LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1088-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

December 27, 1977 — THIS PERMIT EXPIRES

Robert W. Niemeyer — ISSUED TO

1600 No. 73rd, Lincoln, NE — ADDRESS

T8N; R7E; Section 36 W½, SW¼ — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY — DATE — AMOUNT

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

Health — ISSUING OFFICER

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

FORM HD-40(73) REQUEST FOR SITE CLEARANCE 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: 475-6221)

FILE NO. 1088-C

TO: Division of Environmental Health
Lincoln-Lancaster County Health Dept.

DATE: June 24, 1977

The undersigned hereby requests SITE CLEARANCE to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

SEE ATTACHED

1. Legal description of property: Twp. 8N ; Range 7E ; Section 36 W½ SW¼
   Block ____; Lot ____; Addition ____
   Street Address ____

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

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

4. Distance to public sewer: ____ ft.

Robert W Niemeyer
Signature of Applicant (Owner or Lessee)

1600 North 73rd 68505
Address

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 6/27/77. Date Frwd. 6/27/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. ____. Date Frwd. ____. ACTION: Approved ☐ Disapproved ☐ Signature: ____
3. City or County Engineer: Date Rec'd. 6-27-77. Date Frwd. 6-28-77. ACTION: Approved ☑ Disapproved ☐ Signature: Henry Graff Asst Mgr 6/28/77

REMARKS OR REASONS FOR DISAPPROVAL ____

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

FORM HD-42(73) APPLICATION FOR PERMIT TO CONSTRUCT 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: 475-6221)

FILE NO. 1088-C

DATE: June 24, 1977

TO: Director of Health
Lincoln-Lancaster County Health Dept.

The undersigned hereby applies for a permit to construct an Individual Sewage Disposal System in conformance with appropriate Ordinance or Resolution, as described in this application and the annexed forms attached hereto.

SEE ATTACHED

1. Legal description of property: Twp. 8N ; Range 7E ; Section 36 W½ SW¼ 16.349 acres ; Block ; Lot ; Addition .
Street Address .

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

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

4. Plans and Specifications of Proposed System. (See FORM HD-45(73) PLANS & SPECIFICATIONS, SEWAGE DISPOSAL SYSTEM, attached hereto.)

5. Soil Absorption Properties. (See FORM HD-43(73) SOIL ABSORPTION TEST DATA REPORT, attached hereto).

Robert Hemmer
Signature of Applicant (owner or lessee)

1600 North 73rd 68505
Address

(Do not write below double line)

REVIEWING ACTION

1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 12-1-77 by: jw
Date: by:
Date: by:

3. Date: Approved ☒; Disapproved ☐ 12/7/77
by: Jerrold C. Hood

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 12-1-77 by: James Woerka

FORM HD-43 (73) 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)

FILE NO. 1088-C

PROPERTY WHERE SOIL TESTED:
Location: Township 8N : Range 7E
Section & ¼ Sect. 36 W½ SW¼
Property Dimensions: 675 ft. x 1283 ft.
Area: 16.34 acres. (Attach sketch of property showing hole location).
Soil Type: Silty Clay ; Silty Clay Loam ; Sandy Loam
Silty Loam ; Clay Loam ; Sandy Clay

Owner: Robert Niemeyer
Address: 1600 North 73rd 68505

Dates of Tests: June 22-77 to June 23-77. Weather: Precip. 0 Temp. 80°

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.)	Dat (Mo. Day)	Time (Hr. Min.)	Water Level (in.)	Time (Hr. Min.)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./inch)
1	32"	6/22	5 PM	6/23	5 PM	6/23	5 PM	12"	7 30 PM	5½	30 M	¾	
2										Water Still in Hole from Soak		0	
3										8½		½	
4										3½		1	
5										4¼		1	
6										5¾		¾	

Robert D Johnson
Signature of Person Conducting Test

Address 2618 No 3rd
Phone 432-3595

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

(Do not write below this line)

REVIEWING ACTION

REMARKS: Vymore Silty Clay Loam grading to Judson Silt Loam

DATE: June 27, 1977

Approved Percolation Rate (a)
A. 44 min./inch
B. _____ min./inch
C. _____ min./inch

Jerrold C. Hood
Signature of Reviewing Official

FORM HD- 45(73) PLANS & SPECIFICATIONS
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: 475-6221)

