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. 92380084301

Issued 05/20/92
Expires 11/20/92

ESTABLISHMENT
MIKE BARTELS
T8N R7E SEC 20
LOT 26
5701 MARTELL ROAD

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE MIKE BARTELS
101 WAGON TRAIN AV
HICKMAN NE 68372

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
5/28/92	PAID

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

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._____

DATE: 5-4-92

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 28 ;
   Block _____ : Lot 26 IT : Addition _____
   Street Address 5701 Mactell Road.

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: 1 mile ~~ft~~

Signature of Applicant (Owner or Lessee)

101 Wagon Train Ave Hickman NE 68372
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 5/19/92. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 5-11-92. Date Frwd. 5-16-92. ACTION: Approved ☒ Disapproved ☐ Signature: Annette Pool

3. City or County Engineer: Date Rec'd. 05/20/92. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Hugh Williamson

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 6/25/92 by: J. C. Hood need fence etc.
Date: 9/28/92 by: J. C. Hood Have fence need sign. access?
Date: 10/6/92 by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/6/92 By: Jerrold C. Hood

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

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
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B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 8N ; Range 7E ; Section & ¼ Section 20 NW¼ of NW¼ LOT 26 IT
Property Dimensions: 330 ft. x 660 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: 5-4 to 5-5 . Weather: Precip. N/A Temp. 70° .

OWNER: Mike and Sandy Berdis
Address: 5701 Martell Road

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
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.)	Time (Min.)	Level Drop (in.)	Rates (Min./in.)
1	36	5-4	4:30	5-4	7:30	5-5	5:30	5.0	6:00	5.5	30	1/8	15.0
2	36	"	"	"	"	"	"	2.5	"	2.75	"	2/8	7.5
3	36	"	"	"	"	"	"	3.75	"	3.75	"	0	0.0
4	36	"	"	"	"	"	"	3.0	"	3.0	"	0	0.0
5	36	"	"	"	"	"	"	3 5/8	"	4.0	"	3/8	11.25
6	36	"	"	"	"	"	"	2 1/8	"	2 1/8	"	0	0.0
7	36	"	"	"	"	"	"	1 7/8	"	2.0	"	1/8	3.75

Sum of Percolation Rates: 37.50
Average of Rates: 5.36
Mean of Rates: 5.36

Signature of Person Conducting Test

Address 101 Wagon Train Ave Phone 792-2485
Hickman, NE 68372

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: _____

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

Signature of Reviewing Official

RECEIVED MAY 2 0 1992

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

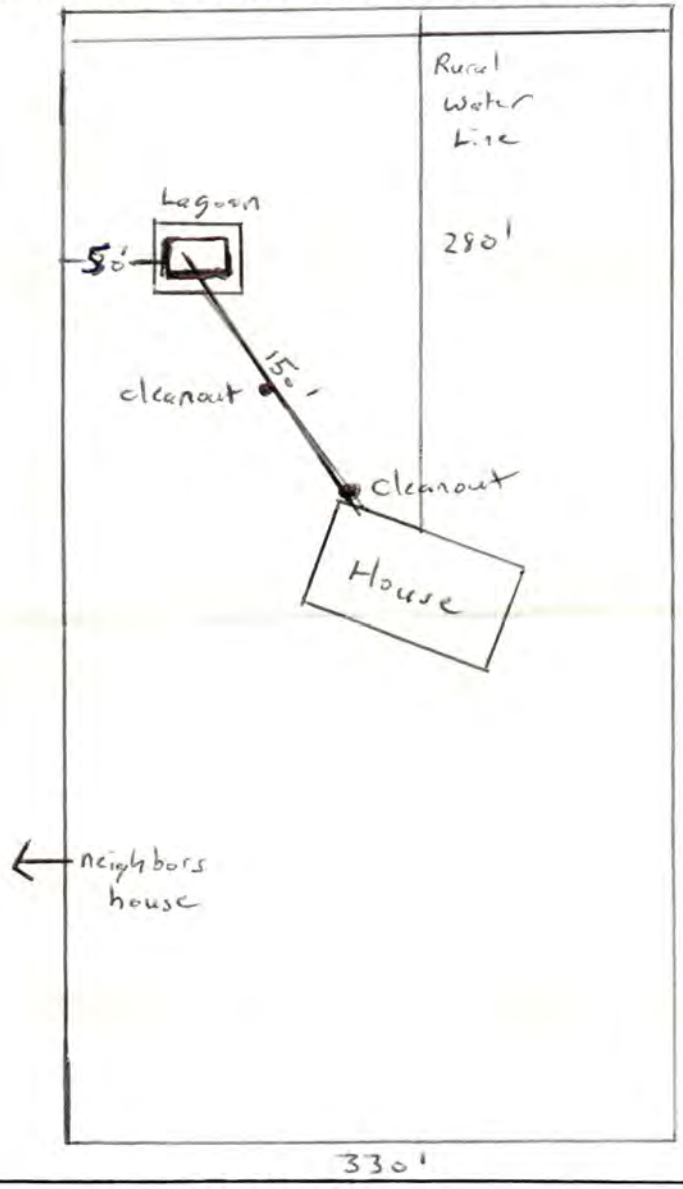
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

