LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1142-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

February 16, 1978 — THIS PERMIT EXPIRES

Ronald Snyder — ISSUED TO

629 South 55 Street, Lincoln, NE — ADDRESS

T8N, R8E, Section 28, Addition West ½ SW¼ (Lagoon) — 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

HEALTH — ISSUING OFFICER

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

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. 1142-C

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

DATE: 16 Aug 77

The undersigned hereby requests SITE CLEARANCE 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 8E; Section 28
   Block ____; Lot ____; Addition West ½ SW ¼ 80 Ac
   Street Address E-134th ST / Hickman Rd.

2. Property Use: Residential X ☐ ; Commercial ____ ☐
   No. of Bedrooms 3 .
   Describe: ____
   Other Use ____ ☐
   Describe: ____

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

4. Distance to public sewer: N/A ft.

Ronald M. Long
Signature of Applicant (Owner or Lessee)

629 South 55 St
Address Lincoln Nebr 68510

(Do not write below this double line)

REVIEWING ACTION

1. Health Department: Date Rec'd. 8/16/77. Date Frwd. 8/16/77. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd. 8-16-77. Date Frwd. 8-16-77. ACTION: Approved ☒ Disapproved ☐ Signature: Tom Baasch
3. City or County Engineer: Date Rec'd. 8-16-77. Date Frwd. 8-16-77. ACTION: Approved ☒ Disapproved ☐ Signature: Henry Graff

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. 1142-C

DATE: 16 Aug 77

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.

1. Legal description of property: Twp. 8N ; Range 8E ; Section 28 ; Block ; Lot ; Addition WEST ½ SW ¼ .
Street Address E-134th ST / HICKMAN Road

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

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

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).

1 - 2 - 3 - 4 - 5 - 6
½" ¾" ½" 0 ½" ½"
Pawnee clay loam (S.C.S.)

Ronald M. Snyder
Signature of Applicant (owner or lessee)

629 South 55th St
Address
Lincoln Nebr 68510

(Do not write below double line)