FILE NO. 1088-C

SPECIFICATIONS

DATE: June 24, 1977

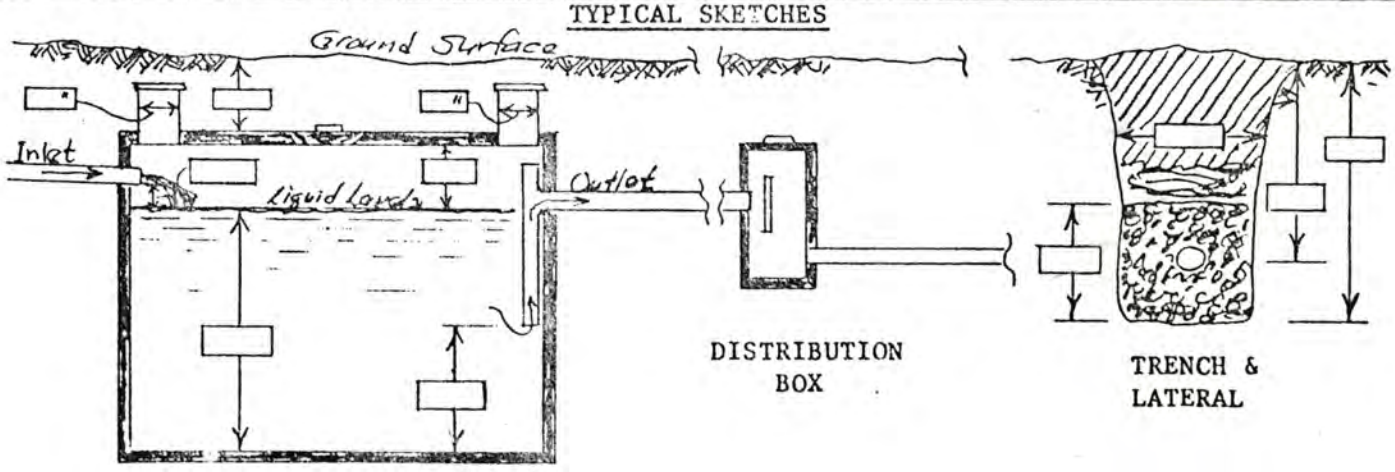
A. BUILDING SEWER:
1. Material PVC; Diameter 4 in.
2. Distance above basement floor ___ in.; or below basement floor 18 in.
3. Distance between dwelling and septic tank 100 ft.
4. Number of clean-outs 1.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.;
Property Line ___ ft.

B. SEPTIC TANK (Provide construction drawings.)
1. Material Concrete No. of compartments 1.
2. Capacity 1000 gals.; Liquid depth 51 in.
3. Factory Built: Yes ☒ (Company Pre Cast Step) No ☐
4. Manholes: Over Inlet; diam. 6 in.
Over Outlet; diam. 6 in.
Below Grade 14 in.
5. Inlet: Baffle ☐; or Tee ☐
6. Outlet: Baffle ☒; or Tee ☐
Depth of outlet below inlet 1 in.
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 Concrete No. available outlets 5.
2. Factory Built: Yes ☒, (Company Pre Cast Step) No ☐
3. Dimension: Length 21 in.; Width 14 in. Depth 14 in.
4. Distance from Septic Tank ___ ft.
5. Serial Distribution: Yes ☐, No ☐ (If yes, show detailed plans.)

D. ABSORPTION FIELD: (Provide drawings.)
1. Type: Half moon
2. Lateral Lines: Depth below grade 24 in. Number 2; Length of each line 100 ft Total length of Laterals 152 ft.; Slope ___ in/100 ft. Diameter of pipe 20 in.; Shape Half moon Material: concrete ☒; fiber asbestos ☐; clay ☐; other ___ Distance between lateral lines ___ ft.
3. Trench Dimensions: Depth 48 in.; Width 48 in.
4. Filter Material: Road gravel. Depth of material from trench bottom 24 in.
5. Distances To:
Well or Suction Line ___ ft.;
Stream ___ ft.; Pressure Line ___ ft.
Property Line ___ ft.
6. Percolation Rate: 44 minutes/inch

TYPICAL SKETCHES



SEPTIC TANK

Robert Nemeyer
Signature of Applicant

APPLICATION FOR WELL REGISTRATION AND SAMPLING

DATE:

Legal Description of Property T8N R7E Sec 36 W½ SW ¼
Directions to Property 20100 S. 96th

Land Owners
Name: Robert Niemeyer
Address: Box 124-A Hickman
Phone: 792-2794

Send Results to:
Name: Robert Niemeyer
Address: Box 124-A RR. # 1 Hickman NE 68372
Phone: 792-2794

Land Owners Signature: Diane Niemeyer

I hereby authorize the Health Department to inspect, sample, and register the well on the above property.