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.



5 Acres

All figures are proposed, except location of neighbors house which is existing.

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

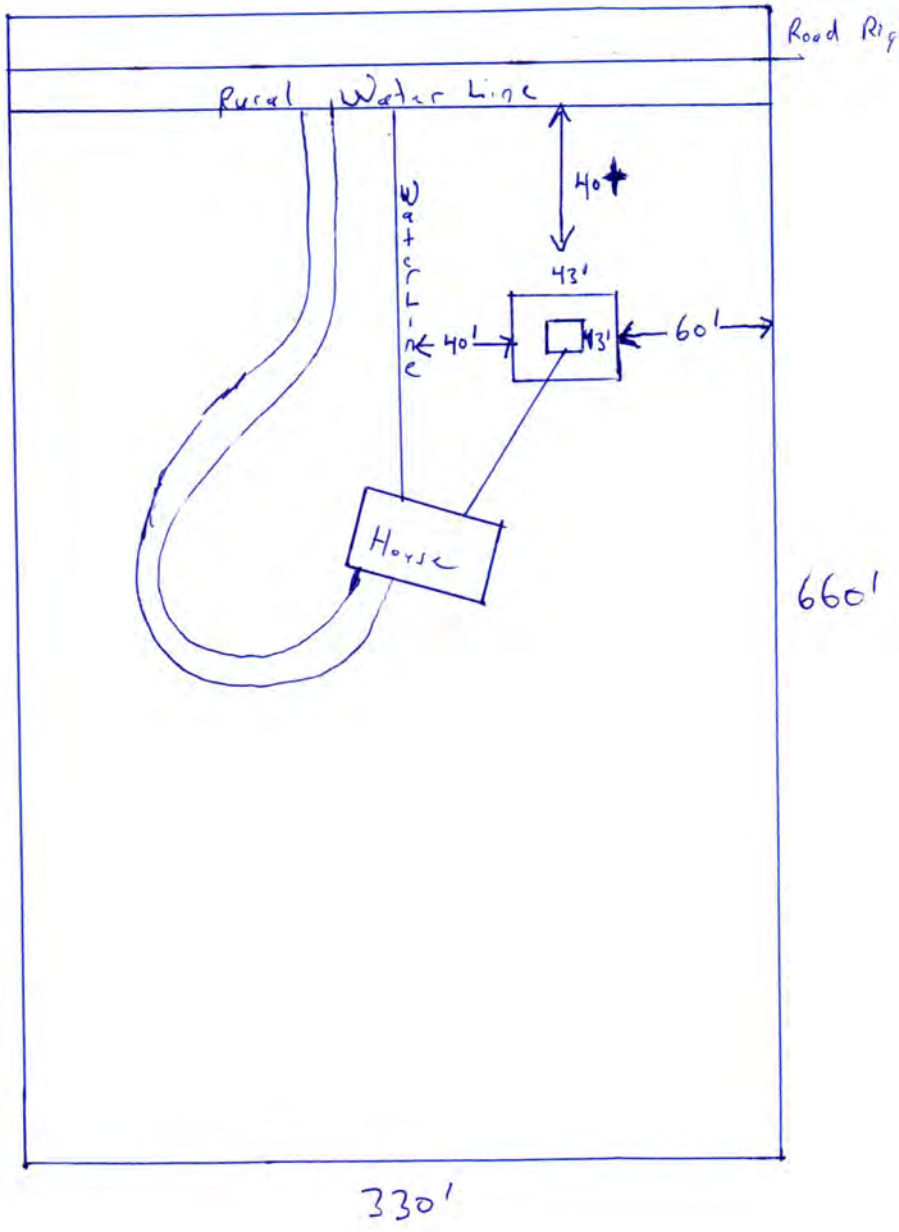
Bartels Parcel "B"

