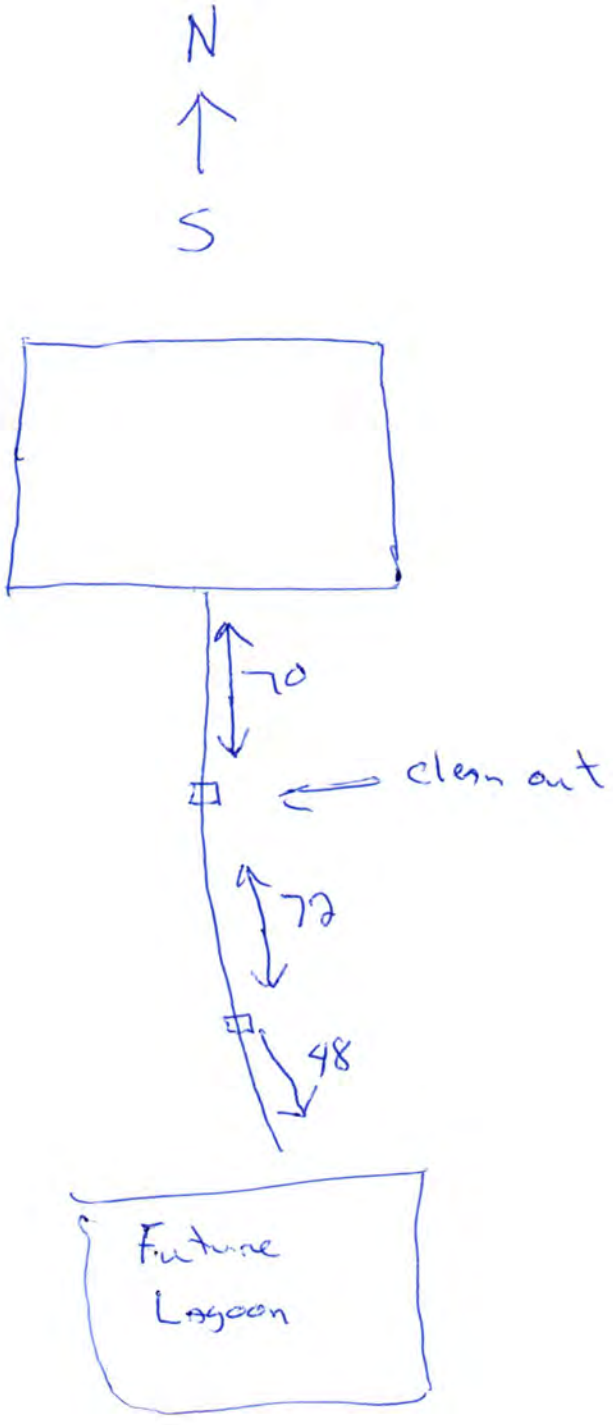
See Attached Letter ☐

FINAL STATUS

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

Approved by Jerrold C. Hood R.E.H.S. Date 9/1/95

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.


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70
clean out
72
48
Future
Lagoon