Well Data: Please fill in the following information as thoroughly as possible. Leave blank any areas that are unknown.

Approximate Depth of well	55 FT
Casing Material	plastic
Casing Diameter	4inch
Is well located in a pit	NO
Type of pump	Submersable

POINT SOURCES - DISTANCE WITHIN 1/2 MILE OF WELL FROM: UPHILL/DOWNHILL FROM WELL

HOUSE FOUNDATION	300 (distance)	FEET	U/(D)
CESSPOOL	—	FEET	U/D
SEPTIC TANK	500	FEET	U/(D)
SEWAGE DISTRIBUTION FIELD	500 +	FEET	U/(D)
WASTE STABILIZATION LAGOON	—	FEET	U/D
BARN YARD	400	FEET	U/(D)
NEAREST WELL	1000	FEET	U/D
NEAREST PASTURELAND	500	FEET	U/D
NEAREST CROPLAND	600	FEET	(U)/D
SHOP	—	FEET	U/D
GRAINERY	—	FEET	U/D
FUEL TANKS	—	FEET	U/D
OTHER POTENTIAL CONTAMINATION SOURCE	—	FEET	WHAT?

ADM.0002/34

WATER CHEMISTRY

STATE LAB NO. 15 13125

COMPLETE INFORMATION BELOW

DATE COLLECTED 7-5-94 (MO. DAY) 10:35 (YEAR HOUR)

SAMPLE COLLECTED BY DROZ

SAMPLE LOCATION Niemeyer 20100 S. 96th

PROPERTY LEGAL DESCRIPTION: COUNTY LANC

QRTR ____ SECT 36 TWNSHP 8 S RANGE 7 W

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:

LCCHD
3140 N ST
LINCOLN NE 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

FOR LABORATORY USE ONLY

TEST METHOD: USEPA METHOD 353.2

NITRATE ANALYSIS FOR DRINKING WATER

NITRATE — N 3.9 mg/l

NOT TESTED BECAUSE OF:
☐ INSUFFICIENT AMOUNT ☐ DAMAGE ☐ IMPROPER CONTAINER

TEST(S) BY

FOR ACCOUNTING USE ONLY

LWN 88

REPORTED '94 JUL -6 P4:31

RECEIVED JUL -5 '94 A11:54

WATER MICROBIOLOGY

STATE LAB NO. 14 14281

COMPLETE INFORMATION BELOW

DATE COLLECTED 7-5-94 (MO DAY YEAR) 10:35 (HOUR)

SAMPLE COLLECTED BY P. DROZEMANN

SAMPLE LOCATION Niemeyer 20100 S. 76

PROPERTY LEGAL DESCRIPTION: COUNTY LANC

QRTR ____ SECT 36 TWNSHP 8 (N) (S) RANGE 7 (E) (W)

NAME AND ADDRESS OF PERSON TO RECEIVE EXTRA REPORT:

PLEASE PRINT COMPLETE ADDRESS
THIS LAB REPORT IS TO BE MAILED TO:
LLCHD
3140 'N' ST
LINCOLN NE 68510

STATE OF NEBRASKA DEPARTMENT OF HEALTH LABORATORIES
3701 SOUTH 14th LINCOLN, NE 68502

REPORTED

RECEIVED

'94 JUL -5 A11:55

JUL -6 A8:30 94

FOR LABORATORY USE ONLY

TEST METHOD: ☒ MEMBRANE FILTER ☐ MPN

COLIFORM PURITY TEST FOR DRINKING WATER

TOTAL COLIFORMS 0 PER 100 ML.