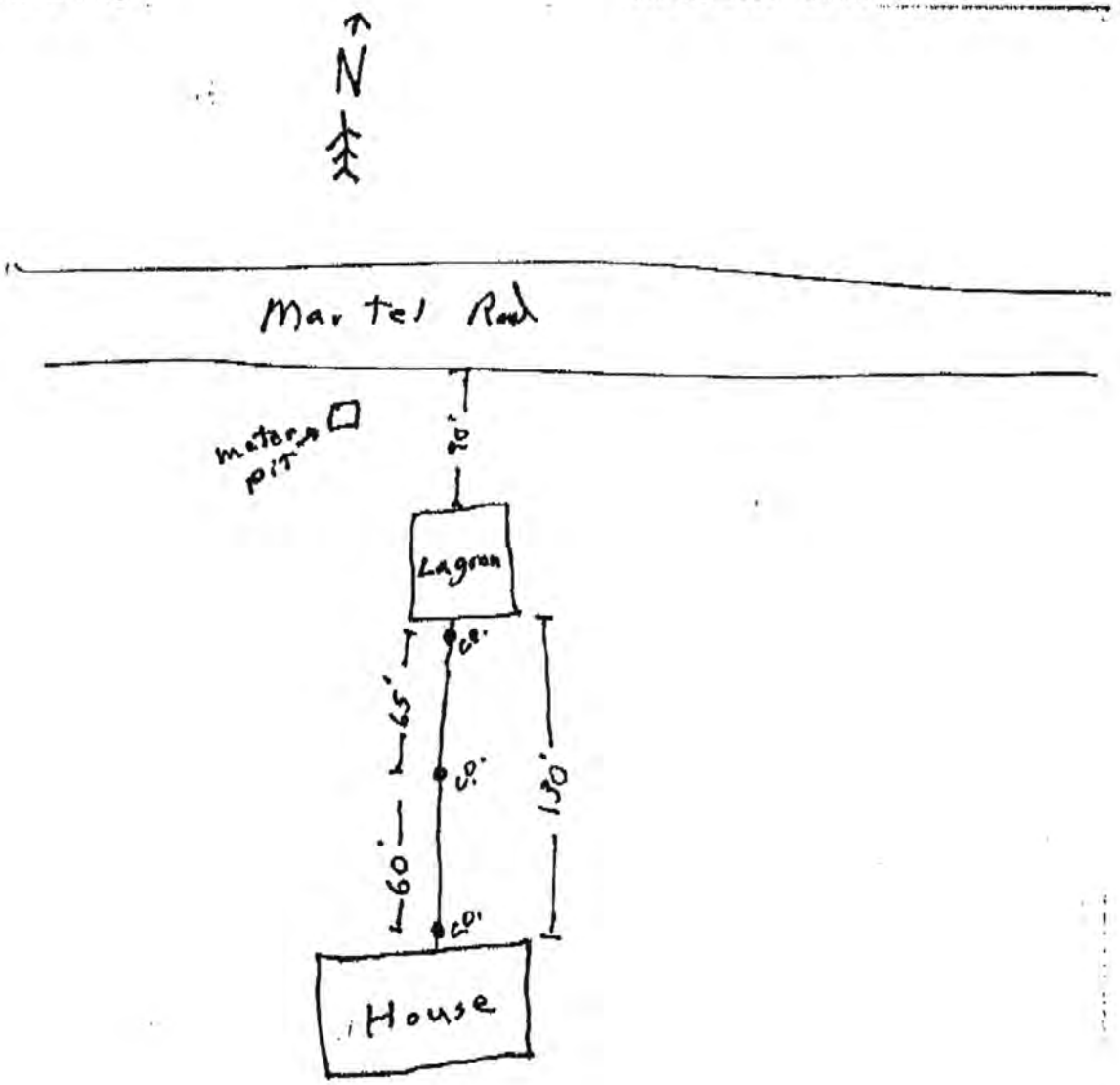
LEGAL DESCRIPTION

That part of the Lot 26 I.T. in the Northwest Quarter of the Northwest Quarter of Section 20, T 8 N, R 7 E of the 6th P.M., Lancaster County, Nebraska, more particularly described as follows, to wit:

Considering the North line of said Quarter to bear N 90 00'00"E and all other bearings used herein relative thereto:

Beginning at the North 1/16th corner of said Quarter; THENCE along the North-South 1/16th line of said Quarter, S 0 16'52"W 660.00'; THENCE parallel to said North line, S 90 00'00"W 330.00'; THENCE parallel to said North-South line N 0 16'52"E 660.00', to a point on said North line; THENCE along the North line of said Northwest Quarter N 90 00'00"E 330.00' to the Point of Beginning, said tract containing an area of 5.00 acres.