REVIEWING ACTION

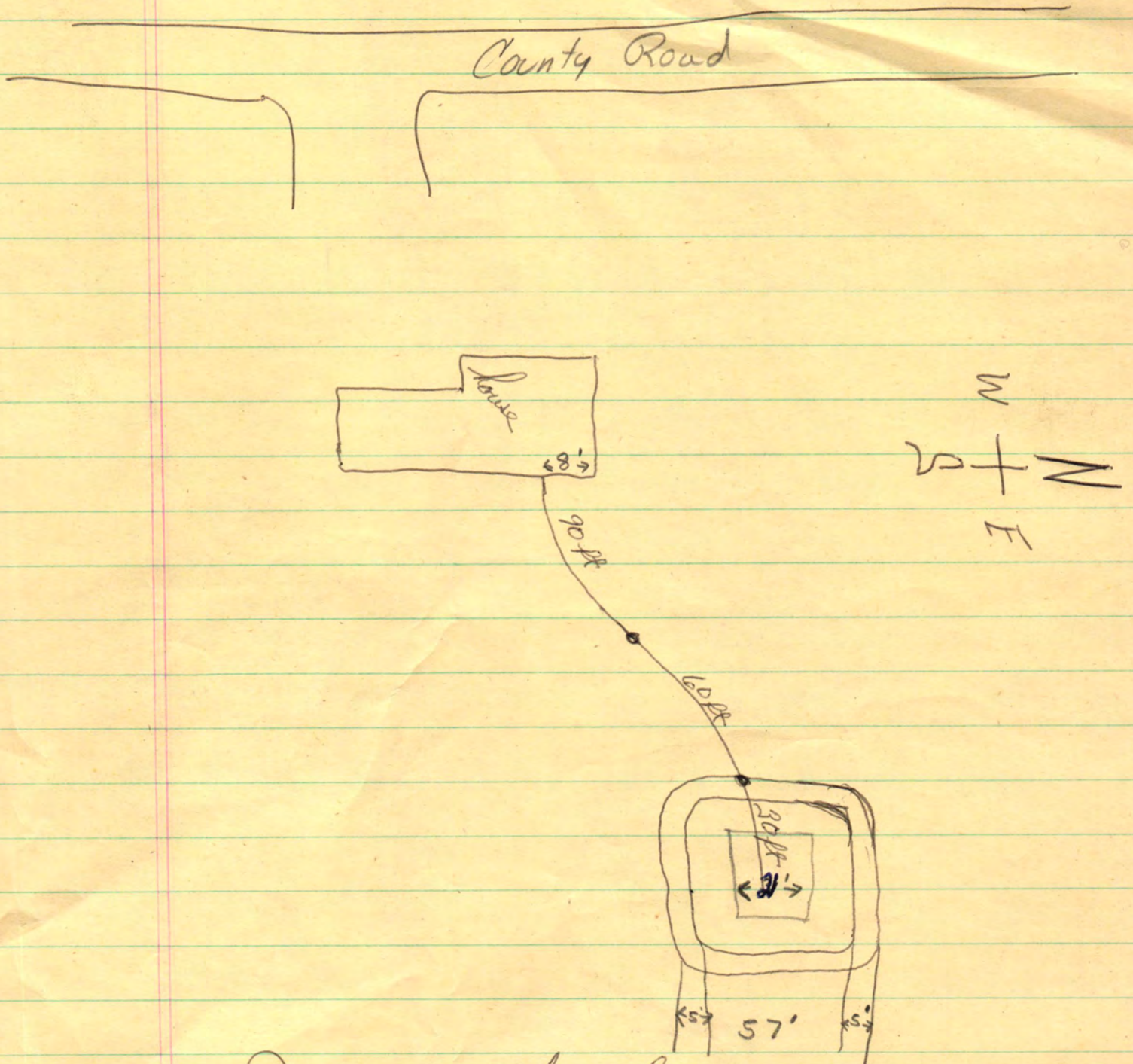
1. Date Rec'd;
Filing Fee: $ 30.00

2. Site Visits:
Date: 9-19-77 by: jw
Date: by:
Date: by:

3. Date: 8/16/77 Approved ☒ ; Disapproved ☐
by: Jerrold C. Hoe

4. INSTALLATION FINAL WRITTEN APPROVAL
Date: 9-19-77 by: James Weverka

Ron Snyder
9-20-77



Bouma trenching
Firth Nebr.
291-5760

Terry Bouma

This form is to be completed and returned to the Health Department to initiate a request for loan approval.
Make Checks Payable to: Lincoln-Lancaster County Health Department

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, NE 68502
Phone: 474-1541

Enclosed is $45.00 Fee ☒

DATE: MAY 29, 1979

The undersigned hereby requests evaluation of the following for loan approval on the below described property:

☐ Evaluation of the Individual Water Supply

☒ Evaluation of the Sewage Disposal System

Legal description of property: See ATTACHED LEGAL DESCRIPTION Twp. _____; Range _____; Section _____;

Block _____; Lot _____; Addition _____.

Street Address _____.

Directions on how to get to property So. 56 to Raca Rd., East to 134 St., South 1 1/2 mi - East side.

Location of well Rural Water Dist.

Where is tap: Inside ☐ Outside ☐

	NAME	ADDRESS	PHONE
Present Owner:	Ronald D. Snyder	46 W840 Elm St. Elburn, Ill. 60119	
Tenant:			
Send to: Lending Agency:	FIRST FEDERAL – CLOCK TOWER office 70th & A Attn: Betty Mason		

(Do not write below double lines)

Health Department: Date Received 6-6-79

Received $45.00 Check ☒ Cash ☐

Site Visits: Date 6-7-79 by RM
Date 7-2-79 by S.H.
Date 12-13-79 by RM
2-11-80 RM

Allan Brock by Barb Nelson-Agt.
Signature of Applicant

3300 No. Cotner
Address Lincoln, Nebr.

PRELIMINARY STATUS -- DATE 6-7-79

Water System: RWD #1
Approved ☒ Disapproved ☐

Sewage Disposal System:
Approved ☐ Provisional Approval ☐
Disapproved ☒

Corrections Required or Reasons for Disapproval ~~Wellhead not protected from surface water, must be sealed~~ ~~Must have fence~~, CORRECTIONS made (good grass cover). Need lock on gate & sign

☒ See Attached Letter.

FINAL APPROVAL -- DATE 2-11-80

Water System ☒ . Sewage Disposal System ☒ . BY _____

Form Number 20215-0878

002

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: 12-28-92

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

Legal Description of Property: TWP. 8N; RANGE 8E; SECTION 28; BLOCK ___

LOT 5; ADDITION ___; Street Address RT 1, Box 151, Hickman, NE

Directions to Property 134th + Hickman Rd So & East @ 1-1/4 miles east side of road

Location of Well ___ Tap Location: Inside ☐ Outside ☐

Location of Sewage System ___ Year Installed ___

	NAME	ADDRESS	PHONE
Present Owner:	Allan & Mary Brock	RT 1, Box 151, Hickman	788-2523
Tenant/Buyer:		Mary's work #	434-4535
Return to:	Security Federal Savings	PO Box 80004, Lincoln, NE 68501	474-4444

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

Signature of Applicant Christy Newhart Address Security Federal Savings

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HEALTH DEPARTMENT USE ONLY

Date Received 12/29/92 Received $150.00 Check ☒ Cash ☐ #36775

PRELIMINARY STATUS--DATE 12-30-92

WATER SYSTEM:	Approved	Disapproved	SEWAGE SYSTEM:	SITE VISIT:
Construction	☐	☐	Approved: ☐	Date 12-30-92 by P.D.
Bacteria	☐	☐	Provisional: ☐	Date 1-5-93 by P.D.
Nitrate	☐	☐	Disapproved: ☒	Date ___ by ___

Comments: Gate does not meet current safety requirements. Gate needs to be 48" in height and secured with lock

Water supply is from Rural Water System See Attached Letter ☐

1-5-93 Gate fixed, lock in place

FINAL STATUS

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

APPROVED BY Paul Dittmann DATE 1-5-93

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