☒ THE WATER MEETS BACTERIOLOGICAL STANDARD
☐ WATER DOES NOT MEET BACTERIOLOGICAL STANDARD
☐ RESULTS MAY BE INVALID DUE TO EXCESSIVE AGE*
*SAMPLES RECEIVED BETWEEN 30-48 HRS. AFTER COLLECTION

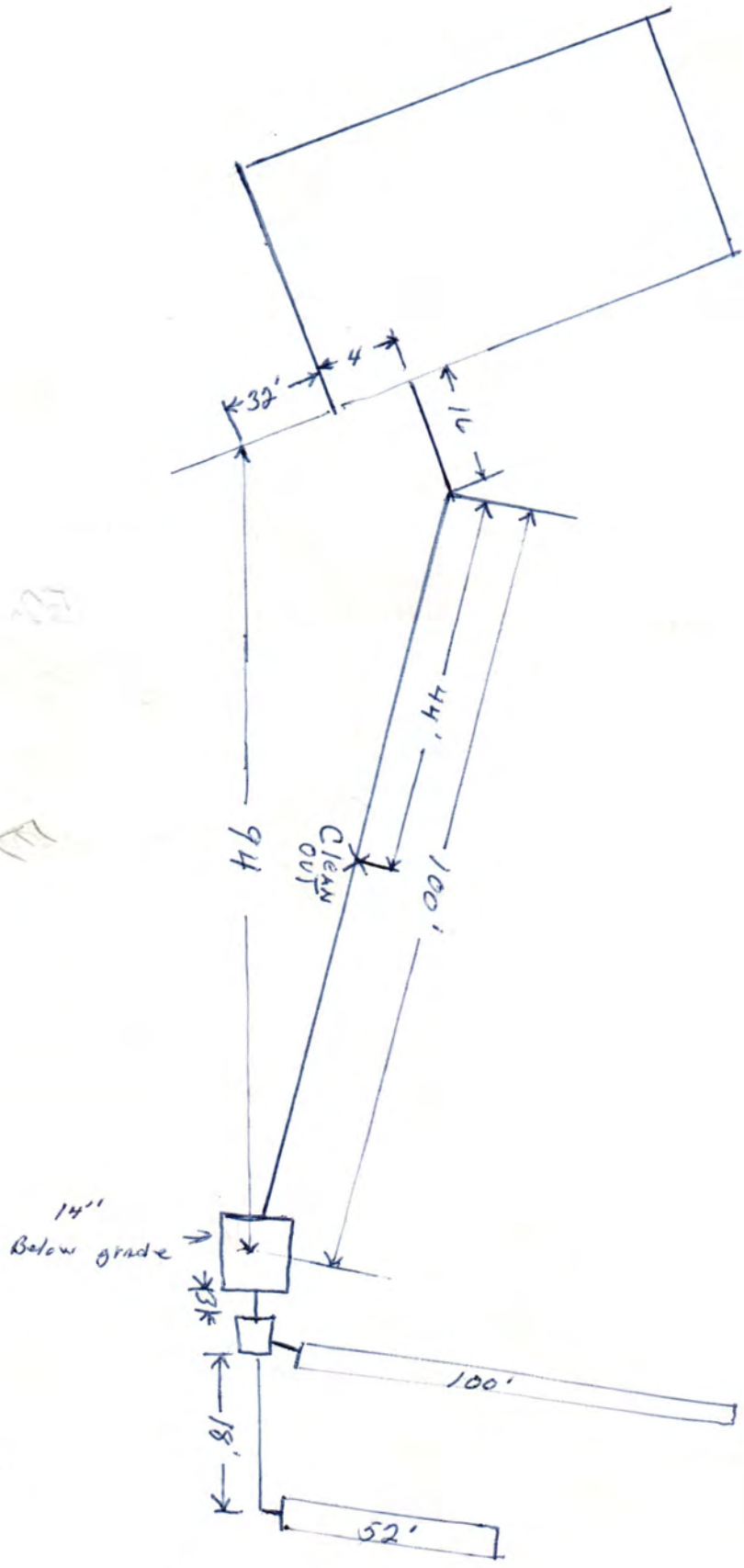
SAMPLE NOT ANALYZED BECAUSE OF:
☐ EXCESSIVE AGE ☐ INSUFFICIENT AMOUNT
☐ DAMAGE ☐ IMPROPER CONTAINER

TEST METHOD NUMBER: NIPDWR 141.27

TEST(S) BY CC

FOR ACCOUNTING USE ONLY

LWB 91



Capital City Trenching
Harold Easement
12-1-77