Attn. Jerry Hood.

Wellmann Plumbing
5701 Martell Road

471-8323

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
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D

DATE: 6.24.92

FILE NO. _____

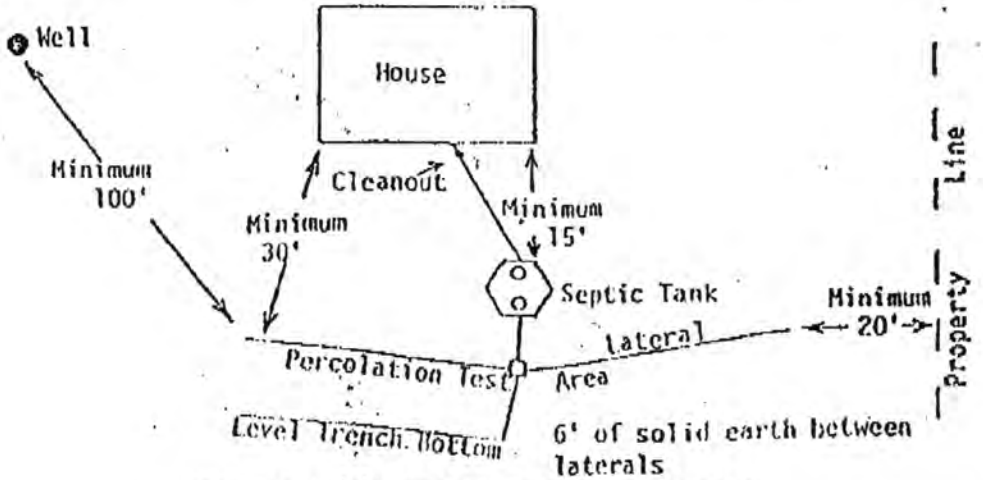
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material 22+1 ; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 18 in.
3. Distance between dwelling and septic tank 130 ft.
4. Number of clean-outs 3
5. Distances to:
Well or Suction Line — ft.; Stream — ft.; Pressure Line 15 ft.; Property Line 180 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